



UnitedHealthcare Prior Authorization (PA) Calendar Year 2025

Overview

Prior authorization is a clinical review process that helps check whether the treatment being requested – like a complex surgery or a therapy provided as part of a clinical trial – is covered by the patients' health insurance plan, and the services meet the standards for quality and safety. The process also works to reduce and remove fraud, waste, and abuse. Prior authorization only applies to planned services and is never required for emergencies or urgent care.

At UnitedHealthcare, we're committed to ensuring our 50M members have access to safe, coordinated, effective care while helping make the health care system work better for everyone -- prior authorization is an important part of that commitment. Across UnitedHealthcare, prior authorization is not required for 98% of all medical claims, and when it is required, nearly half are approved real time, and almost all are decided within 24 hours. *

While prior authorization doesn't impact everyone, we're working hard to make the experience simpler, faster, and more transparent for all.

CMS Final Rule

In addition to UnitedHealthcare's individual efforts, in 2024, the Centers for Medicare & Medicaid Services (CMS) announced the CMS Interoperability and Prior Authorization Final Rule (the "Final Rule") that requires Medicare Advantage (MA) organizations, Medicaid fee-for-service programs, Medicaid managed care plans, Children's Health Insurance Program (CHIP) programs, and Qualified Health Plan (QHP) issuers on Federally Facilitated Exchanges (FEEs) to publish certain prior authorization metrics annually.

- > A list of all medical items and services that require prior authorization (excluding drugs).
- > For standard prior authorization requests, aggregated for all items and services:
 - a. Percentage and number approved in the calendar year
 - b. Percentage and number not approved¹ in the calendar year
 - c. Percentage and number approved in the calendar year after appeal
 - d. The average (mean) and median response times that elapsed between the submission of a request and a determination by the payer
- > For expedited prior authorization requests, aggregated for all items and services:
 - a. Percentage and number approved in the calendar year
 - b. Percentage and number not approved¹ in the calendar year
 - c. Percentage and number approved in the calendar year after appeal
 - d. The average (mean) and median response times that elapsed between the submission of a request and a determination by the payer
- > The percentage of requests where the timeframe for review was extended, and the request was approved.

It is important to note the prior authorization numbers reported under the Final Rule include services that may not have been approved for a variety of reasons including administrative reasons, such as missing medical documents, coverage reasons, such as requests for services not covered under the health plan, or clinical reasons, such as requests for services that are not aligned with clinical policy or existing medical evidence (e.g. experimental treatments).

The following pages provide the required data.

¹Not Approved: Across UnitedHealthcare plans, the total number of claims that require prior authorization is only 2%, and UnitedHealthcare approves prior authorization requests over 90% of the time and pays more than 98% of valid claims. However, there may be large variations when reviewing this data at the contract or plan level. These variations may be due to significant differences in the number of members associated with each contract (e.g. some contracts cover just a few members, some cover thousands), different demographics covered under each contract (e.g. some contracts may serve healthier populations than others), different data sets, and the different plans associated with certain contracts (e.g. contracts can cover Exchange plans, Medicare plans, or Medicaid or CHIP plans).



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The following prior authorization data is being reported consistent with the CMS Final Rule and includes certain prior authorization and appeal information for members enrolled in UnitedHealthcare Individual and Family ACA plans on the Federal Marketplace Exchange from January 1, 2025 to December 31, 2025, including prior authorization requests for transitions to post-acute care and submitted to capitated-delegated providers, behavioral health delegates, physical health delegates and dental delegates (where applicable). The reports do not include any reporting related to prescription drugs (when not under the medical benefit). Access the current prior authorization requirements for medical items and services for UnitedHealthcare Individual and Family ACA plans on the Federal Marketplace Exchange [here](#). Historical prior authorization requirements are available [here](#) and are listed by the applicable plan. Information is current as of the date of posting.

Note: UnitedHealthcare does not extend the timeframe to review prior authorization requests. As a result, UnitedHealthcare is not reporting information related to extensions.

State	Type	Total Cases	Initial Approved		Initial Not Approved		Approved Post-Appeal % of Total Appeals		Final Not Approved (Upheld) % of Total Authorizations		Time to Determination	
			Count	%	Count	%	Count	%	Count	%	Mean (Days)	Median (Days)
AL	Expedited	3,562	3,268	91.7%	294	8.3%	4	30.8%	290	8.1%	0	0.4
	Standard	35,528	29,223	82.3%	6,305	17.7%	51	44.3%	6,254	17.6%	0	3.7
	Total	39,090	32,491	83.1%	6,599	16.9%	55	43.0%	6,544	16.7%	N/A	N/A
AZ	Expedited	2,905	2,691	92.6%	214	7.4%	5	71.4%	209	7.2%	0	0.6
	Standard	20,358	15,269	75.0%	5,089	25.0%	16	29.1%	5,073	24.9%	0	2.3
	Total	23,263	17,960	77.2%	5,303	22.8%	21	33.9%	5,282	22.7%	N/A	N/A
FL	Expedited	3,809	3,553	93.3%	256	6.7%	4	33.3%	252	6.6%	0	0.3
	Standard	21,218	16,486	77.7%	4,732	22.3%	23	41.8%	4,709	22.2%	0	1.7
	Total	25,027	20,039	80.1%	4,988	19.9%	27	40.3%	4,961	19.8%	N/A	N/A
IA	Expedited	7	5	71.4%	2	28.6%	0	0%	2	28.6%	0	0.1
	Standard	195	171	87.7%	24	12.3%	0	0%	24	12.3%	0	1.1
	Total	202	176	87.1%	26	12.9%	0	0%	26	12.9%	N/A	N/A
IN	Expedited	20	19	95.0%	1	5.0%	0	0%	1	5.0%	0	0.3
	Standard	392	311	79.3%	81	20.7%	0	0%	81	20.7%	0	1.3
	Total	412	330	80.1%	82	19.9%	0	0%	82	19.9%	N/A	N/A
KS	Expedited	440	403	91.6%	37	8.4%	0	0%	37	8.4%	0	0.4
	Standard	6,256	5,361	85.7%	895	14.3%	13	61.9%	882	14.1%	0	1.3
	Total	6,696	5,764	86.1%	932	13.9%	13	61.9%	919	13.7%	N/A	N/A



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LA	Expedited	1,852	1,780	96.1%	72	3.9%	1	100.0%	71	3.8%	0	0.3
	Standard	6,245	5,334	85.4%	911	14.6%	10	45.5%	901	14.4%	0	1.3
	Total	8,097	7,114	87.9%	983	12.1%	11	47.8%	972	12.0%	N/A	N/A
MI	Expedited	717	673	93.9%	44	6.1%	3	75.0%	41	5.7%	0	0.4
	Standard	5,301	3,801	71.7%	1,500	28.3%	8	40.0%	1,492	28.1%	0	1.3
	Total	6,018	4,474	74.3%	1,544	25.7%	11	45.8%	1,533	25.5%	N/A	N/A
MO	Expedited	874	849	97.1%	25	2.9%	0	0%	25	2.9%	0	0.4
	Standard	8,639	7,649	88.5%	990	11.5%	13	41.9%	977	11.3%	0	0.7
	Total	9,513	8,498	89.3%	1,015	10.7%	13	41.9%	1,002	10.5%	N/A	N/A
MS	Expedited	208	188	90.4%	20	9.6%	3	100.0%	17	8.2%	0	0.4
	Standard	2,888	2,339	81.0%	549	19.0%	3	42.9%	546	18.9%	0	1.2
	Total	3,096	2,527	81.6%	569	18.4%	6	60.0%	563	18.2%	N/A	N/A
NC	Expedited	1,040	976	93.8%	64	6.2%	3	60.0%	61	5.9%	0	0.4
	Standard	10,079	8,866	88.0%	1,213	12.0%	6	23.1%	1,207	12.0%	0	0.9
	Total	11,119	9,842	88.5%	1,277	11.5%	9	29.0%	1,268	11.4%	N/A	N/A
NE	Expedited	64	58	90.6%	6	9.4%	0	0%	6	9.4%	0	0.6
	Standard	825	668	81.0%	157	19.0%	1	33.3%	156	18.9%	0	1.2
	Total	889	726	81.7%	163	18.3%	1	33.3%	162	18.2%	N/A	N/A



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OH	Expedited	468	441	94.2%	27	5.8%	0	0%	27	5.8%	0	0.2
	Standard	4,636	3,514	75.8%	1,122	24.2%	5	38.5%	1,117	24.1%	0	0.8
	Total	5,104	3,955	77.5%	1,149	22.5%	5	38.5%	1,144	22.4%	N/A	N/A
SC	Expedited	604	567	93.9%	37	6.1%	0	0%	37	6.1%	0	0.2
	Standard	4,264	3,194	74.9%	1,070	25.1%	0	0.0%	1,070	25.1%	0	0.9
	Total	4,868	3,761	77.3%	1,107	22.7%	0	0.0%	1,107	22.7%	N/A	N/A
TN	Expedited	2,646	2,524	95.4%	122	4.6%	4	44.4%	118	4.5%	0	0.5
	Standard	18,945	16,765	88.5%	2,180	11.5%	19	36.5%	2,161	11.4%	0	1.1
	Total	21,591	19,289	89.3%	2,302	10.7%	23	37.7%	2,279	10.6%	N/A	N/A
TX	Expedited	13,487	11,833	87.7%	1,654	12.3%	27	23.5%	1,627	12.1%	0	0.5
	Standard	66,385	50,743	76.4%	15,642	23.6%	140	38.6%	15,502	23.4%	0	0.9
	Total	79,872	62,576	78.3%	17,296	21.7%	167	34.9%	17,129	21.4%	N/A	N/A
WI	Expedited	640	571	89.2%	69	10.8%	4	50.0%	65	10.2%	0	0.8
	Standard	9,314	8,345	89.6%	969	10.4%	8	38.1%	961	10.3%	0	0.8
	Total	9,954	8,916	89.6%	1,038	10.4%	12	41.4%	1,026	10.3%	N/A	N/A
WY	Expedited	72	60	83.3%	12	16.7%	0	0.0%	12	16.7%	0	0.7
	Standard	996	807	81.0%	189	19.0%	4	66.7%	185	18.6%	0	1.2
	Total	1,068	867	81.2%	201	18.8%	4	50.0%	197	18.4%	N/A	N/A