



Colorado Statistics for Select Health Commercial Plans - Prior Authorization Case Review

The following information is provided to comply with a regulatory requirement for the State of Colorado to disclose information for services that require prior authorization requests. The following chart includes the number of commercial fully insured prior authorization* cases that have received approvals, denials, and denials overturned on appeal per Colorado Statute 10-16-124.5.

* Prior authorization means the process by which a carrier or organization determines the medical necessity and appropriateness of otherwise covered health care services prior to the rendering of the services. Prior authorization includes preadmission review, pretreatment review, utilization review, and case management and a carrier's or organization's requirement that a covered person or provider notify the carrier or organization prior to receiving or providing a health care service.

Q3 2024

Provider Specialty	Procedure	Prior Authorizations Approved	Prior Authorizations Denied	Denied - Not Medically Necessary	Denied - Experimental and/or Investigational	Denied - Lack of Information/Other	Denied - Overturned on Appeal
Ambulance	Ambulance	0	0	0	0	0	0
Durable Medical Equipment	DME/Prosthetics/Supplies	2	0	0	0	0	0
Facility	Inpatient Behavioral Health	5	0	0	0	0	0
	Inpatient Medical	50	2	0	0	2	0
	OP Facility - Behavioral Health	5	0	0	0	0	0
	OP Facility - Emergency	0	0	0	0	0	0
	OP Facility - Other	9	5	0	0	5	4
	OP Facility - Surgery	12	10	0	0	10	0
	Skilled Nursing Facility	1	1	0	0	1	0
Home Health	Home Health	15	10	0	0	10	2
Primary Care Provider (PCP)	Behavioral Health	1	0	0	0	0	0
	Diagnostic Test	0	0	0	0	0	0
	Miscellaneous	18	0	0	0	0	0
	Office	10	3	0	0	3	1
Specialist (SCP)	Behavioral Health	15	0	0	0	0	0
	Diagnostic Test	3	0	0	0	0	0
	Miscellaneous	41	8	1	0	7	0
	Office	13	6	0	0	6	2
Other	Diagnostic Test	0	0	0	0	0	0
	Professional	0	0	0	0	0	0
Pharmacy	Medication	111	172	67	0	105	5