



HealthTeam Advantage Medicare Advantage Plan Reporting - CY 2025

Prior Authorization Metrics for Medical Items and Services (excluding Drugs)

Standard (non-urgent) Prior Authorization Requests	Count	% of Total
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Request approved	8,315	98.6%
Request denied	120	1.4%
Total Requests	8,435	100.0%

Request approved within 7 days	3,986	47.3%
Request denied within 7 days	15	0.2%
Total Requests	8,435	

Request approved only after time for review was extended	3	0.04%
Request denied after time for review was extended	4	0.05%
Total Requests	8,435	

Request approved only after appeal	-	0.0%
Request denied after appeal	7	100.0%
Total Appeals	7	100.0%

Expedited (urgent) Prior Authorization Requests (Response Due to Provider Within 72 Hours)	Count	% of Total
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Request approved	1,959	81.3%
Request denied	451	18.7%
Total Requests	2,410	100.0%

Request approved within 72 hours	1,937	80.4%
Request denied within 72 hours	438	18.2%
Total Requests	2,410	

Request approved only after time for review was extended	11	0.46%
Request denied after time for review was extended	7	0.29%
Total Requests	2,410	

Request approved only after appeal	92	95.8%
Request denied after appeal	4	4.2%
Total Appeals	96	100.0%

Time Between Receiving a Prior Authorization Request and Sending a Decision	Average Days	Median Days
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Standard (non-urgent) Prior Authorization Requests (response due to provider within 7 calendar days)	6.45	6.50
Expedited (urgent) Prior Authorization Requests (response due to provider within 72 hours)	2.41	1.88