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Requesting Decision Criteria for Appeal or Prior Authorization Decisions

Dear providers,

This is a courtesy reminder that providers may receive a free copy of any criteria used to make appeal or prior authorization decisions by the Health Plan of San Mateo (HPSM).

Criteria includes copies of the actual benefit provision, guideline, protocol, or other information that HPSM based the decision on.

Call the HPSM UM department at **650-616-2133** for non-drug authorization decisions or **650-616-2088** for drug decisions.

Learn more by reviewing Section 7: Utilization Management of the HPSM Provider Manual: https://www.hpsm.org/provider/resources/manual/utilization-management#a8

For questions or suggestions, please contact our Provider Services department at **PSInquiries@hpsm.org**.

Thank you for your continued commitment to our community, The Health Plan of San Mateo