

Scorecard: 1/1/2025 to 12/31/2025, LOB: Medicare Advantage, Plan Name: All, Market States: All, Issuer Name: All, Contracts: H3240

2. The percentage of standard prior authorization requests that were approved, aggregated for all items and services	95.5%
3. The percentage of standard prior authorization requests that were denied, aggregated for all items and services	4.5%
4. The percentage of standard prior authorization requests that were approved after appeal, aggregated for all items and services	85%
5. The percentage of total prior authorization requests for which the timeframe for review was extended, and the request was approved, aggregated for all items and services	0%
6. The percentage of expedited prior authorization requests that were approved, aggregated for all items and services	99.3%
7. The percentage of expedited prior authorization requests that were denied, aggregated for all items and services	0.7%
8a. The average time that elapsed between the submission of a request and a determination by the payer, plan, or issuer, for standard prior authorizations, aggregated for all items and services*	5
8b. The median time that elapsed between the submission of a request and a determination by the payer, plan, or issuer, for standard prior authorizations, aggregated for all items and services*	1
9a. The average time that elapsed between the submission of a request and a decision by the payer, plan, or issuer, for expedited prior authorizations, aggregated for all items and services*	1
9b. The median time that elapsed between the submission of a request and a decision by the payer, plan, or issuer, for expedited prior authorizations, aggregated for all items and services*	1

* Indication of 1 day means up to 24 hours and includes PAs approved in real-time or near real-time.

