

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	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 Rx received (ratio)
Molina Healthcare of Illinois, Inc. Marketplace	https://umpega.molinahealthcare.com/prweb/PRAuth/app/UM	https://www.molinamarketplace.com/marketplace/il/en-us/Providers/Drug-List.aspx#drugformulary	784	203	NA	50	9	377	138	138:377 (36.6%)

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	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
326/2,579,615 (0.01%)	NA	231	208	23	18	17	1	Denied Medical Necessity Criteria	Admin Denial/Out of Network Provider	Denied Not a Covered Benefit

#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	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
NA	NA	Medical Necessity Not Met	Admin Denial/Out of Network Provider	NA	NA	NA	4.27 days	2.34 days	Criteria Not Met	Step Therapy

#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 physical health	Average time between submission of a complete PA request and response for Rx
Non-Covered Benefit	NA	NA	Urgent: 1.37 days Standard: 6.94 days	Urgent: 10.1 hours Standard: 35.9 hours