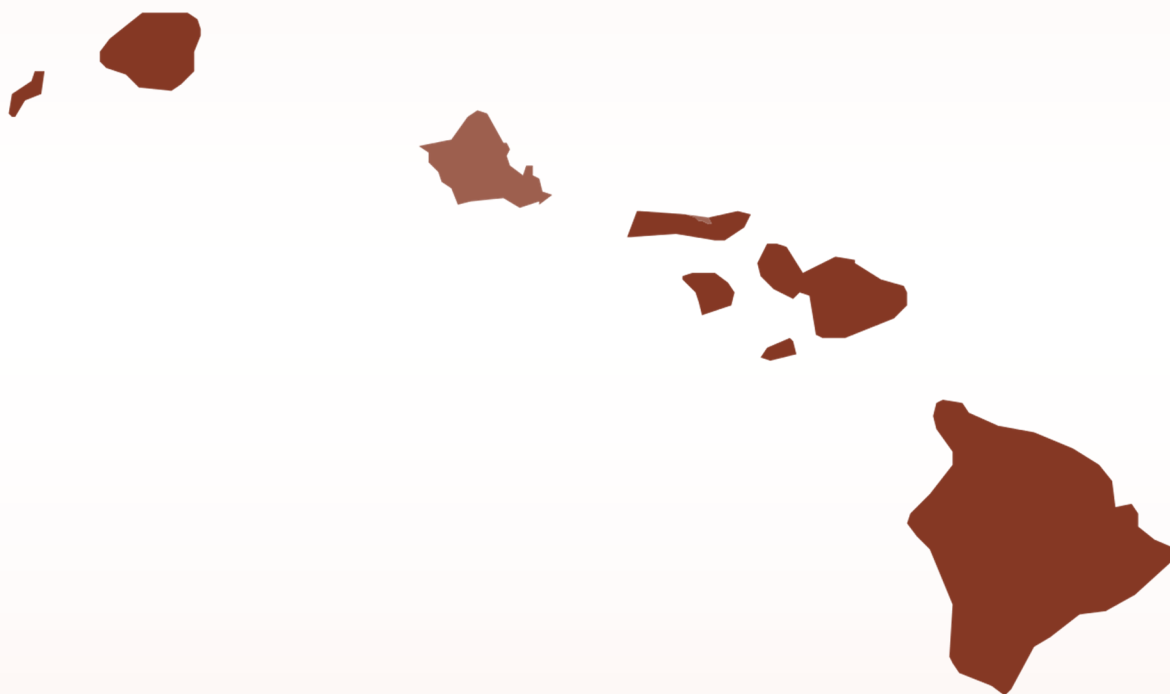


Healthcare Prior Authorization Report Hawaii 2025

(Preliminary Report Subject to Change. Updated 06/17/2026.)



State Health Planning and Development Agency
(SHPDA)

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Administrator's Message

March 2026

Prior Authorization (PA) of health insurance claims has been a very controversial and contentious issue nationwide. A national insurance executive, CEO Brian Thompson of UnitedHealthCare, was tragically murdered in 2024 highlighting these tensions. In Hawai'i, the physician community, along with other healthcare providers and consumer groups including SHPDA's Subarea Advisory Councils, have condemned the process as hampering healthcare operations, raising costs, and reducing access to care. Hawaii's healthcare insurers, with widely varying practices with respect to PA requirements and practices, maintain it is necessary to contain escalating costs. But they did not oppose HB250 (2025), and have contributed to this initial report of SHPDA on Prior Authorization practice in Hawai'i.

SHPDA proposed HB250 in 2025 to address the PA crisis. It was passed with no nay votes by the Legislature; and it was signed into law by Governor Josh Green MD as Public Law 151 (2025). The law required reporting by insurers to SHPDA of all their previous year insurance claims denials, denial challenges, and final adjudications by business line (Medicaid and commercial coverage, including Medicare Advantage) by January 31, 2026. Noting that PA reporting to the Med-QUEST agency was already required and occurring, SHPDA was directed to report the findings of this broader process to include commercial coverage to the Legislature by March 1, 2026.

SHPDA was further assigned the task of overseeing a Working Group of insurers, providers, and consumers, with DOH, DHS, and DCCA as ex-officio members to attempt to achieve consensus on the reporting parameters and format, and to further seek means of reducing tensions and streamlining the PA process across the health sector. Ultimately the goal, if PA remains a process used in the future, is to automate it.

The Working Group has engaged constructively in 2025 with four official meetings and several meetings of its related Permitted Interaction Group. Legislative House Health Chair Gregg Takayama, House Chair Lisa Martin, and Senate Health Chair Joy San Buenaventura each attended a Working Group meeting and expressed their view of the urgency of the issue and importance of our deliberations. The Working Group took the issue seriously and collegially, but the first-year process was, as expected, complicated.

Getting to consensus on the reporting template was the most difficult obstacle we faced. There are many possible categories of PA reporting – inpatient care, outpatient care, behavioral health, durable medical equipment, prescriptions and drugs, radiologic imaging, invasive procedures, transportation, and others. Med-QUEST/Medicaid already requires health plans to report some of these categories as well as various others to the state. Starting in 2026, the Centers for Medicare and Medicaid Services (CMS) mandates health plans of Medicare Advantage, state Medicaid and some other plans to publicly report certain PA metrics from the previous calendar year on their websites. However, the new CMS reporting requirements are more general, consisting mainly of total approved and denied rates of standard PAs, expedited PAs, appeals and their respective response times, but not in the service categories that Med-QUEST and Medicaid require. Insurers favored the simpler CMS reporting template, which was new and untested. Physicians and

Administrator's Message

healthcare providers favored the more detailed reporting of service categories. The Working Group was very divided on this.

The first reporting deadline of January 31 for 2025 data reporting was difficult for the health plans to accomplish. One plan needed to report previous-year 2024 data to submit a complete year because their 2025 data was not yet fully available. Others had difficulty getting their data contractors or IT staff to adjust to the format chosen.

By the January 31 deadline, few insurers could submit completed set(s) of data collection forms by line of business and by selected health care service categories as recommended by the PA Working Group using the CMS template for reporting PA metrics. The accuracy of the data is also in question. For instance, numbers reported categorically did not add up to the total or were uninterpretable. Insurers of commercial health plans might have specific timeframes for their standard PAs and expedited PAs that are different from the timeframes of those required by the CMS. As a result, insurers of commercial health plans might have difficulty extracting their PA data to complete SHPDA's data collection forms that were based on the CMS reporting template.

SHPDA was expected to compile the PA data by insurer, healthcare setting, and line of business, and to post a report of findings on the SHPDA website, including recommendations by March 1, 2026. As of this writing, SHPDA is still in the process of collecting and/or verifying information from some insurers. Therefore, the information in SHPDA's report on its website is preliminary and subject to change.

I take personal responsibility for finally agreeing that for the first round that the simpler CMS process was acceptable. However, the result is that the submissions were not aligned for easy comparison, differ from plan-to-plan on what was reported, and were difficult to fairly interpret. The Working Group will clearly need to get much more specific on the reporting template for 2027 and thereafter to effectively monitor the PA reporting in the future with the ability to fairly compare plan behaviors. SHPDA also learned that the previously required reporting to the Med-QUEST agency also contains inaccuracies and omissions. We can all do better, and we will.

Based on all of these (perhaps understandable) first-year issues, this report is being submitted four weeks late. And the plan comparison determinations offered are disappointing in lack of sufficient detail and insight to fairly compare plans and/or assess the issue comprehensively. Realistically, the reporting date needs to be moved later than January 31 by one month to February 28 to allow companies to collect and report their data through the preceding year through December 31. That would move the SHPDA reporting data to file our summary report on the website and the submission to the Legislature by March 31 of each year, rather than by March 1.

For 2027 and beyond, SHPDA will ask the Working Group to include these following consistencies to allow better comparison and understanding of the results:

Administrator's Message

- 1) We will create a separate set of data collection forms that would allow commercial insurers to report prior authorization data based on their specific timeframes for standard prior authorizations and expedited prior authorizations.
- 2) We will add an additional data collection form to the current set of data collection forms to capture the *overall* prior authorization information for each line of business.
- 3) We will add additional rows in each data collection form to capture any prior authorization decisions that do not fall into any specific decision timeframes.

Despite the issues on the completeness and the accuracy of the PA data in this report, SHPDA presents this report to the Legislature, Governor, and the public on our website in fulfillment of Act 151 (2025). It does have value. This preliminary report will at least inform the public what PA data we collect. It will also serve as a reference guide for providers of health insurance in preparation of PA data submission in the future. However, in no way is the status quo acceptable. The PA process needs to be streamlined, simplified, consistently and accurately reported, and automated.

In addition, the Working Group will continue its efforts toward streamlining and improving the entire PA process here. Our largest insurer voluntarily submitted a list of medical claims for which PA will no longer be required. SHPDA believes more of this kind of simplification should be voluntarily occurring across insurers as we examine how often some frequently invoked PA denials result routinely in reversal of the denial. This seems an apparent waste of time and resources for both providers and insurers. It is also a serious "hassle factor" for providers.

Finally, we thank the Legislature and the Governor for passage of PL 151, as well as the members of the Working Group for their contributions thus far. This is the beginning of a necessary process of streamlining and simplifying the current PA processes for the benefit of all.

Respectfully submitted,



John C. (Jack) Lewin MD
Administrator

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Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Medicare						
Diagnostic Testing						
Total Standard PA Requests	186	181	5	0	97.3	2.7
Total Expedited PA requests	91	89	2	0	97.8	2.2
Subtotal	277	270	7	0	97.5	2.5
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests	306	291	15	0	95.1	4.9
Total Expedited PA requests	71	69	2	0	97.2	2.8
Subtotal	377	360	17	0	95.5	4.5
Inpatient Hospital Services						
Total Standard PA Requests	24	23	1	0	95.8	4.2
Total Expedited PA requests	16	16	0	0	100.0	0.0
Subtotal	40	39	1	0	97.5	2.5
Outpatient Hospital Services						
Total Standard PA Requests	61	61	0	0	100.0	0.0
Total Expedited PA requests	43	43	0	0	100.0	0.0
Subtotal	104	104	0	0	100.0	0.0
Physician Services						
Total Standard PA Requests	117	110	7	0	94.0	6.0
Total Expedited PA requests	37	37	0	0	100.0	0.0
Subtotal	154	147	7	0	95.5	4.5

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Medicare						
Behavioral Health Services						
Total Standard PA Requests	8	8	0	0	100.0	0.0
Total Expedited PA requests	0	0	0	0		
Subtotal	8	8	0	0	100.0	0.0
Drugs						
Total Standard PA Requests	664	501	163	0	75.5	24.5
Total Expedited PA requests	141	109	32	0	77.3	22.7
Subtotal	805	610	195	0	75.8	24.2
Medicare Subtotal	1,765	1,538	227	0	87.1	12.9
Medicaid						
Diagnostic Testing						
Total Standard PA Requests	1,856	1,539	317	0	82.9	17.1
Total Expedited PA requests	620	610	10	0	98.4	1.6
Subtotal	2,476	2,149	327	0	86.8	13.2
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests	2,127	2,018	109	0	94.9	5.1
Total Expedited PA requests	475	469	6	0	98.7	1.3
Subtotal	2,602	2,487	115	0	95.6	4.4
Inpatient Hospital Services						
Total Standard PA Requests	459	112	347	0	24.4	75.6
Total Expedited PA requests	81	81	0	0	100.0	0.0
Subtotal	540	193	347	0	35.7	64.3

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Medicaid						
Outpatient Hospital Services						
Total Standard PA Requests	493	480	13	0	97.4	2.6
Total Expedited PA requests	302	300	2	0	99.3	0.7
Subtotal	795	780	15	0	98.1	1.9
Physician Services						
Total Standard PA Requests	474	459	15	0	96.8	3.2
Total Expedited PA requests	118	118	0	0	100.0	0.0
Subtotal	592	577	15	0	97.5	2.5
Behavioral Health Services						
Total Standard PA Requests	105	105	0	0	100.0	0.0
Total Expedited PA requests	3	3	0	0	100.0	0.0
Subtotal	108	108	0	0	100.0	0.0
Drugs						
Total Standard PA Requests	7,823	5,255	2,500	68	67.2	32.0
Total Expedited PA requests	1,458	1,115	322	21	76.5	22.1
Subtotal	9,281	6,370	2,822	89	68.6	30.4
Medicaid Subtotal	16,394	12,664	3,641	89	77.2	22.2
AlohaCare Total	18,159	14,202	3,868	89	78.2	21.3

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
Cigna						
Commercial						
Outpatient Hospital Services						
Total Standard PA Requests	4	2	2	0	50.0	50.0
Total Expedited PA requests	0	0	0	0		
Subtotal	4	2	2	0	50.0	50.0
Drugs						
Total Standard PA Requests	12	8	4	0	66.7	33.3
Total Expedited PA requests	1	1	0	0	100.0	0.0
Subtotal	13	9	4	0	69.2	30.8
Commercial Subtotal	17	11	6	0	64.7	35.3
Cigna Total	17	11	6	0	64.7	35.3
HMAA						
Commercial						
Diagnostic Testing						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMAA						
Commercial						
Inpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Outpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Physician Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Behavioral Health Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Commercial Subtotal						
HMAA Total						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMSA						
Commercial						
Diagnostic Testing						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Inpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Outpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Physician Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMSA						
Commercial						
Behavioral Health Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Commercial Subtotal						
Medicare						
Diagnostic Testing						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Inpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMSA						
Medicare						
Outpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Physician Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Behavioral Health Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Medicare Subtotal						
Medicaid						
Diagnostic Testing						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMSA						
Medicaid						
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Inpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Outpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Physician Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Behavioral Health Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMSA						
Medicaid						
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Medicaid Subtotal						
HMSA Total						
Kaiser						
Commercial						
Diagnostic Testing						
Total Standard PA Requests	1,993	1,954	39		98.0	2.0
Total Expedited PA requests	522	520	2		99.6	0.4
Subtotal	2,515	2,474	41		98.4	1.6
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests	7,884	7,288	596		92.4	7.6
Total Expedited PA requests	1,423	1,393	30		97.9	2.1
Subtotal	9,307	8,681	626		93.3	6.7
Inpatient Hospital Services						
Total Standard PA Requests	455	451	4		99.1	0.9
Total Expedited PA requests	3	3	0		100.0	0.0
Subtotal	458	454	4		99.1	0.9

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
Kaiser						
Commercial						
Outpatient Hospital Services						
Total Standard PA Requests	1,767	1,689	78		95.6	4.4
Total Expedited PA requests	289	289			100.0	
Subtotal	2,056	1,978	78		96.2	3.8
Physician Services						
Total Standard PA Requests	3,303	3,057	246		92.6	7.4
Total Expedited PA requests	124	123	1		99.2	0.8
Subtotal	3,427	3,180	247		92.8	7.2
Behavioral Health Services						
Total Standard PA Requests	11,876	11,838	38		99.7	0.3
Total Expedited PA requests	5	5	0		100.0	0.0
Subtotal	11,881	11,843	38		99.7	0.3
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Commercial Subtotal	29,644	28,610	1,034		96.5	3.5
Medicare						
Diagnostic Testing						
Total Standard PA Requests	1,381	1,370	11		99.2	0.8
Total Expedited PA requests	356	356	0		100.0	0.0
Subtotal	1,737	1,726	11		99.4	0.6

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
Kaiser						
Medicare						
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests	8,505	7,570	935		89.0	11.0
Total Expedited PA requests	1,103	1,072	31		97.2	2.8
Subtotal	9,608	8,642	966		89.9	10.1
Inpatient Hospital Services						
Total Standard PA Requests	58	58	0		100.0	0.0
Total Expedited PA requests	3	3	0		100.0	0.0
Subtotal	61	61	0		100.0	0.0
Outpatient Hospital Services						
Total Standard PA Requests	799	782	17		97.9	2.1
Total Expedited PA requests	149	149			100.0	
Subtotal	948	931	17		98.2	1.8
Physician Services						
Total Standard PA Requests	1,486	1,418	68		95.4	4.6
Total Expedited PA requests	61	60	1		98.4	1.6
Subtotal	1,547	1,478	69		95.5	4.5
Behavioral Health Services						
Total Standard PA Requests	1,089	1,085	4		99.6	0.4
Total Expedited PA requests	1	1	0		100.0	0.0
Subtotal	1,090	1,086	4		99.6	0.4

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
Kaiser						
Medicare						
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Medicare Subtotal	14,991	13,924	1,067		92.9	7.1
Medicaid						
Diagnostic Testing						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Inpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Outpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
Kaiser						
Medicaid						
Physician Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Behavioral Health Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Medicaid Subtotal						
Kaiser Total	44,635	42,534	2,101		95.3	4.7
UHA Health Insurance						
Commercial						
Diagnostic Testing						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
UHA Health Insurance						
Commercial						
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Inpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Outpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Physician Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					
Behavioral Health Services						
Total Standard PA Requests						
Total Expedited PA requests						
	Subtotal					

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
UHA Health Insurance						
Commercial						
Drugs						
Total Standard PA Requests	10,988	8,968	2,020		81.6	18.4
Total Expedited PA requests	0	0	0			
Subtotal	10,988	8,968	2,020		81.6	18.4
Other – Medical Services						
Total Standard PA Requests	7,564	5,787	1,777		76.5	23.5
Total Expedited PA requests	0	0	0			
Subtotal	7,564	5,787	1,777		76.5	23.5
Commercial Subtotal	18,552	14,755	3,797		79.5	20.5
UHA Health Insurance Total	18,552	14,755	3,797		79.5	20.5
UnitedHealthcare						
Commercial						
Diagnostic Testing						
Total Standard PA Requests	2	2	0	0	100.0	0.0
Total Expedited PA requests						
Subtotal	2	2	0	0	100.0	0.0
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
UnitedHealthcare						
Commercial						
Inpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Outpatient Hospital Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Physician Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Behavioral Health Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Commercial Subtotal	2	2	0	0	100.0	0.0

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
UnitedHealthcare						
Medicare						
Diagnostic Testing						
Total Standard PA Requests	3,726	3,446	280	44	92.5	7.5
Total Expedited PA requests	491	471	18	2	95.9	3.7
Subtotal	4,217	3,917	298	46	92.9	7.1
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests	698	589	109	0	84.4	15.6
Total Expedited PA requests	9	7	2	0	77.8	22.2
Subtotal	707	596	111	0	84.3	15.7
Inpatient Hospital Services						
Total Standard PA Requests	3,137	2,567	525	45	81.8	16.7
Total Expedited PA requests	334	322	12	0	96.4	3.6
Subtotal	3,471	2,889	537	45	83.2	15.5
Outpatient Hospital Services						
Total Standard PA Requests	2,039	1,980	57	2	97.1	2.8
Total Expedited PA requests	582	569	13	0	97.8	2.2
Subtotal	2,621	2,549	70	2	97.3	2.7
Physician Services						
Total Standard PA Requests	2,010	1,522	488	0	75.7	24.3
Total Expedited PA requests	188	181	7	0	96.3	3.7
Subtotal	2,198	1,703	495	0	77.5	22.5

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
UnitedHealthcare						
Medicare						
Behavioral Health Services						
Total Standard PA Requests	794	311	482	0	39.2	60.7
Total Expedited PA requests	110	110	0	0	100.0	0.0
Subtotal	904	421	482	0	46.6	53.3
Drugs						
Total Standard PA Requests	1,839	1,795	44	0	97.6	2.4
Total Expedited PA requests	254	250	4	0	98.4	1.6
Subtotal	2,093	2,045	48	0	97.7	2.3
Medicare Subtotal	16,211	14,120	2,041	93	87.1	12.6
Medicaid						
Diagnostic Testing						
Total Standard PA Requests	400	334	66		83.5	16.5
Total Expedited PA requests	13	13	0		100.0	0.0
Subtotal	413	347	66		84.0	16.0
Durable Medical Supplies/Medical Equipment						
Total Standard PA Requests	3,816	2,767	1,049		72.5	27.5
Total Expedited PA requests	136	116	20		85.3	14.7
Subtotal	3,952	2,883	1,069		73.0	27.0
Inpatient Hospital Services						
Total Standard PA Requests	1,579	1,492	87		94.5	5.5
Total Expedited PA requests	245	241	4		98.4	1.6
Subtotal	1,824	1,733	91		95.0	5.0

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 1. Overview:

Insurers, Plans, Services, PA Requests and Approved Rates

Insurer/Plan/Service PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
UnitedHealthcare						
Medicaid						
Outpatient Hospital Services						
Total Standard PA Requests	4,274	3,967	307		92.8	7.2
Total Expedited PA requests	761	740	21		97.2	2.8
Subtotal	5,035	4,707	328		93.5	6.5
Physician Services						
Total Standard PA Requests	16,141	14,959	1,182		92.7	7.3
Total Expedited PA requests	1,577	1,499	78		95.1	4.9
Subtotal	17,718	16,458	1,260		92.9	7.1
Behavioral Health Services						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Drugs						
Total Standard PA Requests						
Total Expedited PA requests						
Subtotal						
Medicaid Subtotal	28,942	26,128	2,814		90.3	9.7
UnitedHealthcare Total	45,155	40,250	4,855	93	89.1	10.8
State Total	126,518	111,752	14,627	182	88.3	11.6

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Medicare										
Diagnostic Testing										
Total Expedited PA requests	2		2							
Total Standard PA Requests	5		5							
Subtotal	7		7							
Durable Medical Supplies/Medical Equipment										
Total Standard PA Requests	15	1	13	1						
Total Expedited PA requests	2		2							
Subtotal	17	1	15	1						
Inpatient Hospital Services										
Total Expedited PA requests	0									
Total Standard PA Requests	1		1							
Subtotal	1		1							
Outpatient Hospital Services										
Total Expedited PA requests	0									
Total Standard PA Requests	0									
Subtotal	0									
Physician Services										
Total Expedited PA requests	0									
Total Standard PA Requests	7		7							
Subtotal	7		7							

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Medicare										
Behavioral Health Services										
Total Expedited PA requests	0									
Total Standard PA Requests	0									
Subtotal	0									
Drugs										
Total Standard PA Requests	163	13	64	65					21	
Total Expedited PA requests	32	3	9	15					5	
Subtotal	195	16	73	80					26	
Medicare Subtotal	227	17	103	81					26	
Medicaid										
Diagnostic Testing										
Total Expedited PA requests	10		10							
Total Standard PA Requests	317	130	175	6		2				4
Subtotal	327	130	185	6		2				4
Durable Medical Supplies/Medical Equipment										
Total Standard PA Requests	109	6	88	13		2				
Total Expedited PA requests	6	1	4	1						
Subtotal	115	7	92	14		2				
Inpatient Hospital Services										
Total Expedited PA requests	0									
Total Standard PA Requests	347	11	4			2				330
Subtotal	347	11	4			2				330

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Medicaid										
Outpatient Hospital Services										
Total Expedited PA requests	2		2							
Total Standard PA Requests	13	2	5			5				1
Subtotal	15	2	7			5				1
Physician Services										
Total Expedited PA requests	0									
Total Standard PA Requests	15		14	1						
Subtotal	15		14	1						
Behavioral Health Services										
Total Expedited PA requests	0									
Total Standard PA Requests	0									
Subtotal	0									
Drugs										
Total Expedited PA requests	322	23	296							3
Total Standard PA Requests	2,500	67	2,402	9						22
Subtotal	2,822	90	2,698	9						25
Medicaid Subtotal	3,641	240	3,000	30			11			25 335
AlohaCare Subtotal	3,868	257	3,103	111			11			51 335

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Cigna										
Commercial										
Outpatient Hospital Services										
Total Standard PA Requests	2		2							
Total Expedited PA requests	0									
Subtotal	2		2							
Drugs										
Total Expedited PA requests	0									
Total Standard PA Requests	4		4							
Subtotal	4		4							
Commercial Subtotal	6		6							
Cigna Subtotal	6		6							
HMAA										
Commercial										
Diagnostic Testing										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Durable Medical Supplies/Medical Equipment										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Commercial										
Inpatient Hospital Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Outpatient Hospital Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Physician Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Behavioral Health Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Drugs										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Commercial Subtotal										
HMAA Subtotal										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Commercial										
Diagnostic Testing										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Durable Medical Supplies/Medical Equipment										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Inpatient Hospital Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Outpatient Hospital Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Physician Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Commercial										
Behavioral Health Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Drugs										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Commercial Subtotal										
Medicare										
Diagnostic Testing										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Durable Medical Supplies/Medical Equipment										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Inpatient Hospital Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Medicare										
Outpatient Hospital Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Physician Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Behavioral Health Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Drugs										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Medicare Subtotal										
Medicaid										
Diagnostic Testing										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Medicaid										
Durable Medical Supplies/Medical Equipment										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Inpatient Hospital Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Outpatient Hospital Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Physician Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Behavioral Health Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Medicaid										
Drugs										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Medicaid Subtotal										
HMSA Subtotal										
Kaiser										
Commercial										
Diagnostic Testing										
Total Expedited PA requests	2			2						
Total Standard PA Requests	39		2	37						
Subtotal	41		2	39						
Durable Medical Supplies/Medical Equipment										
Total Standard PA Requests	596		94	502						
Total Expedited PA requests	30		3	27						
Subtotal	626		97	529						
Inpatient Hospital Services										
Total Standard PA Requests	4			4						
Total Expedited PA requests	0									
Subtotal	4			4						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Commercial										
Outpatient Hospital Services										
Total Standard PA Requests	78			78						
Total Expedited PA requests										
Subtotal	78			78						
Physician Services										
Total Expedited PA requests	1			1						
Total Standard PA Requests	246		5	241						
Subtotal	247		5	242						
Behavioral Health Services										
Total Standard PA Requests	38		1	37						
Total Expedited PA requests	0									
Subtotal	38		1	37						
Drugs										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Commercial Subtotal	1,034		105	929						
Medicare										
Diagnostic Testing										
Total Standard PA Requests	11		2	9						
Total Expedited PA requests	0									
Subtotal	11		2	9						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Medicare										
Durable Medical Supplies/Medical Equipment										
Total Expedited PA requests	31		6	25						
Total Standard PA Requests	935		118	817						
Subtotal	966		124	842						
Inpatient Hospital Services										
Total Standard PA Requests	0									
Total Expedited PA requests	0									
Subtotal	0									
Outpatient Hospital Services										
Total Standard PA Requests	17		1	16						
Total Expedited PA requests										
Subtotal	17		1	16						
Physician Services										
Total Standard PA Requests	68		1	67						
Total Expedited PA requests	1			1						
Subtotal	69		1	68						
Behavioral Health Services										
Total Standard PA Requests	4		1	3						
Total Expedited PA requests	0									
Subtotal	4		1	3						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)																			
		R1	R2	R3	R4	R5	R6	R7	R8	R9											
Kaiser																					
Medicare																					
Drugs																					
Total Expedited PA requests																					
Total Standard PA Requests																					
Subtotal																					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: right;">Medicare Subtotal</td> <td style="width: 10%; text-align: center;">1,067</td> <td style="width: 10%;"></td> <td style="width: 10%; text-align: center;">129</td> <td style="width: 10%; text-align: center;">938</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>											Medicare Subtotal	1,067		129	938						
Medicare Subtotal	1,067		129	938																	
Medicaid																					
Diagnostic Testing																					
Total Standard PA Requests																					
Total Expedited PA requests																					
Subtotal																					
Durable Medical Supplies/Medical Equipment																					
Total Expedited PA requests																					
Total Standard PA Requests																					
Subtotal																					
Inpatient Hospital Services																					
Total Expedited PA requests																					
Total Standard PA Requests																					
Subtotal																					
Outpatient Hospital Services																					
Total Standard PA Requests																					
Total Expedited PA requests																					
Subtotal																					

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Medicaid										
Physician Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Behavioral Health Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Drugs										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Medicaid Subtotal										
Kaiser Subtotal										
	2,101		234	1,867						

UHA Health Insurance

Commercial

Diagnostic Testing

Total Expedited PA requests

Total Standard PA Requests

Subtotal

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UHA Health Insurance										
Commercial										
Durable Medical Supplies/Medical Equipment										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Inpatient Hospital Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Outpatient Hospital Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Physician Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Behavioral Health Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UHA Health Insurance										
Commercial										
Drugs										
Total Standard PA Requests	2,020									
Total Expedited PA requests	0									
Subtotal	2,020									
Other – Medical Services										
Total Expedited PA requests	0									
Total Standard PA Requests	1,777									
Subtotal	1,777									
Commercial Subtotal	3,797									
UHA Health Insurance Subtotal	3,797									
UnitedHealthcare										
Commercial										
Diagnostic Testing										
Total Expedited PA requests										
Total Standard PA Requests	0									
Subtotal	0									
Durable Medical Supplies/Medical Equipment										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Commercial										
Inpatient Hospital Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Outpatient Hospital Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Physician Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Behavioral Health Services										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Drugs										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Commercial Subtotal										
0										

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Medicare										
Diagnostic Testing										
Total Expedited PA requests	18		18							
Total Standard PA Requests	280	2	276	2						
Subtotal	298	2	294	2						
Durable Medical Supplies/Medical Equipment										
Total Expedited PA requests	2		1	1						
Total Standard PA Requests	109	2	17	90						
Subtotal	111	2	18	91						
Inpatient Hospital Services										
Total Standard PA Requests	525		510	15						
Total Expedited PA requests	12		12							
Subtotal	537		522	15						
Outpatient Hospital Services										
Total Standard PA Requests	57	2	52	3						
Total Expedited PA requests	13		13							
Subtotal	70	2	65	3						
Physician Services										
Total Standard PA Requests	488		37	451						
Total Expedited PA requests	7		7							
Subtotal	495		44	451						

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Medicare										
Behavioral Health Services										
Total Standard PA Requests	482	83	397	2						
Total Expedited PA requests	0									
Subtotal	482	83	397	2						
Drugs										
Total Expedited PA requests	4		4							
Total Standard PA Requests	44		43	1						
Subtotal	48		47	1						
Medicare Subtotal	2,041	89	1,387	565						
Medicaid										
Diagnostic Testing										
Total Standard PA Requests	66	3	62		1					
Total Expedited PA requests	0									
Subtotal	66	3	62		1					
Durable Medical Supplies/Medical Equipment										
Total Standard PA Requests	1,049	21	699	305	15					9
Total Expedited PA requests	20		10	9	1					
Subtotal	1,069	21	709	314	16					9
Inpatient Hospital Services										
Total Standard PA Requests	87	2	3	8	1					73
Total Expedited PA requests	4	1	1							2
Subtotal	91	3	4	8	1					75

Section I. Hawaii Health Care Services Prior Authorization (PA), 2025

Table 2. Overview:

Insurers, Plans, Services and PA Request Denial Reasons

Insurer/Plan/Service PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Medicaid										
Outpatient Hospital Services										
Total Expedited PA requests	21	1	16			1				3
Total Standard PA Requests	307	7	104	4		1				191
Subtotal	328	8	120	4		2				194
Physician Services										
Total Standard PA Requests	1,182	103	300	372	306	10				91
Total Expedited PA requests	78	5	48	18		5				2
Subtotal	1,260	108	348	390	306	15				93
Behavioral Health Services										
Total Standard PA Requests										
Total Expedited PA requests										
Subtotal										
Drugs										
Total Expedited PA requests										
Total Standard PA Requests										
Subtotal										
Medicaid Subtotal	2,814	143	1,243	716	307	34				371
UnitedHealthcare Subtotal	4,855	232	2,630	1,281	307	34				371
State Total	14,627	489	5,973	3,259	307	45			51	706

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-1A. Diagnostic Testing:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMAA						
Total Standard PA Requests						
Total Expedited PA requests						
HMAA Total						
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	1,993	1,954	39		98.0	2.0
Total Expedited PA requests	522	520	2		99.6	0.4
Kaiser Total						
	2,515	2,474	41		98.4	1.6
UHA Health Insurance						
Total Standard PA Requests						
Total Expedited PA requests						
UHA Health Insurance Total						
UnitedHealthcare						
Total Standard PA Requests	2	2	0	0	100.0	0.0
Total Expedited PA requests						
UnitedHealthcare Total						
	2	2	0	0	100.0	0.0
State Total						
	2,517	2,476	41	0	98.4	1.6

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMAA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
HMSA									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									
Kaiser									
Standard PA Total									
Total Standard PA Requests	1,993	1,954	39		98.0	2.0	98.0	2.0	
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported	1,993	1,954	39	0	98.0	2.0	98.0	2.0	
Expedited PA Total									
Total Expedited PA requests	522	520	2		99.6	0.4	99.6	0.4	
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported	522	520	2	0	99.6	0.4	99.6	0.4	

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
UHA Health Insurance									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									
UnitedHealthcare									
Standard PA Total									
Total Standard PA Requests	2	2	0	0	100.0	0.0	100.0	0.0	
Standard PA By Decision Timeframe									
Standard – 7 Days	2	2	0	0	100.0	0.0	100.0	0.0	
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported	0	0	0	0			0.0	0.0	

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
UnitedHealthcare									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-2A. Diagnostic Testing:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Total Standard PA Requests										
Total Expedited PA requests										
HMAA Subtotal										
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	39		2	37						
Total Expedited PA requests	2			2						
Kaiser Subtotal										
UHA Health Insurance										
Total Standard PA Requests										
Total Expedited PA requests										
UHA Health Insurance Subtotal										
UnitedHealthcare										
Total Standard PA Requests	0									
Total Expedited PA requests										
UnitedHealthcare Subtotal										
State Total										
	41		2	39						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	39		2	37						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	39	0	2	37	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	2		2							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	2	0	0	2	0	0	0	0	0	0
UHA Health Insurance										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	0									

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Standard PA By Decision Timeframe										
Standard – 7 Days	0									
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 1-3. Diagnostic Testing:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
HMAA				
HMSA				
Kaiser				
UHA Health Insurance				
UnitedHealthcare	0	0		
State Average	0	0		

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-1A. Durable Medical Supplies/Medical Equipment:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMAA						
Total Standard PA Requests						
Total Expedited PA requests						
HMAA Total						
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	7,884	7,288	596		92.4	7.6
Total Expedited PA requests	1,423	1,393	30		97.9	2.1
Kaiser Total						
	9,307	8,681	626		93.3	6.7
UHA Health Insurance						
Total Standard PA Requests						
Total Expedited PA requests						
UHA Health Insurance Total						
UnitedHealthcare						
Total Standard PA Requests						
Total Expedited PA requests						
UnitedHealthcare Total						
State Total	9,307	8,681	626		93.3	6.7

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMAA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests	7,884	7,288	596		92.4	7.6	92.4	7.6
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	7,884	7,288	596	0	92.4	7.6	92.4	7.6
Expedited PA Total								
Total Expedited PA requests	1,423	1,393	30		97.9	2.1	97.9	2.1
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	1,423	1,393	30	0	97.9	2.1	97.9	2.1

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UHA Health Insurance								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
UnitedHealthcare									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-2A. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Total Standard PA Requests										
Total Expedited PA requests										
HMAA Subtotal										
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	596		94	502						
Total Expedited PA requests	30		3	27						
Kaiser Subtotal										
UHA Health Insurance										
Total Standard PA Requests										
Total Expedited PA requests										
UHA Health Insurance Subtotal										
UnitedHealthcare										
Total Standard PA Requests										
Total Expedited PA requests										
UnitedHealthcare Subtotal										
State Total	626		97	529						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	596		94	502						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	596	0	94	502	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	30		3	27						
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)									
		R1	R2	R3	R4	R5	R6	R7	R8	R9	
Kaiser											
Expedited – Extension											
Expedited – Appeal											
Expedited – Excluded/Not Reported	30	0	3	27	0	0	0	0	0	0	0
UHA Health Insurance											
Standard PA Total											
Total Standard PA Requests											
Standard PA By Decision Timeframe											
Standard – 7 Days											
Standard – Extension											
Standard – Appeal											
Standard – Excluded/Not Reported											
Expedited PA Total											
Total Expedited PA requests											
Expedited PA By Decision Timeframe											
Expedited – 72 Hours											
Expedited – Extension											
Expedited – Appeal											
Expedited – Excluded/Not Reported											
UnitedHealthcare											
Standard PA Total											
Total Standard PA Requests											

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 2-3. Durable Medical Supplies/Medical Equipment:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
HMAA				
HMSA				
Kaiser				
UHA Health Insurance				
UnitedHealthcare				
State Average				

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-1A. Inpatient Hospital Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMAA						
Total Standard PA Requests						
Total Expedited PA requests						
HMAA Total						
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	455	451	4		99.1	0.9
Total Expedited PA requests	3	3	0		100.0	0.0
Kaiser Total						
	458	454	4		99.1	0.9
UHA Health Insurance						
Total Standard PA Requests						
Total Expedited PA requests						
UHA Health Insurance Total						
UnitedHealthcare						
Total Standard PA Requests						
Total Expedited PA requests						
UnitedHealthcare Total						
State Total						
	458	454	4		99.1	0.9

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMAA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests	455	451	4		99.1	0.9	99.1	0.9
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	455	451	4	0	99.1	0.9	99.1	0.9
Expedited PA Total								
Total Expedited PA requests	3	3	0		100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	3	3	0	0	100.0	0.0	100.0	0.0

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UHA Health Insurance								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
UnitedHealthcare									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-2A. Inpatient Hospital Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Total Standard PA Requests										
Total Expedited PA requests										
HMAA Subtotal										
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	4			4						
Total Expedited PA requests	0									
Kaiser Subtotal										
UHA Health Insurance										
Total Standard PA Requests										
Total Expedited PA requests										
UHA Health Insurance Subtotal										
UnitedHealthcare										
Total Standard PA Requests										
Total Expedited PA requests										
UnitedHealthcare Subtotal										
State Total	4			4						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	4			4						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	4	0	0	4	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
UHA Health Insurance										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 3-3. Inpatient Hospital Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
HMAA				
HMSA				
Kaiser				
UHA Health Insurance				
UnitedHealthcare				

State Average

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-1A. Outpatient Hospital Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
Cigna						
Total Standard PA Requests	4	2	2	0	50.0	50.0
Total Expedited PA requests	0	0	0	0		
Cigna Total	4	2	2	0	50.0	50.0
HMAA						
Total Standard PA Requests						
Total Expedited PA requests						
HMAA Total						
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	1,767	1,689	78		95.6	4.4
Total Expedited PA requests	289	289			100.0	
Kaiser Total	2,056	1,978	78		96.2	3.8
UHA Health Insurance						
Total Standard PA Requests						
Total Expedited PA requests						
UHA Health Insurance Total						
UnitedHealthcare						
Total Standard PA Requests						
Total Expedited PA requests						
UnitedHealthcare Total						
State Total	2,060	1,980	80	0	96.1	3.9

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-1A. Outpatient Hospital Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
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Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
Cigna								
Standard PA Total								
Total Standard PA Requests	4	2	2	0	50.0	50.0	50.0	50.0
Standard PA By Decision Timeframe								
Standard – 7 Days	4	2	2	0	50.0	50.0	50.0	50.0
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	0	0	0	0			0.0	0.0
Expedited PA Total								
Total Expedited PA requests	0	0	0	0				
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	0	0	0	0				
Expedited – Extension	0	0	0	0				
Expedited – Appeal	0	0	0	0				
Expedited – Excluded/Not Reported	0	0	0	0				
HMAA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMAA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
Kaiser								
Standard PA Total								
Total Standard PA Requests	1,767	1,689	78		95.6	4.4	95.6	4.4
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	1,767	1,689	78	0	95.6	4.4	95.6	4.4
Expedited PA Total								
Total Expedited PA requests	289	289			100.0		100.0	
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	289	289	0	0	100.0	0.0	100.0	0.0
UHA Health Insurance								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UHA Health Insurance								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-2A. Outpatient Hospital Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Cigna										
Total Standard PA Requests	2		2							
Total Expedited PA requests	0									
Cigna Subtotal	2		2							
HMAA										
Total Standard PA Requests										
Total Expedited PA requests										
HMAA Subtotal										
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	78			78						
Total Expedited PA requests										
Kaiser Subtotal	78			78						
UHA Health Insurance										
Total Standard PA Requests										
Total Expedited PA requests										
UHA Health Insurance Subtotal										
UnitedHealthcare										
Total Standard PA Requests										
Total Expedited PA requests										
UnitedHealthcare Subtotal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-2A. Outpatient Hospital Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
State Total	80		2	78						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Cigna										
Standard PA Total										
Total Standard PA Requests	2		2							
Standard PA By Decision Timeframe										
Standard – 7 Days	2		2							
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMAA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	78			78						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	78	0	0	78	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
UHA Health Insurance										
Standard PA Total										
Total Standard PA Requests										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UHA Health Insurance										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										

Note:
 (1) A blank cell () indicates data not available.
 (2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 4-3. Inpatient Hospital Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
Cigna	0.5	0.5		
HMAA				
HMSA				
Kaiser				
UHA Health Insurance				
UnitedHealthcare				
State Average	0.5	0.5		

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-1A. Physician Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMAA						
Total Standard PA Requests						
Total Expedited PA requests						
HMAA Total						
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	3,303	3,057	246		92.6	7.4
Total Expedited PA requests	124	123	1		99.2	0.8
Kaiser Total						
	3,427	3,180	247		92.8	7.2
UHA Health Insurance						
Total Standard PA Requests						
Total Expedited PA requests						
UHA Health Insurance Total						
UnitedHealthcare						
Total Standard PA Requests						
Total Expedited PA requests						
UnitedHealthcare Total						
State Total	3,427	3,180	247		92.8	7.2

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMAA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests	3,303	3,057	246		92.6	7.4	92.6	7.4
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	3,303	3,057	246	0	92.6	7.4	92.6	7.4
Expedited PA Total								
Total Expedited PA requests	124	123	1		99.2	0.8	99.2	0.8
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	124	123	1	0	99.2	0.8	99.2	0.8

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
UHA Health Insurance									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									
UnitedHealthcare									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
UnitedHealthcare									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-2A. Physician Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Total Standard PA Requests										
Total Expedited PA requests										
HMAA Subtotal										
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	246		5	241						
Total Expedited PA requests	1			1						
Kaiser Subtotal										
UHA Health Insurance										
Total Standard PA Requests										
Total Expedited PA requests										
UHA Health Insurance Subtotal										
UnitedHealthcare										
Total Standard PA Requests										
Total Expedited PA requests										
UnitedHealthcare Subtotal										
State Total	247		5	242						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	246		5	241						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	246	0	5	241	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	1			1						
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	1	0	0	1	0	0	0	0	0	0
UHA Health Insurance										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 5-3. Physician Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
HMAA				
HMSA				
Kaiser				
UHA Health Insurance				
UnitedHealthcare				
State Average				

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-1A. Behavioral Health Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
HMAA						
Total Standard PA Requests						
Total Expedited PA requests						
HMAA Total						
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	11,876	11,838	38		99.7	0.3
Total Expedited PA requests	5	5	0		100.0	0.0
Kaiser Total						
	11,881	11,843	38		99.7	0.3
UHA Health Insurance						
Total Standard PA Requests						
Total Expedited PA requests						
UHA Health Insurance Total						
UnitedHealthcare						
Total Standard PA Requests						
Total Expedited PA requests						
UnitedHealthcare Total						
State Total						
	11,881	11,843	38		99.7	0.3

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
HMAA									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									
HMSA									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
HMSA									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									
Kaiser									
Standard PA Total									
Total Standard PA Requests	11,876	11,838	38		99.7	0.3	99.7	0.3	
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported	11,876	11,838	38	0	99.7	0.3	99.7	0.3	
Expedited PA Total									
Total Expedited PA requests	5	5	0		100.0	0.0	100.0	0.0	
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported	5	5	0	0	100.0	0.0	100.0	0.0	

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UHA Health Insurance								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
UnitedHealthcare									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-2A. Behavioral Health Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Total Standard PA Requests										
Total Expedited PA requests										
HMAA Subtotal										
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	38		1	37						
Total Expedited PA requests	0									
Kaiser Subtotal										
UHA Health Insurance										
Total Standard PA Requests										
Total Expedited PA requests										
UHA Health Insurance Subtotal										
UnitedHealthcare										
Total Standard PA Requests										
Total Expedited PA requests										
UnitedHealthcare Subtotal										
State Total	38		1	37						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	38		1	37						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	38	0	1	37	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)									
		R1	R2	R3	R4	R5	R6	R7	R8	R9	
Kaiser											
Expedited – Extension											
Expedited – Appeal											
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0	0
UHA Health Insurance											
Standard PA Total											
Total Standard PA Requests											
Standard PA By Decision Timeframe											
Standard – 7 Days											
Standard – Extension											
Standard – Appeal											
Standard – Excluded/Not Reported											
Expedited PA Total											
Total Expedited PA requests											
Expedited PA By Decision Timeframe											
Expedited – 72 Hours											
Expedited – Extension											
Expedited – Appeal											
Expedited – Excluded/Not Reported											
UnitedHealthcare											
Standard PA Total											
Total Standard PA Requests											

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 6-3. Behavioral Health Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
HMAA				
HMSA				
Kaiser				
UHA Health Insurance				
UnitedHealthcare				
State Average				

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-1A. Drugs:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
Cigna						
Total Standard PA Requests	12	8	4	0	66.7	33.3
Total Expedited PA requests	1	1	0	0	100.0	0.0
Cigna Total	13	9	4	0	69.2	30.8
HMAA						
Total Standard PA Requests						
Total Expedited PA requests						
HMAA Total						
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UHA Health Insurance						
Total Standard PA Requests	10,988	8,968	2,020		81.6	18.4
Total Expedited PA requests	0	0	0			
UHA Health Insurance Total	10,988	8,968	2,020		81.6	18.4
UnitedHealthcare						
Total Standard PA Requests						
Total Expedited PA requests						
UnitedHealthcare Total						
State Total	11,001	8,977	2,024	0	81.6	18.4

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-1A. Drugs:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
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Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
Cigna								
Standard PA Total								
Total Standard PA Requests	12	8	4	0	66.7	33.3	66.7	33.3
Standard PA By Decision Timeframe								
Standard – 7 Days	12	8	4	0	66.7	33.3	66.7	33.3
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	0	0	0	0			0.0	0.0
Expedited PA Total								
Total Expedited PA requests	1	1	0	0	100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	1	1	0	0	100.0	0.0	100.0	0.0
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	0	0	0	0			0.0	0.0
HMAA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
HMAA									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									
HMSA									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
Kaiser								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
UHA Health Insurance								
Standard PA Total								
Total Standard PA Requests	10,988	8,968	2,020		81.6	18.4	81.6	18.4
Standard PA By Decision Timeframe								
Standard – 7 Days	7,345	6,555	790		89.2	10.8	59.7	7.2
Standard – Extension	0	0	0				0.0	0.0
Standard – Appeal	147	103	44		70.1	29.9	0.9	0.4
Standard – Excluded/Not Reported	3,496	2,310	1,186	0	66.1	33.9	21.0	10.8

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
UHA Health Insurance									
Expedited PA Total									
Total Expedited PA requests	0	0	0						
Expedited PA By Decision Timeframe									
Expedited – 72 Hours	0	0	0						
Expedited – Extension	0	0	0						
Expedited – Appeal	0	0	0						
Expedited – Excluded/Not Reported	0	0	0	0					
UnitedHealthcare									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-2A. Drugs:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Cigna										
Total Standard PA Requests	4		4							
Total Expedited PA requests	0									
Cigna Subtotal	4		4							
HMAA										
Total Standard PA Requests										
Total Expedited PA requests										
HMAA Subtotal										
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UHA Health Insurance										
Total Standard PA Requests	2,020									
Total Expedited PA requests	0									
UHA Health Insurance Subtotal	2,020									
UnitedHealthcare										
Total Standard PA Requests										
Total Expedited PA requests										
UnitedHealthcare Subtotal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-2A. Drugs:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
State Total	2,024		4							

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Cigna										
Standard PA Total										
Total Standard PA Requests	4		4							
Standard PA By Decision Timeframe										
Standard – 7 Days	4		4							
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMAA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMAA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UHA Health Insurance										
Standard PA Total										
Total Standard PA Requests 2,020										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UHA Health Insurance										
Standard PA By Decision Timeframe										
Standard – 7 Days	790									
Standard – Extension	0									
Standard – Appeal	44									
Standard – Excluded/Not Reported	1,186	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UnitedHealthcare										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 7-3. Drugs:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
Cigna	2.5	1.1	22.6	22.6
HMAA				
HMSA				
Kaiser				
UHA Health Insurance	3.5	0.0	0.0	0.0
UnitedHealthcare				
State Average	3.0	0.6	11.3	11.3

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 8-1A. Other (Medical Services):

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
UHA Health Insurance						
Total Standard PA Requests	7,564	5,787	1,777		76.5	23.5
Total Expedited PA requests	0	0	0			
UHA Health Insurance Total	7,564	5,787	1,777		76.5	23.5
State Total	7,564	5,787	1,777		76.5	23.5

Note:

- (1) A blank cell () indicates data not available.
- (2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 8-1B. Other (Medical Services):

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UHA Health Insurance								
Standard PA Total								
Total Standard PA Requests	7,564	5,787	1,777		76.5	23.5	76.5	23.5
Standard PA By Decision Timeframe								
Standard – 7 Days	5,430	3,704	1,726		68.2	31.8	49.0	22.8
Standard – Extension	1,835	1,083	752		59.0	41.0	14.3	9.9
Standard – Appeal	53	30	23		56.6	43.4	0.4	0.3
Standard – Excluded/Not Reported	246	970	-724	0	394.3	-294.3	12.8	-9.6
Expedited PA Total								
Total Expedited PA requests	0	0	0					
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	0	0	0					
Expedited – Extension	0	0	0					
Expedited – Appeal	0	0	0					
Expedited – Excluded/Not Reported	0	0	0	0				

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 8-2A. Other (Medical Services):

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UHA Health Insurance										
Total Standard PA Requests	1,777									
Total Expedited PA requests	0									
UHA Health Insurance Subtotal	1,777									
State Total	1,777									

Note:

- (1) A blank cell () indicates data not available.
- (2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 8-2B. Other (Medical Services):

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
UHA Health Insurance										
Standard PA Total										
Total Standard PA Requests	1,777									
Standard PA By Decision Timeframe										
Standard – 7 Days	1,726									
Standard – Extension	752									
Standard – Appeal	23									
Standard – Excluded/Not Reported	-724	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section II. Commercial Plan Prior Authorization (PA), 2025

Table 8-3. Other (Medical Services):

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
UHA Health Insurance	3.9	4.0	0.0	0.0
State Average	3.9	4.0	0.0	0.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-1A. Diagnostic Testing:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	186	181	5	0	97.3	2.7
Total Expedited PA requests	91	89	2	0	97.8	2.2
AlohaCare Total	277	270	7	0	97.5	2.5
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	1,381	1,370	11		99.2	0.8
Total Expedited PA requests	356	356	0		100.0	0.0
Kaiser Total	1,737	1,726	11		99.4	0.6
UnitedHealthcare						
Total Standard PA Requests	3,726	3,446	280	44	92.5	7.5
Total Expedited PA requests	491	471	18	2	95.9	3.7
UnitedHealthcare Total	4,217	3,917	298	46	92.9	7.1
State Total	6,231	5,913	316	46	94.9	5.1

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	186	181	5	0	97.3	2.7	97.3	2.7
Standard PA By Decision Timeframe								
Standard – 7 Days	29	28	1	0	96.6	3.4	15.1	0.5
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	1	0	1	0	0.0	100.0	0.0	0.5
Standard – Excluded/Not Reported	156	153	3	0	98.1	1.9	82.3	1.6
Expedited PA Total								
Total Expedited PA requests	91	89	2	0	97.8	2.2	97.8	2.2
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	90	88	2	0	97.8	2.2	96.7	2.2
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	1	1	0	0	100.0	0.0	1.1	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approved	Denied	Withdrawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests	1,381	1,370	11		99.2	0.8	99.2	0.8
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	1,381	1,370	11	0	99.2	0.8	99.2	0.8
Expedited PA Total								
Total Expedited PA requests	356	356	0		100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	356	356	0	0	100.0	0.0	100.0	0.0

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	3,726	3,446	280	44	92.5	7.5	92.5	7.5
Standard PA By Decision Timeframe								
Standard – 7 Days	3,134	3,040	50	44	97.0	1.6	81.6	1.3
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	53	52	1	0	98.1	1.9	1.4	0.0
Standard – Excluded/Not Reported	539	354	229	0	65.7	42.5	9.5	6.1
Expedited PA Total								
Total Expedited PA requests	491	471	18	2	95.9	3.7	95.9	3.7
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	472	454	16	2	96.2	3.4	92.5	3.3
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	6	6	0	0	100.0	0.0	1.2	0.0
Expedited – Excluded/Not Reported	13	11	2	0	84.6	15.4	2.2	0.4

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-2A. Diagnostic Testing:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	5		5							
Total Expedited PA requests	2		2							
AlohaCare Subtotal	7		7							
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	11		2	9						
Total Expedited PA requests	0									
Kaiser Subtotal	11		2	9						
UnitedHealthcare										
Total Standard PA Requests	280	2	276	2						
Total Expedited PA requests	18		18							
UnitedHealthcare Subtotal	298	2	294	2						
State Total	316	2	303	11						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denials and Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	5		5							
Standard PA By Decision Timeframe										
Standard – 7 Days	1		1							
Standard – Extension	0									
Standard – Appeal	1		1							
Standard – Excluded/Not Reported	3	0	3	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	2		2							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	2		2							
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denials and Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	11		2	9						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	11	0	2	9	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denials and Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	280	2	276	2						
Standard PA By Decision Timeframe										
Standard – 7 Days	50		2	48						
Standard – Extension	0									
Standard – Appeal	1		1							
Standard – Excluded/Not Reported	229	2	273	-46	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	18		18							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	16		16							
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	2	0	2	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 1-3. Diagnostic Testing:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	3.8	3.0	30.0	26.0
HMSA				
Kaiser				
UnitedHealthcare	3.5	2.0	39.4	26.9
State Average	3.6	2.5	34.7	26.4

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-1A. Durable Medical Supplies/Medical Equipment:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	306	291	15	0	95.1	4.9
Total Expedited PA requests	71	69	2	0	97.2	2.8
AlohaCare Total	377	360	17	0	95.5	4.5
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	8,505	7,570	935		89.0	11.0
Total Expedited PA requests	1,103	1,072	31		97.2	2.8
Kaiser Total	9,608	8,642	966		89.9	10.1
UnitedHealthcare						
Total Standard PA Requests	698	589	109	0	84.4	15.6
Total Expedited PA requests	9	7	2	0	77.8	22.2
UnitedHealthcare Total	707	596	111	0	84.3	15.7
State Total	10,692	9,598	1,094	0	89.8	10.2

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approved	Denied	Withdrawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	306	291	15	0	95.1	4.9	95.1	4.9
Standard PA By Decision Timeframe								
Standard – 7 Days	26	25	1	0	96.2	3.8	8.2	0.3
Standard – Extension	1	0	1	0	0.0	100.0	0.0	0.3
Standard – Appeal	5	2	3	0	40.0	60.0	0.7	1.0
Standard – Excluded/Not Reported	274	264	10	0	96.4	3.6	86.3	3.3
Expedited PA Total								
Total Expedited PA requests	71	69	2	0	97.2	2.8	97.2	2.8
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	70	68	2	0	97.1	2.9	95.8	2.8
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	1	1	0	0	100.0	0.0	1.4	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests	8,505	7,570	935		89.0	11.0	89.0	11.0
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	8,505	7,570	935	0	89.0	11.0	89.0	11.0
Expedited PA Total								
Total Expedited PA requests	1,103	1,072	31		97.2	2.8	97.2	2.8
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	1,103	1,072	31	0	97.2	2.8	97.2	2.8

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	698	589	109	0	84.4	15.6	84.4	15.6
Standard PA By Decision Timeframe								
Standard – 7 Days	629	567	52	0	90.1	8.3	81.2	7.4
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	14	11	3	0	78.6	21.4	1.6	0.4
Standard – Excluded/Not Reported	55	11	54	0	20.0	98.2	1.6	7.7
Expedited PA Total								
Total Expedited PA requests	9	7	2	0	77.8	22.2	77.8	22.2
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	9	7	2	0	77.8	22.2	77.8	22.2
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	1	1	0	0	100.0	0.0	11.1	0.0
Expedited – Excluded/Not Reported	-1	-1	0	0			-11.1	0.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-2A. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	15	1	13	1						
Total Expedited PA requests	2		2							
AlohaCare Subtotal	17	1	15	1						
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	935		118	817						
Total Expedited PA requests	31		6	25						
Kaiser Subtotal	966		124	842						
UnitedHealthcare										
Total Standard PA Requests	109	2	17	90						
Total Expedited PA requests	2		1	1						
UnitedHealthcare Subtotal	111	2	18	91						
State Total	1,094	3	157	934						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	15	1	13	1						
Standard PA By Decision Timeframe										
Standard – 7 Days	1		1							
Standard – Extension	1		1							
Standard – Appeal	3		3							
Standard – Excluded/Not Reported	10	1	8	1	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	2		2							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	2		2							
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	935		118	817						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	935	0	118	817	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	31		6	25						
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)									
		R1	R2	R3	R4	R5	R6	R7	R8	R9	
Kaiser											
Expedited – Extension											
Expedited – Appeal											
Expedited – Excluded/Not Reported	31	0	6	25	0	0	0	0	0	0	0
UnitedHealthcare											
Standard PA Total											
Total Standard PA Requests	109	2	17	90							
Standard PA By Decision Timeframe											
Standard – 7 Days	52	1	46	5							
Standard – Extension	0										
Standard – Appeal	3		3								
Standard – Excluded/Not Reported	54	1	-32	85	0	0	0	0	0	0	0
Expedited PA Total											
Total Expedited PA requests	2		1	1							
Expedited PA By Decision Timeframe											
Expedited – 72 Hours	2		1	1							
Expedited – Extension	0										
Expedited – Appeal	0										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 2-3. Durable Medical Supplies/Medical Equipment:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	3.2	2.5	25.5	24.0
HMSA				
Kaiser				
UnitedHealthcare	3.4	1.9	12.0	11.3
State Average	3.3	2.2	18.8	17.6

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-1A. Inpatient Hospital Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	24	23	1	0	95.8	4.2
Total Expedited PA requests	16	16	0	0	100.0	0.0
AlohaCare Total	40	39	1	0	97.5	2.5
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	58	58	0		100.0	0.0
Total Expedited PA requests	3	3	0		100.0	0.0
Kaiser Total	61	61	0		100.0	0.0
UnitedHealthcare						
Total Standard PA Requests	3,137	2,567	525	45	81.8	16.7
Total Expedited PA requests	334	322	12	0	96.4	3.6
UnitedHealthcare Total	3,471	2,889	537	45	83.2	15.5
State Total	3,572	2,989	538	45	83.7	15.1

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services: Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	24	23	1	0	95.8	4.2	95.8	4.2
Standard PA By Decision Timeframe								
Standard – 7 Days	0	0	0	0			0.0	0.0
Standard – Extension	1	0	1	0	0.0	100.0	0.0	4.2
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	23	23	0	0	100.0	0.0	95.8	0.0
Expedited PA Total								
Total Expedited PA requests	16	16	0	0	100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	16	16	0	0	100.0	0.0	100.0	0.0
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	0	0	0	0			0.0	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services: Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests	58	58	0		100.0	0.0	100.0	0.0
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	58	58	0	0	100.0	0.0	100.0	0.0
Expedited PA Total								
Total Expedited PA requests	3	3	0		100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	3	3	0	0	100.0	0.0	100.0	0.0

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	3,137	2,567	525	45	81.8	16.7	81.8	16.7
Standard PA By Decision Timeframe								
Standard – 7 Days	2,974	2,412	517	45	81.1	17.4	76.9	16.5
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	5	3	2	0	60.0	40.0	0.1	0.1
Standard – Excluded/Not Reported	158	152	6	0	96.2	3.8	4.8	0.2
Expedited PA Total								
Total Expedited PA requests	334	322	12	0	96.4	3.6	96.4	3.6
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	317	305	12	0	96.2	3.8	91.3	3.6
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	17	17	0	0	100.0	0.0	5.1	0.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-2A. Inpatient Hospital Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	1		1							
Total Expedited PA requests	0									
AlohaCare Subtotal	1		1							
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	0									
Total Expedited PA requests	0									
Kaiser Subtotal	0									
UnitedHealthcare										
Total Standard PA Requests	525		510	15						
Total Expedited PA requests	12		12							
UnitedHealthcare Subtotal	537		522	15						
State Total	538		523	15						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	1		1							
Standard PA By Decision Timeframe										
Standard – 7 Days	0									
Standard – Extension	1		1							
Standard – Appeal	0									
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests 0										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported 0 0 0 0 0 0 0 0 0 0										
Expedited PA Total										
Total Expedited PA requests 0										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	525		510	15						
Standard PA By Decision Timeframe										
Standard – 7 Days	517		505	12						
Standard – Extension	0									
Standard – Appeal	2		2							
Standard – Excluded/Not Reported	6	0	3	3	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	12		12							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	12		12							
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 3-3. Inpatient Hospital Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare			30.0	24.5
HMSA				
Kaiser				
UnitedHealthcare	3.3	3.0		
State Average	3.3	3.0	30.0	24.5

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-1A. Outpatient Hospital Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	61	61	0	0	100.0	0.0
Total Expedited PA requests	43	43	0	0	100.0	0.0
AlohaCare Total	104	104	0	0	100.0	0.0
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	799	782	17		97.9	2.1
Total Expedited PA requests	149	149			100.0	
Kaiser Total	948	931	17		98.2	1.8
UnitedHealthcare						
Total Standard PA Requests	2,039	1,980	57	2	97.1	2.8
Total Expedited PA requests	582	569	13	0	97.8	2.2
UnitedHealthcare Total	2,621	2,549	70	2	97.3	2.7
State Total	3,673	3,584	87	2	97.6	2.4

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	61	61	0	0	100.0	0.0	100.0	0.0
Standard PA By Decision Timeframe								
Standard – 7 Days	10	10	0	0	100.0	0.0	16.4	0.0
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	51	51	0	0	100.0	0.0	83.6	0.0
Expedited PA Total								
Total Expedited PA requests	43	43	0	0	100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	41	41	0	0	100.0	0.0	95.3	0.0
Expedited – Extension	1	1	0	0	100.0	0.0	2.3	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	1	1	0	0	100.0	0.0	2.3	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests	799	782	17		97.9	2.1	97.9	2.1
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	799	782	17	0	97.9	2.1	97.9	2.1
Expedited PA Total								
Total Expedited PA requests	149	149			100.0		100.0	
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	149	149	0	0	100.0	0.0	100.0	0.0

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	2,039	1,980	57	2	97.1	2.8	97.1	2.8
Standard PA By Decision Timeframe								
Standard – 7 Days	1,735	1,715	20	0	98.8	1.2	84.1	1.0
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	26	24	2	0	92.3	7.7	1.2	0.1
Standard – Excluded/Not Reported	278	241	35	2	86.7	12.6	11.8	1.7
Expedited PA Total								
Total Expedited PA requests	582	569	13	0	97.8	2.2	97.8	2.2
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	560	549	11	0	98.0	2.0	94.3	1.9
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	6	6	0	0	100.0	0.0	1.0	0.0
Expedited – Excluded/Not Reported	16	14	2	0	87.5	12.5	2.4	0.3

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-2A. Outpatient Hospital Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	0									
Total Expedited PA requests	0									
AlohaCare Subtotal	0									
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	17		1	16						
Total Expedited PA requests										
Kaiser Subtotal	17		1	16						
UnitedHealthcare										
Total Standard PA Requests	57	2	52	3						
Total Expedited PA requests	13		13							
UnitedHealthcare Subtotal	70	2	65	3						
State Total	87	2	66	19						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	0									
Standard PA By Decision Timeframe										
Standard – 7 Days	0									
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	17		1	16						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	17	0	1	16	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	57	2	52	3						
Standard PA By Decision Timeframe										
Standard – 7 Days	20		18	2						
Standard – Extension	0									
Standard – Appeal	2		2							
Standard – Excluded/Not Reported	35	2	32	1	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	13		13							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	11		11							
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	2	0	2	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 4-3. Outpatient Hospital Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	2.7	2.5	31.2	26.0
HMSA				
Kaiser				
UnitedHealthcare	3.7	2.0	35.5	24.0
State Average	3.2	2.3	33.4	25.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-1A. Physician Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	117	110	7	0	94.0	6.0
Total Expedited PA requests	37	37	0	0	100.0	0.0
AlohaCare Total	154	147	7	0	95.5	4.5
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	1,486	1,418	68		95.4	4.6
Total Expedited PA requests	61	60	1		98.4	1.6
Kaiser Total	1,547	1,478	69		95.5	4.5
UnitedHealthcare						
Total Standard PA Requests	2,010	1,522	488	0	75.7	24.3
Total Expedited PA requests	188	181	7	0	96.3	3.7
UnitedHealthcare Total	2,198	1,703	495	0	77.5	22.5
State Total	3,899	3,328	571	0	85.4	14.6

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	117	110	7	0	94.0	6.0	94.0	6.0
Standard PA By Decision Timeframe								
Standard – 7 Days	62	61	1	0	98.4	1.6	52.1	0.9
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	55	49	6	0	89.1	10.9	41.9	5.1
Expedited PA Total								
Total Expedited PA requests	37	37	0	0	100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	36	36	0	0	100.0	0.0	97.3	0.0
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	1	1	0	0	100.0	0.0	2.7	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
HMSA									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									
Kaiser									
Standard PA Total									
Total Standard PA Requests	1,486	1,418	68		95.4	4.6	95.4	4.6	
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported	1,486	1,418	68	0	95.4	4.6	95.4	4.6	
Expedited PA Total									
Total Expedited PA requests	61	60	1		98.4	1.6	98.4	1.6	
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported	61	60	1	0	98.4	1.6	98.4	1.6	

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	2,010	1,522	488	0	75.7	24.3	75.7	24.3
Standard PA By Decision Timeframe								
Standard – 7 Days	1,896	1,418	478	0	74.8	25.2	70.5	23.8
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	5	3	2	0	60.0	40.0	0.1	0.1
Standard – Excluded/Not Reported	109	101	8	0	92.7	7.3	5.0	0.4
Expedited PA Total								
Total Expedited PA requests	188	181	7	0	96.3	3.7	96.3	3.7
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	184	184	0	0	100.0	0.0	97.9	0.0
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	3	1	2	0	33.3	66.7	0.5	1.1
Expedited – Excluded/Not Reported	1	-4	5	0	-400.0	500.0	-2.1	2.7

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-2A. Physician Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	7		7							
Total Expedited PA requests	0									
AlohaCare Subtotal	7		7							
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	68		1	67						
Total Expedited PA requests	1			1						
Kaiser Subtotal	69		1	68						
UnitedHealthcare										
Total Standard PA Requests	488		37	451						
Total Expedited PA requests	7		7							
UnitedHealthcare Subtotal	495		44	451						
State Total	571		52	519						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	7		7							
Standard PA By Decision Timeframe										
Standard – 7 Days	1									
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	6	0	7	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	68		1	67						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	68	0	1	67	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	1			1						
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	1	0	0	1	0	0	0	0	0	0
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	488		37	451						
Standard PA By Decision Timeframe										
Standard – 7 Days	478		28	450						
Standard – Extension	0									
Standard – Appeal	2		2							
Standard – Excluded/Not Reported	8	0	7	1	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	7		7							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	2		2							
Expedited – Excluded/Not Reported	5	0	5	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 5-3. Physician Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	1.2	1.0	25.2	25.0
HMSA				
Kaiser				
UnitedHealthcare	3.0	2.0	48.0	24.0
State Average	2.1	1.5	36.6	24.5

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-1A. Behavioral Health Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	8	8	0	0	100.0	0.0
Total Expedited PA requests	0	0	0	0		
AlohaCare Total	8	8	0	0	100.0	0.0
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests	1,089	1,085	4		99.6	0.4
Total Expedited PA requests	1	1	0		100.0	0.0
Kaiser Total	1,090	1,086	4		99.6	0.4
UnitedHealthcare						
Total Standard PA Requests	794	311	482	0	39.2	60.7
Total Expedited PA requests	110	110	0	0	100.0	0.0
UnitedHealthcare Total	904	421	482	0	46.6	53.3
State Total	2,002	1,515	486	0	75.7	24.3

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services: Approved Rates

by Type of PA Requests and Decision Timeframes

Insurer/PA Request Decision Timeframe	Total Requests	Approved	Denied	Withdrawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
AlohaCare									
Standard PA Total									
Total Standard PA Requests	8	8	0	0	100.0	0.0	100.0	0.0	
Standard PA By Decision Timeframe									
Standard – 7 Days	8	8	0	0	100.0	0.0	100.0	0.0	
Standard – Extension	0	0	0	0			0.0	0.0	
Standard – Appeal	0	0	0	0			0.0	0.0	
Standard – Excluded/Not Reported	0	0	0	0			0.0	0.0	
Expedited PA Total									
Total Expedited PA requests	0	0	0	0					
Expedited PA By Decision Timeframe									
Expedited – 72 Hours	0	0	0	0					
Expedited – Extension	0	0	0	0					
Expedited – Appeal	0	0	0	0					
Expedited – Excluded/Not Reported	0	0	0	0					
HMSA									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services: Approved Rates

by Type of PA Requests and Decision Timeframes

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests	1,089	1,085	4		99.6	0.4	99.6	0.4
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported	1,089	1,085	4	0	99.6	0.4	99.6	0.4
Expedited PA Total								
Total Expedited PA requests	1	1	0		100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported	1	1	0	0	100.0	0.0	100.0	0.0

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services: Approved Rates

by Type of PA Requests and Decision Timeframes

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	794	311	482	0	39.2	60.7	39.2	60.7
Standard PA By Decision Timeframe								
Standard – 7 Days	337	245	92	0	72.7	27.3	30.9	11.6
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	457	66	390	0	14.4	85.3	8.3	49.1
Expedited PA Total								
Total Expedited PA requests	110	110	0	0	100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	110	110	0	0	100.0	0.0	100.0	0.0
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	0	0	0	0			0.0	0.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-2A. Behavioral Health Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	0									
Total Expedited PA requests	0									
AlohaCare Subtotal	0									
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests	4		1	3						
Total Expedited PA requests	0									
Kaiser Subtotal	4		1	3						
UnitedHealthcare										
Total Standard PA Requests	482	83	397	2						
Total Expedited PA requests	0									
UnitedHealthcare Subtotal	482	83	397	2						
State Total	486	83	398	5						

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	0									
Standard PA By Decision Timeframe										
Standard – 7 Days	0									
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests	4		1	3						
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported	4	0	1	3	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	482	83	397	2						
Standard PA By Decision Timeframe										
Standard – 7 Days	92	26	66							
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	390	57	331	2	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) Denial Reasons: See data dictionary.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 6-3. Behavioral Health Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	1.6	1.0		
HMSA				
Kaiser				
UnitedHealthcare	2.0	1.0	14.9	24.0
State Average	1.8	1.0	14.9	24.0

Note:

(1) A blank cell () indicates data not available.

(2) See data dictionary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-1A. Drugs:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	664	501	163	0	75.5	24.5
Total Expedited PA requests	141	109	32	0	77.3	22.7
AlohaCare Total	805	610	195	0	75.8	24.2
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UnitedHealthcare						
Total Standard PA Requests	1,839	1,795	44	0	97.6	2.4
Total Expedited PA requests	254	250	4	0	98.4	1.6
UnitedHealthcare Total	2,093	2,045	48	0	97.7	2.3
State Total	2,898	2,655	243	0	91.6	8.4

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	664	501	163	0	75.5	24.5	75.5	24.5
Standard PA By Decision Timeframe								
Standard – 7 Days	654	497	157	0	76.0	24.0	74.8	23.6
Standard – Extension	10	4	6	0	40.0	60.0	0.6	0.9
Standard – Appeal								
Standard – Excluded/Not Reported	0	0	0	0			0.0	0.0
Expedited PA Total								
Total Expedited PA requests	141	109	32	0	77.3	22.7	77.3	22.7
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	141	109	32	0	77.3	22.7	77.3	22.7
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal								
Expedited – Excluded/Not Reported	0	0	0	0			0.0	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	1,839	1,795	44	0	97.6	2.4	97.6	2.4
Standard PA By Decision Timeframe								
Standard – 7 Days	1,824	1,782	42	0	97.7	2.3	96.9	2.3
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	15	13	2	0	86.7	13.3	0.7	0.1
Expedited PA Total								
Total Expedited PA requests	254	250	4	0	98.4	1.6	98.4	1.6
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	241	237	4	0	98.3	1.7	93.3	1.6
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	13	13	0	0	100.0	0.0	5.1	0.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-2A. Drugs:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	163	13	64	65						21
Total Expedited PA requests	32	3	9	15						5
AlohaCare Subtotal	195	16	73	80						26
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UnitedHealthcare										
Total Standard PA Requests	44		43	1						
Total Expedited PA requests	4		4							
UnitedHealthcare Subtotal	48		47	1						
State Total	243	16	120	81						26

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	163	13	64	65					21	
Standard PA By Decision Timeframe										
Standard – 7 Days	157	9	62	65					21	
Standard – Extension	6	4	2							
Standard – Appeal										
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	32	3	9	15					5	
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	32	3	9	15					5	
Expedited – Extension	0									
Expedited – Appeal										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	44		43	1						
Standard PA By Decision Timeframe										
Standard – 7 Days	42		42							
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	2	0	1	1	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	4		4							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	4		4							
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section III. Medicare Plan Prior Authorization (PA), 2025

Table 7-3. Drugs:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	0.8	0.8	7.2	7.2
HMSA				
Kaiser				
UnitedHealthcare	1.9	1.0	68.4	24.0
State Average	1.4	0.9	37.8	15.6

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-1A. Diagnostic Testing:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	1,856	1,539	317	0	82.9	17.1
Total Expedited PA requests	620	610	10	0	98.4	1.6
AlohaCare Total	2,476	2,149	327	0	86.8	13.2
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UnitedHealthcare						
Total Standard PA Requests	400	334	66		83.5	16.5
Total Expedited PA requests	13	13	0		100.0	0.0
UnitedHealthcare Total	413	347	66		84.0	16.0
State Total	2,889	2,496	393	0	86.4	13.6

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	1,856	1,539	317	0	82.9	17.1	82.9	17.1
Standard PA By Decision Timeframe								
Standard – 7 Days	716	642	74	0	89.7	10.3	34.6	4.0
Standard – Extension	15	9	6	0	60.0	40.0	0.5	0.3
Standard – Appeal	49	8	41	0	16.3	83.7	0.4	2.2
Standard – Excluded/Not Reported	1,076	880	196	0	81.8	18.2	47.4	10.6
Expedited PA Total								
Total Expedited PA requests	620	610	10	0	98.4	1.6	98.4	1.6
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	610	601	9	0	98.5	1.5	96.9	1.5
Expedited – Extension	5	5	0	0	100.0	0.0	0.8	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	5	4	1	0	80.0	20.0	0.6	0.2
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-1B. Diagnostic Testing:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	400	334	66		83.5	16.5	83.5	16.5
Standard PA By Decision Timeframe								
Standard – 7 Days	281	233	48		82.9	17.1	58.2	12.0
Standard – Extension	0	0	0				0.0	0.0
Standard – Appeal	0	0	0				0.0	0.0
Standard – Excluded/Not Reported	119	101	18	0	84.9	15.1	25.2	4.5
Expedited PA Total								
Total Expedited PA requests	13	13	0		100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	13	13	0		100.0	0.0	100.0	0.0
Expedited – Extension	0	0	0				0.0	0.0
Expedited – Appeal	0	0	0				0.0	0.0
Expedited – Excluded/Not Reported	0	0	0	0			0.0	0.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-2A. Diagnostic Testing:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	317	130	175	6		2				4
Total Expedited PA requests	10		10							
AlohaCare Subtotal	327	130	185	6		2				4
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UnitedHealthcare										
Total Standard PA Requests	66	3	62			1				
Total Expedited PA requests	0									
UnitedHealthcare Subtotal	66	3	62			1				
State Total	393	133	247	6		3				4

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	317	130	175	6		2				4
Standard PA By Decision Timeframe										
Standard – 7 Days	74	22	49			1				2
Standard – Extension	6	1	5							
Standard – Appeal	41	23	13	3		2				
Standard – Excluded/Not Reported	196	84	108	3	0	-1	0	0	0	2
Expedited PA Total										
Total Expedited PA requests	10		10							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	9		9							
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	1	0	1	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-2B. Diagnostic Testing:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	66	3	62			1				
Standard PA By Decision Timeframe										
Standard – 7 Days	48	1	47							
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	18	2	15	0	0	1	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 1-3. Diagnostic Testing:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	3.1	2.0	29.2	26.0
HMSA				
Kaiser				
UnitedHealthcare	2.0	1.0	24.0	24.0
State Average	2.6	1.5	26.6	25.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-1A. Durable Medical Supplies/Medical Equipment:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	2,127	2,018	109	0	94.9	5.1
Total Expedited PA requests	475	469	6	0	98.7	1.3
AlohaCare Total	2,602	2,487	115	0	95.6	4.4
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UnitedHealthcare						
Total Standard PA Requests	3,816	2,767	1,049		72.5	27.5
Total Expedited PA requests	136	116	20		85.3	14.7
UnitedHealthcare Total	3,952	2,883	1,069		73.0	27.0
State Total	6,554	5,370	1,184	0	81.9	18.1

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	2,127	2,018	109	0	94.9	5.1	94.9	5.1
Standard PA By Decision Timeframe								
Standard – 7 Days	499	495	4	0	99.2	0.8	23.3	0.2
Standard – Extension	26	13	13	0	50.0	50.0	0.6	0.6
Standard – Appeal	8	5	3	0	62.5	37.5	0.2	0.1
Standard – Excluded/Not Reported	1,594	1,505	89	0	94.4	5.6	70.8	4.2
Expedited PA Total								
Total Expedited PA requests	475	469	6	0	98.7	1.3	98.7	1.3
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	468	465	3	0	99.4	0.6	97.9	0.6
Expedited – Extension	1	0	1	0	0.0	100.0	0.0	0.2
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	6	4	2	0	66.7	33.3	0.8	0.4
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-1B. Durable Medical Supplies/Medical Equipment:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	3,816	2,767	1,049		72.5	27.5	72.5	27.5
Standard PA By Decision Timeframe								
Standard – 7 Days	2,772	2,104	668		75.9	24.1	55.1	17.5
Standard – Extension	1	1	0		100.0	0.0	0.0	0.0
Standard – Appeal	42	42	0		100.0	0.0	1.1	0.0
Standard – Excluded/Not Reported	1,001	620	381	0	61.9	38.1	16.2	10.0
Expedited PA Total								
Total Expedited PA requests	136	116	20		85.3	14.7	85.3	14.7
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	136	116	20		85.3	14.7	85.3	14.7
Expedited – Extension	0	0	0				0.0	0.0
Expedited – Appeal	0	0	0				0.0	0.0
Expedited – Excluded/Not Reported	0	0	0	0			0.0	0.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-2A. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	109	6	88	13		2				
Total Expedited PA requests	6	1	4	1						
AlohaCare Subtotal	115	7	92	14		2				
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UnitedHealthcare										
Total Standard PA Requests	1,049	21	699	305		15				9
Total Expedited PA requests	20		10	9		1				
UnitedHealthcare Subtotal	1,069	21	709	314		16				9
State Total	1,184	28	801	328		18				9

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	109	6	88	13		2				
Standard PA By Decision Timeframe										
Standard – 7 Days	4		2			2				
Standard – Extension	13		10	3						
Standard – Appeal	3			3						
Standard – Excluded/Not Reported	89	6	76	7	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	6	1	4	1						
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	3		2	1						
Expedited – Extension	1		1							
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	2	1	1	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-2B. Durable Medical Supplies/Medical Equipment:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	1,049	21	699	305		15				9
Standard PA By Decision Timeframe										
Standard – 7 Days	668	8	437	201		14				8
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	381	13	262	104	0	1	0	0	0	1
Expedited PA Total										
Total Expedited PA requests	20		10	9		1				
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	20		10	9		1				
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 2-3. Durable Medical Supplies/Medical Equipment:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	1.7	1.0	26.2	24.0
HMSA				
Kaiser				
UnitedHealthcare	4.0	5.0	24.0	24.0
State Average	2.8	3.0	25.1	24.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-1A. Inpatient Hospital Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	459	112	347	0	24.4	75.6
Total Expedited PA requests	81	81	0	0	100.0	0.0
AlohaCare Total	540	193	347	0	35.7	64.3
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UnitedHealthcare						
Total Standard PA Requests	1,579	1,492	87		94.5	5.5
Total Expedited PA requests	245	241	4		98.4	1.6
UnitedHealthcare Total	1,824	1,733	91		95.0	5.0
State Total	2,364	1,926	438	0	81.5	18.5

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	459	112	347	0	24.4	75.6	24.4	75.6
Standard PA By Decision Timeframe								
Standard – 7 Days	329	20	309	0	6.1	93.9	4.4	67.3
Standard – Extension	3	2	1	0	66.7	33.3	0.4	0.2
Standard – Appeal	4	0	4	0	0.0	100.0	0.0	0.9
Standard – Excluded/Not Reported	123	90	33	0	73.2	26.8	19.6	7.2
Expedited PA Total								
Total Expedited PA requests	81	81	0	0	100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	77	77	0	0	100.0	0.0	95.1	0.0
Expedited – Extension	2	2	0	0	100.0	0.0	2.5	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	2	2	0	0	100.0	0.0	2.5	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-1B. Inpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	1,579	1,492	87		94.5	5.5	94.5	5.5
Standard PA By Decision Timeframe								
Standard – 7 Days	1,499	1,416	83		94.5	5.5	89.7	5.3
Standard – Extension	0	0	0				0.0	0.0
Standard – Appeal	6	6	0		100.0	0.0	0.4	0.0
Standard – Excluded/Not Reported	74	70	4	0	94.6	5.4	4.4	0.3
Expedited PA Total								
Total Expedited PA requests	245	241	4		98.4	1.6	98.4	1.6
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	241	238	3		98.8	1.2	97.1	1.2
Expedited – Extension	0	0	0				0.0	0.0
Expedited – Appeal	0	0	0				0.0	0.0
Expedited – Excluded/Not Reported	4	3	1	0	75.0	25.0	1.2	0.4

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-2A. Inpatient Hospital Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	347	11	4			2				330
Total Expedited PA requests	0									
AlohaCare Subtotal	347	11	4			2				330
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UnitedHealthcare										
Total Standard PA Requests	87	2	3	8	1					73
Total Expedited PA requests	4	1	1							2
UnitedHealthcare Subtotal	91	3	4	8	1					75
State Total	438	14	8	8	1	2				405

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	347	11	4			2				330
Standard PA By Decision Timeframe										
Standard – 7 Days	309	5	4			1				299
Standard – Extension	1									1
Standard – Appeal	4									4
Standard – Excluded/Not Reported	33	6	0	0	0	1	0	0	0	26
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-2B. Inpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	87	2	3	8	1					73
Standard PA By Decision Timeframe										
Standard – 7 Days	83	2	1	6	1					73
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	4	0	2	2	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	4	1	1							2
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	3		1							2
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	1	1	0	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 3-3. Inpatient Hospital Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	2.7	2.0	32.5	26.0
HMSA				
Kaiser				
UnitedHealthcare	1.0	1.0	24.0	24.0
State Average	1.9	1.5	28.3	25.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-1A. Outpatient Hospital Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	493	480	13	0	97.4	2.6
Total Expedited PA requests	302	300	2	0	99.3	0.7
AlohaCare Total	795	780	15	0	98.1	1.9
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UnitedHealthcare						
Total Standard PA Requests	4,274	3,967	307		92.8	7.2
Total Expedited PA requests	761	740	21		97.2	2.8
UnitedHealthcare Total	5,035	4,707	328		93.5	6.5
State Total	5,830	5,487	343	0	94.1	5.9

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	493	480	13	0	97.4	2.6	97.4	2.6
Standard PA By Decision Timeframe								
Standard – 7 Days	93	91	2	0	97.8	2.2	18.5	0.4
Standard – Extension	1	1	0	0	100.0	0.0	0.2	0.0
Standard – Appeal	3	1	2	0	33.3	66.7	0.2	0.4
Standard – Excluded/Not Reported	396	387	9	0	97.7	2.3	78.5	1.8
Expedited PA Total								
Total Expedited PA requests	302	300	2	0	99.3	0.7	99.3	0.7
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	290	290	0	0	100.0	0.0	96.0	0.0
Expedited – Extension	6	5	1	0	83.3	16.7	1.7	0.3
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	6	5	1	0	83.3	16.7	1.7	0.3
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-1B. Outpatient Hospital Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	4,274	3,967	307		92.8	7.2	92.8	7.2
Standard PA By Decision Timeframe								
Standard – 7 Days	3,564	3,392	172		95.2	4.8	79.4	4.0
Standard – Extension	1	1	0		100.0	0.0	0.0	0.0
Standard – Appeal	23	23	0		100.0	0.0	0.5	0.0
Standard – Excluded/Not Reported	686	551	135	0	80.3	19.7	12.9	3.2
Expedited PA Total								
Total Expedited PA requests	761	740	21		97.2	2.8	97.2	2.8
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	754	735	19		97.5	2.5	96.6	2.5
Expedited – Extension	0	0	0				0.0	0.0
Expedited – Appeal	2	2	0		100.0	0.0	0.3	0.0
Expedited – Excluded/Not Reported	5	3	2	0	60.0	40.0	0.4	0.3

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-2A. Outpatient Hospital Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	13	2	5			5				1
Total Expedited PA requests	2		2							
AlohaCare Subtotal	15	2	7			5				1
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UnitedHealthcare										
Total Standard PA Requests	307	7	104	4		1				191
Total Expedited PA requests	21	1	16			1				3
UnitedHealthcare Subtotal	328	8	120	4		2				194
State Total	343	10	127	4		7				195

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	13	2	5			5				1
Standard PA By Decision Timeframe										
Standard – 7 Days	2					2				
Standard – Extension	0									
Standard – Appeal	2		2							
Standard – Excluded/Not Reported	9	2	3	0	0	3	0	0	0	1
Expedited PA Total										
Total Expedited PA requests	2		2							
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	1		1							
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	1	0	1	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-2B. Outpatient Hospital Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	307	7	104	4		1				191
Standard PA By Decision Timeframe										
Standard – 7 Days	172		53	3		1				115
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	135	7	51	1	0	0	0	0	0	76
Expedited PA Total										
Total Expedited PA requests	21	1	16			1				3
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	19	1	14			1				3
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	2	0	2	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 4-3. Outpatient Hospital Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	2.9	2.0	30.5	26.0
HMSA				
Kaiser				
UnitedHealthcare	1.0	1.0	0.0	0.0
State Average	1.9	1.5	15.2	13.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-1A. Physician Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	474	459	15	0	96.8	3.2
Total Expedited PA requests	118	118	0	0	100.0	0.0
AlohaCare Total	592	577	15	0	97.5	2.5
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UnitedHealthcare						
Total Standard PA Requests	16,141	14,959	1,182		92.7	7.3
Total Expedited PA requests	1,577	1,499	78		95.1	4.9
UnitedHealthcare Total	17,718	16,458	1,260		92.9	7.1
State Total	18,310	17,035	1,275	0	93.0	7.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	474	459	15	0	96.8	3.2	96.8	3.2
Standard PA By Decision Timeframe								
Standard – 7 Days	230	229	1	0	99.6	0.4	48.3	0.2
Standard – Extension	0	0	0	0			0.0	0.0
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	244	230	14	0	94.3	5.7	48.5	3.0
Expedited PA Total								
Total Expedited PA requests	118	118	0	0	100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	116	116	0	0	100.0	0.0	98.3	0.0
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	2	2	0	0	100.0	0.0	1.7	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
HMSA									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									
Kaiser									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									
Expedited PA Total									
Total Expedited PA requests									
Expedited PA By Decision Timeframe									
Expedited – 72 Hours									
Expedited – Extension									
Expedited – Appeal									
Expedited – Excluded/Not Reported									

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-1B. Physician Services:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests	16,141	14,959	1,182		92.7	7.3	92.7	7.3
Standard PA By Decision Timeframe								
Standard – 7 Days	12,235	11,475	760		93.8	6.2	71.1	4.7
Standard – Extension	145	129	16		89.0	11.0	0.8	0.1
Standard – Appeal	38	38	0		100.0	0.0	0.2	0.0
Standard – Excluded/Not Reported	3,723	3,317	406	0	89.1	10.9	20.6	2.5
Expedited PA Total								
Total Expedited PA requests	1,577	1,499	78		95.1	4.9	95.1	4.9
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	1,527	1,450	77		95.0	5.0	91.9	4.9
Expedited – Extension	0	0	0				0.0	0.0
Expedited – Appeal	5	5	0		100.0	0.0	0.3	0.0
Expedited – Excluded/Not Reported	45	44	1	0	97.8	2.2	2.8	0.1

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-2A. Physician Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	15		14	1						
Total Expedited PA requests	0									
AlohaCare Subtotal	15		14	1						
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UnitedHealthcare										
Total Standard PA Requests	1,182	103	300	372	306	10				91
Total Expedited PA requests	78	5	48	18		5				2
UnitedHealthcare Subtotal	1,260	108	348	390	306	15				93
State Total	1,275	108	362	391	306	15				93

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	15		14	1						
Standard PA By Decision Timeframe										
Standard – 7 Days	1		1							
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	14	0	13	1	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-2B. Physician Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests	1,182	103	300	372	306	10				91
Standard PA By Decision Timeframe										
Standard – 7 Days	760	26	195	191	278	10				60
Standard – Extension	16	4		4						8
Standard – Appeal	0									
Standard – Excluded/Not Reported	406	73	105	177	28	0	0	0	0	23
Expedited PA Total										
Total Expedited PA requests	78	5	48	18		5				2
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	77	5	47	18		5				2
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	1	0	1	0	0	0	0	0	0	0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 5-3. Physician Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	1.9	1.0	19.2	18.5
HMSA				
Kaiser				
UnitedHealthcare	3.0	2.0	24.0	24.0
State Average	2.5	1.5	21.6	21.3

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 6-1A. Behavioral Health Services:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	105	105	0	0	100.0	0.0
Total Expedited PA requests	3	3	0	0	100.0	0.0
AlohaCare Total	108	108	0	0	100.0	0.0
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UnitedHealthcare						
Total Standard PA Requests						
Total Expedited PA requests						
UnitedHealthcare Total						
State Total	108	108	0	0	100.0	0.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services: Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
AlohaCare								
Standard PA Total								
Total Standard PA Requests	105	105	0	0	100.0	0.0	100.0	0.0
Standard PA By Decision Timeframe								
Standard – 7 Days	85	85	0	0	100.0	0.0	81.0	0.0
Standard – Extension	1	1	0	0	100.0	0.0	1.0	0.0
Standard – Appeal	0	0	0	0			0.0	0.0
Standard – Excluded/Not Reported	19	19	0	0	100.0	0.0	18.1	0.0
Expedited PA Total								
Total Expedited PA requests	3	3	0	0	100.0	0.0	100.0	0.0
Expedited PA By Decision Timeframe								
Expedited – 72 Hours	3	3	0	0	100.0	0.0	100.0	0.0
Expedited – Extension	0	0	0	0			0.0	0.0
Expedited – Appeal	0	0	0	0			0.0	0.0
Expedited – Excluded/Not Reported	0	0	0	0			0.0	0.0
HMSA								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

**Table 6-1B. Behavioral Health Services:
Approved Rates by Decision Timeframe**

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 6-1B. Behavioral Health Services: Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 6-2A. Behavioral Health Services:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	0									
Total Expedited PA requests	0									
AlohaCare Subtotal	0									
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UnitedHealthcare										
Total Standard PA Requests										
Total Expedited PA requests										
UnitedHealthcare Subtotal										
State Total	0									

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	0									
Standard PA By Decision Timeframe										
Standard – 7 Days	0									
Standard – Extension	0									
Standard – Appeal	0									
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	0									
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	0									
Expedited – Extension	0									
Expedited – Appeal	0									
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 6-2B. Behavioral Health Services:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
Kaiser										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
UnitedHealthcare										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 6-3. Behavioral Health Services:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	2.9	2.0	17.0	21.0
HMSA				
Kaiser				
UnitedHealthcare				
State Average	2.9	2.0	17.0	21.0

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 7-1A. Drugs:

Approved Rates by Type of PA Request

Insurer PA Request	Total Requests	Approved	Denied	Withdrawn	Approved (%)	Denied (%)
AlohaCare						
Total Standard PA Requests	7,823	5,255	2,500	68	67.2	32.0
Total Expedited PA requests	1,458	1,115	322	21	76.5	22.1
AlohaCare Total	9,281	6,370	2,822	89	68.6	30.4
HMSA						
Total Standard PA Requests						
Total Expedited PA requests						
HMSA Total						
Kaiser						
Total Standard PA Requests						
Total Expedited PA requests						
Kaiser Total						
UnitedHealthcare						
Total Standard PA Requests						
Total Expedited PA requests						
UnitedHealthcare Total						
State Total	9,281	6,370	2,822	89	68.6	30.4

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type		
					Approved (%)	Denied (%)	Approved (%)	Denied (%)	
AlohaCare									
Standard PA Total									
Total Standard PA Requests	7,823	5,255	2,500	68	67.2	32.0	67.2	32.0	
Standard PA By Decision Timeframe									
Standard – 7 Days	7,822	5,254	2,500	68	67.2	32.0	67.2	32.0	
Standard – Extension	1	1	0	0	100.0	0.0	0.0	0.0	
Standard – Appeal									
Standard – Excluded/Not Reported	0	0	0	0			0.0	0.0	
Expedited PA Total									
Total Expedited PA requests	1,458	1,115	322	21	76.5	22.1	76.5	22.1	
Expedited PA By Decision Timeframe									
Expedited – 72 Hours	1,458	1,115	322	21	76.5	22.1	76.5	22.1	
Expedited – Extension	0	0	0	0			0.0	0.0	
Expedited – Appeal									
Expedited – Excluded/Not Reported	0	0	0	0			0.0	0.0	
HMSA									
Standard PA Total									
Total Standard PA Requests									
Standard PA By Decision Timeframe									
Standard – 7 Days									
Standard – Extension									
Standard – Appeal									
Standard – Excluded/Not Reported									

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
HMSA								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								
Kaiser								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 7-1B. Drugs:

Approved Rates by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total Requests	Approv- ed	Deni- ed	With- drawn	By Decision Timeframe		Out of Total PA Requests by Type	
					Approved (%)	Denied (%)	Approved (%)	Denied (%)
UnitedHealthcare								
Standard PA Total								
Total Standard PA Requests								
Standard PA By Decision Timeframe								
Standard – 7 Days								
Standard – Extension								
Standard – Appeal								
Standard – Excluded/Not Reported								
Expedited PA Total								
Total Expedited PA requests								
Expedited PA By Decision Timeframe								
Expedited – 72 Hours								
Expedited – Extension								
Expedited – Appeal								
Expedited – Excluded/Not Reported								

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 7-2A. Drugs:

Denial Reasons by Type of PA Request

Insurer PA Request Denial Reason	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Total Standard PA Requests	2,500	67	2,402	9					22	
Total Expedited PA requests	322	23	296						3	
AlohaCare Subtotal	2,822	90	2,698	9					25	
HMSA										
Total Standard PA Requests										
Total Expedited PA requests										
HMSA Subtotal										
Kaiser										
Total Standard PA Requests										
Total Expedited PA requests										
Kaiser Subtotal										
UnitedHealthcare										
Total Standard PA Requests										
Total Expedited PA requests										
UnitedHealthcare Subtotal										
State Total	2,822	90	2,698	9					25	

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
AlohaCare										
Standard PA Total										
Total Standard PA Requests	2,500	67	2,402	9					22	
Standard PA By Decision Timeframe										
Standard – 7 Days	2,500	67	2,402	9					22	
Standard – Extension	0									
Standard – Appeal										
Standard – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
Expedited PA Total										
Total Expedited PA requests	322	23	296						3	
Expedited PA By Decision Timeframe										
Expedited – 72 Hours	322	23	296						3	
Expedited – Extension	0									
Expedited – Appeal										
Expedited – Excluded/Not Reported	0	0	0	0	0	0	0	0	0	0
HMSA										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 7-2B. Drugs:

Denial Reasons by Decision Timeframe

Insurer/PA Request Decision Timeframe	Total PA Denied	Denial Reasons (see note)								
		R1	R2	R3	R4	R5	R6	R7	R8	R9
HMSA										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										
Expedited – Extension										
Expedited – Appeal										
Expedited – Excluded/Not Reported										
Kaiser										
Standard PA Total										
Total Standard PA Requests										
Standard PA By Decision Timeframe										
Standard – 7 Days										
Standard – Extension										
Standard – Appeal										
Standard – Excluded/Not Reported										
Expedited PA Total										
Total Expedited PA requests										
Expedited PA By Decision Timeframe										
Expedited – 72 Hours										

Section IV. Medicaid Plan Prior Authorization (PA), 2025

Table 7-3. Drugs:

Response Time (Time Between Receiving a PA Request and Sending a Decision)

Insurer	Standard – 7 Days		Expedited – 72 Hours	
	Mean (Average) Time (Days)	Median (Middle) Time (Days)	Mean (Average) Time (Hours)	Median (Middle) Time (Hours)
AlohaCare	0.3	0.3	4.8	4.8
HMSA				
Kaiser				
UnitedHealthcare				
State Average	0.3	0.3	4.8	4.8

Note:

(1) A blank cell () indicates data not available.

(2) See glossary for terms and abbreviations.

Appendix: Glossary

AlohaCare	AlohaCare Health Plan
Cigna	Cigna Health and Life Insurance Company
Denial Reason R1	Incomplete or incorrect information (This might include any of the following: missing or incorrect patient information; errors in ICD-10 or CPT/HCPCS codes; missing medical records, inadequate physician notes, lack of relevant lab results, or failure to include previous treatment histories; etc.)
Denial Reason R2	Medical necessity criteria not met
Denial Reason R3	Non-covered services or exceeding limits
Denial Reason R4	Prior authorization timelines not met (This might also include expired authorization or duplicate requests.)
Denial Reason R5	Out-of-network providers
Denial Reason R6	Lack of step therapy/testing attempts
Denial Reason R7	Therapy requires multiple PA requests
Denial Reason R8	Non-formulary medications
Denial Reason R9	Other (This might include but is not limited to any of the following: Invalid preauthorization request form submitted; Pre-existing condition exclusion; Lack of peer-to-peer review; Treatment is not consistent with published clinical evidence; etc.)
Expedited – 72 Hours	Expedited PA decision made within 72 hours
Expedited – Appeal	Expedited PA decision made after appeal
Expedited – Excluded/Not Reported	Expedited PA decision excluded/not reported within defined decision timeframe
Expedited – Extension	Expedited PA decision made after extension (up to 14 days, from day 4 to day 17)
HMAA	Hawaii Managemnet Alliance Association
HMSA	Hawaii Medical Service Association
Kaiser	Kaiser Permanente – Hawaii
PA	Prior authorization
Standard – 7 Days	Standard PA decision made within 7 calendar days
Standard – Appeal	Standard PA decision made after appeal
Standard – Excluded/Not Reported	Standard PA decision excluded/not reported within defined decision timeframe

Appendix: Glossary

Standard – Extension	Standard PA decision made after extension (up to 14 days, from day 8 to day 21)
UHA Health Insurance	University Health Alliance Health Insurance
UnitedHealthcare	United HealthCare Services, Inc
