

MEDI-CAL PRIOR AUTHORIZATION METRICS REPORTING

To comply with the CMS Interoperability and Prior Authorization final rule, Caloptima Health is required to annually report aggregated prior authorization metrics on our website. Specifically, this includes a list of all medical items and services (excluding drugs) that require prior authorization, as well as data on prior authorization requests for those items and services (e.g., approvals, denials, etc.) over the previous calendar year. Publicly reporting these metrics promotes transparency and accountability, helps patients understand prior authorization processes, and enables providers to evaluate payer performance. In addition, metrics can be used to compare plans, programs, and payers.

For questions on the data below, contact: Director, Clinical Operations Administration jennifer.harlow@caloptima.org

Reporting Period: 2025

These are the medical items and services for which we require prior authorization (excluding drugs)

[CalOptima Health Prior Authorization Guide for Providers](#)

STANDARD

Standard (non-urgent) Prior Authorization Requests

	How many times this happened	Out of total requests	Percentage
Request approved	948,623	965,191	98.28%
Request denied	16,568	965,191	1.72%
	How many times this happened	Out of total requests	Percentage
Request approved only after time for review was extended	1,955	965,191	0.20%
Request denied after time for review was extended	1,092	965,191	0.11%

	How many times this happened	Out of total appeals	Percentage
Request approved only after appeal	306	1,080	28.33%
Request denied after appeal	774	1,080	71.67%

SUMMARY

In 2025 we received a total of 965,191 standard (non-urgent) prior authorization requests for our members. 96.28% of those requests were approved.

EXPEDITED

Expedited (urgent) Prior Authorization Requests (Response Due to Provider Within 72 Hours)

	How many times this happened	Out of total requests	Percentage
Request approved	136,258	140,631	96.89%
Request denied	4,373	140,631	3.11%

	How many times this happened	Out of total requests	Percentage
Request approved only after time for review was extended*	234	140,631	0.17%
(optional) Request denied after time for review was extended	86	140,631	0.06%

	How many times this happened	Out of total appeals	Percentage
(optional) Request approved only after appeal	44	134	32.84%
(optional) Request denied after appeal	90	134	67.16%

SUMMARY

In 2025 we received a total of 140,631 expedited (urgent) prior authorization requests for our members. 96.89% of those requests were approved.

TURNAROUND TIME

Time Between Receiving a Prior Authorization Request and Sending a Decision

	Mean (Average) Time	Median (Middle) Time
Standard (non-urgent) Prior Authorization Requests (response due to provider within 14 calendar days)	1.41 days	0.00 days
Expedited (urgent) Prior Authorization Requests (response due to provider within 72 hours)	0.53 days	0.12 days