

November 20, 2025

Commissioner Grace Arnold
Regulatory Framework (B) Task Force, Chair
National Association of Insurance Commissioners
444 North Capitol Street NW, Suite 700
Washington, DC 20001-1512

Delivered via email: Jolie H. Matthews

RE: AHIP Comments on draft NAIC Prior Authorization White Paper (Draft 2, v.10.28.25)

Dear Commissioner Arnold,

AHIP greatly appreciates the NAIC Regulatory Framework Task Force's work on the draft Prior Authorization White Paper. We applaud the changes which more fully represent the extensive landscape of prior authorization.

AHIP has reviewed the new redlines in the second draft and respectfully offer additional clarifications for your consideration and inclusion. These AHIP recommendations are outlined below:

1. AHIP appreciates the addition of the 2018 Industry Consensus Statement on prior authorization. That statement reflected a commitment of multiple stakeholders and we encourage inclusion. It was a consensus statement among trade associations representing physicians (AMA), medical groups (MGMA), hospitals (AHA), pharmacists (APHA), and insurers (AHIP & BCBSA), therefore it should not be attributed to one specific association.

Recommendation: Move the 2018 Industry Consensus Statement from the [Provider perspective](#) section to a joint section of the White Paper, or in the alternative, move the 2018 Industry Consensus Statement further up in the section under the [Prior authorization issue perspective](#).

2. Stakeholders raised concerns regarding the qualifications of reviewers within the [Provider perspective / Administrative burden and expense](#) section. AHIP suggests adding additional background to provide important context on state and industry reforms already being undertaken to address this concern.

Recommendation: Add proposed redlines to the new language in "Additionally, treating physicians indicated they sometimes encounter health plan reviewers who have no experience treating the patient's condition, who are not in the same specialty, or who are not physicians at all. This results in significant and unnecessary time spent attempting to justify a course of treatment to an inexperienced health plan representative and the potential for an inappropriate denial due to reviewer's lack of experience. "Most jurisdictions (33 of 56, see appendix) have requirements related to the qualifications of the reviewer; Oklahoma and Texas's requirements are detailed in the "Reform examples" section below. These standards are also included in NCQA and URAC's accreditation requirements."

3. In 2 sections that reference the PA Industry Initiative, a slight technical edit is necessary to accurately describe the initiative.

Recommendation: Make technical edits in the [Insurer Perspective/ePA section](#): "Participating health plans committed that as of Jan. 1, 2027, 80% of medical ePA ~~approvals~~ ~~requests~~ with complete information will be processed in near real-time."

Recommendation: Make technical edits in the [Reform Examples/Industry Trade Associations](#) section: “**Expand real-time responses.** In 2027, at least 80% of approvals of electronically submitted complete [medical](#) PA requests will be answered in real-time and health insurers will support federally-required technical standards for ePA requirements beyond federal programs across all insurance markets.”


4. Under the [Takeaways](#) section, AHIP recommends the following few edits be made:

Include “insurers” given their important role within the prior authorization process. Remove duplicative text (“necessary care they need”) and highlight the need for care to be affordable for patients.

Recommendation: Make the following edit: “In all conversations with providers, [insurers](#), regulators and consumer organizations, stay patient focused. The ultimate goal is to get patients the [necessary evidence-based and affordable](#) care they need in the shortest amount of time.”

AHIP appreciates the important work of the Task Force on prior authorization, and we look forward to continued collaboration and discussion on this important issue. Should you have any questions, please contact me at khathaway@ahip.org or 202.870.4468.

Sincerely,


Kris Hathaway
Vice President, State Affairs

America’s Health Insurance Plans (AHIP) is the national association whose members provide health care coverage, services, and solutions to hundreds of millions of Americans every day. We are committed to market-based solutions and public-private partnerships that make health care better and coverage more affordable and accessible for everyone. Visit www.ahip.org to learn how working together, we are Guiding Greater Health.