

4.40 Utilization Management - Prior Authorizations Data and Website Posting			
MHP:	UNI		
<p>Authority: 1.1 XI(I)(5)(e) Beginning January 1, 2026, plan must report prior authorization data from the previous calendar year, excluding data on any drugs covered by the plan by February 15 of each year, in accordance with 42 CFR 438.210 (f). Plan must make the PA data from the previous calendar year publicly accessible by posting it on its website. This data will be used for Managed Care Plan Annual Reporting (MCPAR).</p>			
MCPAR Element ID	Element	Instructions	Plan's Response
D1.XII I.1	URL for prior authorization data on plan's website	<p>Please provide the URL where the plan posts prior authorization data for all items and services excluding drugs, as required in 42 CFR 438.210(f).</p>	<ol style="list-style-type: none"> 1. Go to uhcprovider.com 2. Click on Coverage and Payments 3. Under Health Plans select Michigan 4. Under Community plan (Medicaid), click "View Plans" 5. Under Prior Authorization and Notification Resources, click "Learn More" 6. Under UnitedHealthcare Community Plan of Michigan, click the link. <p>Link: https://www.uhcprovider.com/en/health-plans-by-state/michigan-health-plans/mi-comm-plan-home/mi-cp-prior-auth.html</p>

<p>D1.XII I.2</p>	<p>URL for list of all items and services subject to prior authorization</p>	<p>Please provide the URL where the plan posts the list of all items and services, excluding drugs, that are subject to prior authorization, as required in 42 CFR 438.210(f)(1).</p>	<p>Medical1. Go to uhcprovider.com2. Click on Coverage and Payments3. Under Health Plas select Michigan4. Under Community plan (Medicaid), click “View Plans”5. Under Prior Authorization and Notification Resources, click “Learn More”6. Scroll down to bottom of page and click on “Annual prior authorization summary”Link: https://www.uhcprovider.com/content/dam/provider/docs/public/complan/mi/prior-authorization/MI-UHCCP-PA-Medicaid-Health-CSHCS-2-1-2026.pdf Dental:1. Go to uhcdental.com2. On top of page click on “Medicaid”3. Click on “Medicaid Plans”4. Click on “Michigan” 5. Click on “Provider quick reference guide” Link: https://www.uhcdental.com/content/dam/provider/dental/medicaid/MI_Provider-QRG.pdf</p>
<p>D1.XII I.3</p>	<p>Total standard prior authorizations requests received</p>	<p>Enter the total number of standard prior authorization requests received by the plan for all items and services, excluding drugs, during the prior calendar year.</p>	<p>80,959</p>
<p>D1.XII I.4</p>	<p>Total expedited prior authorization requests received</p>	<p>Enter the total number of expedited prior authorization requests received by the plan for all items and services, excluding drugs,</p>	<p>5,729</p>

		during the prior calendar year.	
D1.XII I.5	Total standard and expedited prior authorization requests received	Enter the total number of standard and expedited prior authorization requests received (D1.XIII.3 plus D1.XIII.4) by the plan during the prior calendar year.	86,688
D1.XII I.6	Percentage of standard prior authorization requests that were approved	Of the total standard prior authorization requests, as reported in D1.XIII.3, enter the percentage that were fully approved.	90.53%
D1.XII I.7	Percentage of standard prior authorization requests that were denied	Of the total standard prior authorization requests, as reported in D1.XIII.3, enter the percentage that were fully or partially denied.	9.47%
D1.XII I.8	Percentage of standard prior authorization requests approved after appeal	Of the total standard prior authorization requests, as reported in D1.XIII.3, enter the percentage that were	0.50%

		approved after appeal.	
D1.XII I.9	Average time to decision for standard prior authorizations	Of the total standard prior authorization requests, as reported in D1.XIII.3, enter the average number of days that elapsed between submission of request and decision by the plan.	2.07
D1.XII I.10	Median time to decision on standard prior authorizations	Of the total standard prior authorization requests, as reported in D1.XIII.3, enter the median number of days that elapsed between submission of request and decision by the plan.	1
D1.XII I.11	Percentage of expedited prior authorization requests that were approved	Of the total expedited prior authorization requests reported in D1.XIII.4, enter the percentage that were approved.	98.08%
D1.XII I.12	Percentage of expedited prior authorization	Of the total expedited prior authorization requests, as	1.92%

	requests that were denied	reported in D1.XIII.4, enter the percentage that were denied.	
D1.XII I.13	Average time to decision for expedited prior authorizations	Of the total expedited prior authorization requests, as reported in D1.XIII.4, enter the average number of hours that elapsed between submission of request and decision by the plan.	7.91
D1.XII I.14	Median time to decision for expedited prior authorizations	Of the total expedited prior authorization requests, as reported in D1.XIII.4, enter the median number of hours that elapsed between submission of request and decision by the plan.	1.79
D1.XII I.15	Percentage of total prior authorization requests approved with extended timeframe	Of the total prior authorization requests, as reported in D1.XIII.5, enter the percentage of requests for which the timeframe for review was extended and the	0.02%

		request was approved.	
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