

ANNUAL PRIOR AUTHORIZATION STATISTICS

Prescription Drugs

Oscar Health provides the following information to comply with a regulatory requirement for the state of **New Jersey** to disclose information for services that require pre-service review. The following report details the number of pre-service requests that have received approvals and adverse determinations (denials) for the plan year of 2025.

Annual Prior Authorization Volume, by Outcome							
	Approved			Denied			Total
	Expedited	Standard	Total Approved	Expedited	Standard	Total Denied	
Prior Authorization Requests Received (count)	1,112	1,612	2,724	1,551	3,161	4,712	7,436
Prior Authorization Requests Received (rate)	15.0%	21.6%	36.6%	20.9%	42.5%	63.4%	100%

Annual Appeal Volume, by Outcome							
	Overturned (Approved)			Upheld (Denied)			Total
	Expedited	Standard	Total Overturned	Expedited	Standard	Total Upheld	
Appeal Requests Received (count)	80	76	156	69	110	179	335
Appeal Requests Received (rate)	23.9%	22.7%	46.6%	20.6%	32.8%	53.4%	100%

Health Plan Decision Timeliness, by Urgency		
	Time (days)	
	Expedited	Standard
Average Time Between Prior Authorization Submission and Response	0.5	1.8
Average Time Between Appeal Submission and Response	1.4	5.2

Requesting Prescriber Response Timeliness, by Urgency		
	Time (days)	
	Expedited	Standard
Average Prescriber Response	1.0	1.1
Median Prescriber Response	1.0	1.0

Annual Prior Authorization Volume, by Patient Indication (Diagnosis) Top Thirty (30)			
No.	Consumer Description	ICD-10 Code	%
1	Type 2 diabetes mellitus without complications	E11.9	6.53%
2	Psoriasis vulgaris	L40.0	3.20%
3	Acne vulgaris	L70.0	2.74%
4	Morbid (severe) obesity due to excess calories	E66.01	2.51%
5	Obesity, unspecified	E66.9	2.35%
6	Obstructive sleep apnea (adult) (pediatric)	G47.33	2.15%
7	Type 1 diabetes mellitus with hyperglycemia	E10.65	1.63%
8	Mixed hyperlipidemia	E78.2	1.60%
9	Migraine w/o aura, not intractable, w/o status migrainosus	G43.009	1.60%
10	Other atopic dermatitis	L20.89	1.53%

11	Chronic migraine w/o aura, not intractable, w/o stat migr	G43.709	1.50%
12	Testicular hypofunction	E29.1	1.31%
13	Dry eye syndrome of bilateral lacrimal glands	H04.123	1.31%
14	Attention-deficit hyperactivity disorder, combined type	F90.2	1.08%
15	Attn-defct hyperactivity disorder, predom inattentive type	F90.0	1.01%
16	Athscl heart disease of native coronary artery w/o ang pctrs	I25.10	0.88%
17	Type 2 diabetes mellitus with other specified complication	E11.69	0.85%
18	Obesity, class 1	E66.811	0.85%
19	Hyperlipidemia, unspecified	E78.5	0.85%
20	Gastro-esophageal reflux disease without esophagitis	K21.9	0.78%
21	Migraine, unsp, not intractable, without status migrainosus	G43.909	0.72%
22	Atopic dermatitis, unspecified	L20.9	0.72%
23	Major depressv disorder, recurrent severe w/o psych features	F33.2	0.65%
24	Major depressive disorder, recurrent, moderate	F33.1	0.65%
25	Prediabetes	R73.03	0.62%
26	Obesity, class 2	E66.812	0.62%
27	Migraine w/o aura, not intractable, with status migrainosus	G43.001	0.59%
28	Bilateral primary osteoarthritis of knee	M17.0	0.59%
29	Type 1 diabetes mellitus without complications	E10.9	0.55%
30	Unilateral primary osteoarthritis, right knee	M17.11	0.52%

Top Five (5) Reasons for Adverse Determinations (Denials)		
No.	Reason	%
1	Medical necessity	74.4%
2	Benefit not covered	11.8%

3	Exceeds Quantity Limit	0.6%
4	Lack of Information	0.2%
5	Trial and Failure required	0.1%

Annual Prior Authorization Volume, by Requesting Prescriber Top Ten (10)	
No.	Requesting Prescriber Type
1	Doctor of Medicine (MD)
2	Nurse Practitioner (NP)
3	Physician Assistant (PA)
4	Registered Nurse (RN)
5	Doctor of Osteopathic Medicine (DO)
6	
7	
8	
9	
10	
No.	Requesting Prescriber Specialty
1	Nurse Practitioner
2	Family Practice
3	Internal Medicine
4	Physician Assistant
5	Endocrinologist
6	Dermatologist
7	Neurologist

8	Cardiologist
9	Psychiatrist
10	Gastroenterologist

Total Appeals Generated Due to Missing or Inadequate Clinical Information	
Appeals Generated Due to Insufficient Clinical Info	218