

Health Plan Name	Link to list of Prior Authorization requirements for Healthcare Services	Link to formulary with prior authorization requirements for Medications	Total # of prior authorization requests for physical health services	Total # of prior authorization requests denied for physical health services	Total # of prior authorizations approved for an alternative service for physical health
Molina Healthcare of Illinois, Inc. Marketplace	Prior Authorization LookUp tool	https://www.molinamarketplace.com/marketplace/il/en-us/Providers/Drug-List	1753	197	0

Total # of prior authorization requests for behavioral health services	Total # of prior authorization requests denied for behavioral health services	Total # of prior authorization requests for pharmaceuticals	Total # of prior authorization requests denied for pharmaceuticals	Total # of prior authorization denials for pharmaceuticals compared to total # of Rxs received (ratio)	Percentage of claims payments for pharmaceuticals with PA compared to all claim payments (%)	Total # of prior authorizations approved for an alternative service for behavioral health	Total # of appeals decided for physical health	Total # of appeals upheld for physical health	Total # of appeals with decision overturned for physical health	Total # of appeals for behavioral health
29	3	1,331	546	546/92.492 = 0.06%	(1,067+1,020)/(80,691+92,492) = 1.2%	0	928	775	153	33

Total # of appeals upheld for behavioral health	Total# of appeals with decision overturned for behavioral health	#1 denial reason for physical health PA	#2 denial reason for physical health PA	#3 denial reason for physical health PA	#4 denial reason for physical health PA	#5 denial reason for physical health PA	#1 denial reason for BH PA	#2 denial reason for BH PA	#3 denial reason for BH PA	#4 denial reason for BH PA	#5 denial reason for BH PA
19	14	Medical Necessity Criteria Not Met	Medical Necessity Criteria Not Met & Insufficient Clinical	Necessity Criteria Not Met& Experimental Service or procedure	N/A	N/A	Medical Necessity Criteria Not Met	N/A	N/A	N/A	N/A

Average time between submission of a complete PA request and response for physical health	Average time between submission of a complete PA request and response for behavioral health	#1 denial reason for Rx	#2 denial reason for Rx	#3 denial reason for Rx	#4 denial reason for Rx	#5 denial reason for Rx	Average time between submission of a complete PA request and response for	Average time between submission of a complete PA request and response for Rx
4.59 days	Urgent: 2.46 days Standard: 10.17 days	Insufficient Information	Criteria Not Met	Non-Covered Benefit	Administrative	Step Therapy	Urgent: 1.10 days Standard: 5.38 days	Urgent: 14.8 Hours Non-Urgent: 59.5 Hours