

Prior Authorization Statistics - IL - CY 2021

| Procedure Code Description | Diagnosis Code Description   | Provider Specialty   | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | ACHILLES TENDINITIS, RIGHT LEG, ACHILLES TENDINITIS, LEFT LEG, PAIN IN RIGHT LOWER LEG, PAIN IN LEFT LOWER LEG   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ACHILLES TENDINITIS, RIGHT LEG, PAIN IN RIGHT FOOT, OTHER ABNORMALITIES OF GAIT AND MOBILITY   | Physical Therapy     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | ADHESIVE CAPSULITIS OF LEFT SHOULDER, PAIN IN LEFT SHOULDER  | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ADHESIVE CAPSULITIS OF RIGHT SHOULDER, ADHESIVE CAPSULITIS OF LEFT SHOULDER, PAIN IN RIGHT SHOULDER, PAIN IN LEFT SHOULDER   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ADHESIVE CAPSULITIS OF RIGHT SHOULDER, BURSITIS OF RIGHT SHOULDER, STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM                       | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ADHESIVE CAPSULITIS OF RIGHT SHOULDER, OTHER ARTICULAR CARTILAGE DISORDERS, RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ANTERIOR TIBIAL SYNDROME, LEFT LEG, INJ OTH MUSC/TEND AT LOWER LEG LEVEL, LEFT LEG, INIT, POSTERIOR TIBIAL TENDINITIS, LEFT LEG  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ATTENTION-DEFICIT HYPERACTIVITY DISORDER, COMBINED TYPE, OTHER DISORDERS OF PSYCHOLOGICAL DEVELOPMENT, PERVASIVE DEVELOPMENTAL DISORDERS   | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | AUTISTIC DISORDER  | Occupational Therapy | 3                  | 2                | 2               |  |                          |                        |                      |                 |
|                            | AUTISTIC DISORDER, DELAYED MILESTONE IN CHILDHOOD, Other specified disorders of central nervous system   | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | BRACHIAL PLEXUS DISORDERS, CERVICALGIA, PAIN IN RIGHT SHOULDER   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | CALCANEAL SPUR, UNSPECIFIED FOOT, PLANTAR FASCIAL FIBROMATOSIS   | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | CALCIFIC TENDINITIS OF LEFT SHOULDER, IMPINGEMENT SYNDROME OF LEFT SHOULDER, POST-TRAUMATIC OSTEOARTHRITIS, ELBOW, PAIN IN LEFT SHOULDER   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | CERVICALGIA  | Physical Therapy     | 1                  | 3                | 3               |  |                          |                        |                      |                 |
|                            | CERVICALGIA, BENIGN PAROXYSMAL VERTIGO, BILATERAL  | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | CERVICALGIA, MIGRAINE W/O AURA, INTRACTABLE, WITHOUT STATUS MIGRAINOSUS  | Physical Therapy     | 2                  |                  |                 |  |                          |                        |                      |                 |
|                            | CERVICALGIA, OTHER SPECIFIED DISORDERS OF MUSCLE   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|                            | CERVICALGIA, PAIN IN LEFT HIP, UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT HIP   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | CERVICALGIA, PAIN IN RIGHT KNEE, PAIN IN RIGHT SHOULDER  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | CERVICALGIA, PAIN IN THORACIC SPINE  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | CERVICALGIA, RADICULOPATHY, CERVICAL REGION  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | CERVICALGIA, SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION, STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | CERVICALGIA, SPRAIN OF LIGAMENTS OF CERVICAL SPINE, SUBSEQUENT ENCOUNTER   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | CERVICALGIA, WEAKNESS, DIZZINESS AND GIDDINESS, OTHER HEADACHE SYNDROME  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | COLLES' FRACTURE OF RIGHT RADIUS, INIT FOR CLOS FX, PAIN IN RIGHT HAND, STIFFNESS OF RIGHT WRIST, NOT ELSEWHERE CLASSIFIED   | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | COLLES' FX LEFT RADIUS, SUBS FOR CLOS FX W ROUNTN HEAL, CARPAL TUNNEL SYNDROME, LEFT UPPER LIMB  | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | COLLES' FX LEFT RADIUS, SUBS FOR CLOS FX W ROUNTN HEAL, CARPAL TUNNEL SYNDROME, LEFT UPPER LIMB  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | COMPLETE ROTATR-CUFF TEAR/RUPTR OF LEFT SHOULDER, NOT TRAUMA, OTHER ARTICULAR CARTILAGE DISORDERS, LEFT SHOULDER   | Physical Therapy     |                    | 3                | 3               |  |                          |                        |                      |                 |
|                            | COMPLETE TRAUM AMP AT LEV BETW KN AND ANKL, R LOW LEG, INIT  | Physical Therapy     |                    | 3                | 3               |  |                          |                        |                      |                 |
|                            | CONTUSION OF LEFT THIGH, SUBSEQUENT ENCOUNTER  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | DERANG OF POST HORN OF MEDIAL MENS D/T OLD TEAR/INJ, L KNEE  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | DERANG OF UNSP MEDIAL MENISCUS DUE TO OLD TEAR/INJ, L KNEE, RADICULOPATHY, LUMBAR REGION   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | DISLOCATION OF TARSOMETATARSAL JOINT OF RIGHT FOOT, SUBS, PAIN IN RIGHT FOOT, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | DISORDER OF MUSCLE, UNSPECIFIED  | Occupational Therapy | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | DISPLACED PILON FX R TIBIA, SUBS FOR CLOS FX W ROUNTN HEAL   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | DISPLACED TRANSVERSE FRACTURE OF RIGHT PATELLA, SEQUELA  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |

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|                            | DIZZINESS AND GIDDINESS, CERVICALGIA, RADICULOPATHY, CERVICAL REGION   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | DIZZINESS AND GIDDINESS, Headache, unspecified, UNSTEADINESS ON FEET, CERVICALGIA  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | DORSALGIA, UNSPECIFIED, CERVICALGIA, PAIN IN RIGHT SHOULDER  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | DORSALGIA, UNSPECIFIED, RADICULOPATHY, LUMBAR REGION, MUSCLE WEAKNESS (GENERALIZED), STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED                  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE, ADHESIVE CAPSULITIS OF RIGHT SHOULDER, PAIN IN RIGHT HIP, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED      | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE, ADHESIVE CAPSULITIS OF RIGHT SHOULDER, PAIN IN RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE, INTVRT DISC DISORDERS W RADICULOPATHY, LUMBOSACRAL REGION, OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBAR REGION     | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE, PAIN IN RIGHT SHOULDER, UNSP ROTATR-CUFF TEAR/RUPTR OF RIGHT SHOULDER, NOT TRAUMA                            | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | HALLUX RIGIDUS, RIGHT FOOT, HALLUX RIGIDUS, LEFT FOOT, STIFFNESS OF RIGHT FOOT, NOT ELSEWHERE CLASSIFIED, UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY       | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | HEMIPLGA FOLLOWING CEREBRAL INFRC AFF RIGHT DOMINANT SIDE, ATAXIC GAIT, WEAKNESS   | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | HEMIPLGA FOLLOWING CEREBRAL INFRC AFF RIGHT DOMINANT SIDE, WEAKNESS, ATAXIC GAIT   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | ILOTIBIAL BAND SYNDROME, RIGHT LEG, OTHER SPECIFIED DISORDERS OF MUSCLE, PAIN IN RIGHT HIP, OTHER REDUCED MOBILITY   | Physical Therapy   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | IMPINGEMENT SYNDROME OF LEFT SHOULDER, BURISITIS OF LEFT SHOULDER, PAIN IN LEFT SHOULDER   | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, PAIN IN RIGHT SHOULDER   | Physical Therapy   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED, PAIN, UNSPECIFIED, PAIN IN LEFT SHOULDER                        | Physical Therapy   | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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|                            | INJ OTH MUSC/TEND AT LOWER LEG LEVEL, RIGHT LEG, SUBS, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM, PAIN IN RIGHT LOWER LEG, INJ OTH MUSC/TEND AT LOWER LEG LEVEL, LEFT LEG, SUBS  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | INJURY OF ULNAR NERVE AT FOREARM LEVEL, LEFT ARM, SEQUELA, CERVICALGIA, IMPINGEMENT SYNDROME OF LEFT SHOULDER, PAIN IN LEFT SHOULDER   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LACERATION W/O FB OF R MID FINGER W/O DAMAGE TO NAIL, SUBS, HYPERTROPHIC SCAR  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | LATERAL EPICONDYLITIS, RIGHT ELBOW, PAIN IN RIGHT ELBOW  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LEFT LOWER QUADRANT PAIN, OTH ENTHESOPATHIES OF LEFT LOWER LIMB, EXCLUDING FOOT, PAIN IN LEFT HIP, PAIN IN RIGHT HIP, Other low back pain, STIFFNESS OF RIGHT HIP, NOT ELSEWHERE CLASSIFIED, STIFFNESS OF LEFT HIP, NOT ELSEWHERE CLASSIFIED | Physical Therapy   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | LESION OF PLANTAR NERVE, LEFT LOWER LIMB, METATARSALGIA, LEFT FOOT   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LOOSE BODY IN LEFT SHOULDER  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN  | Physical Therapy   | 1                  | 8                | 8               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, ARTHRODESIS STATUS   | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, INTVRT DISC DISORDERS W RADICULOPATHY, LUMBOSACRAL REGION, OTHER SPONDYLOSIS WITH RADICULOPATHY, LUMBOSACRAL REGION, MUSCLE WEAKNESS (GENERALIZED)  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, MUSCLE WEAKNESS (GENERALIZED), FUSION OF SPINE, LUMBOSACRAL REGION  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, MYALGIA, OTHER SITE   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, MYALGIA, UNSPECIFIED SITE   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, OTHER CHRONIC PAIN  | Physical Therapy   | 2                  |                  |                 |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, PAIN IN RIGHT LEG, SPINAL INSTABILITIES, LUMBAR REGION, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, STIFFNESS OF RIGHT HIP, NOT ELSEWHERE CLASSIFIED, STIFFNESS OF LEFT HIP, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT SHOULDER   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, STRAIN OF MUSCLE, FASCIA AND TENDON OF LOWER BACK, INIT   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | Low back pain, unspecified   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | Low back pain, unspecified, PAIN IN RIGHT HIP  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |

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|                            | Low back pain, unspecified, STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED), RADICULOPATHY, LUMBAR REGION                             | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LOW BACK PAIN, WEAKNESS, TROCHANTERIC BURSTITIS, RIGHT HIP  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LUMBAGO WITH SCIATICA, LEFT SIDE, LOW BACK PAIN, PAIN IN LEFT HIP   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | LUMBAGO WITH SCIATICA, LEFT SIDE, PAIN IN LEFT LEG  | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | LUMBAGO WITH SCIATICA, RIGHT SIDE, OTHER SPECIFIED DORSOPATHIES, LUMBAR REGION, MUSCLE WEAKNESS (GENERALIZED), PARESTHESIA OF SKIN  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | MUSCLE WASTING AND ATROPHY, NEC, RIGHT THIGH, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT KNEE, DISPL BICONDYLAR FX R TIBIA, SUBS FOR CLOS FX W ROUNT HEAL | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | MUSCLE WASTING AND ATROPHY, NEC, UNSP THIGH, STIFFNESS OF LEFT KNEE, NOT ELSEWHERE CLASSIFIED, OTHER ACUTE POSTPROCEDURAL PAIN  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | MUSCLE WEAKNESS (GENERALIZED), AUTISTIC DISORDER  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | MUSCLE WEAKNESS (GENERALIZED), DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, UNSTEADINESS ON FEET  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | MUSCLE WEAKNESS (GENERALIZED), PAIN IN RIGHT SHOULDER, ABNORMAL POSTURE   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | NEURALGIC AMYOTROPHY, STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | NONDISP FX OF 5TH METATARSAL BONE, R FT, 7THD, OTHER ABNORMALITIES OF GAIT AND MOBILITY, ANTERIOR SOFT TISSUE IMPINGEMENT, STIFFNESS OF RIGHT FOOT, NOT ELSEWHERE CLASSIFIED  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | NONDISP FX OF LATERAL MALLEOLUS OF L FIBULA, 7THD   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | NONDISP OSTEOCHON FX UNSP PATELLA, 7THD, CONTUSION OF LEFT KNEE, SUBSEQUENT ENCOUNTER   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OSTEOARTHRITIS OF KNEE, UNSPECIFIED, PAIN IN RIGHT SHOULDER   | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | OTH COND ASSOC W FEMALE GENITAL ORGANS AND MENSTRUAL CYCLE, OTHER MUSCLE SPASM, OTHER SPECIFIED DYSpareunia, DYSURIA  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTH ENTHESOPATHIES OF RIGHT LOWER LIMB, EXCLUDING FOOT  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |

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|                            | OTH EXTRARTIC FX LOW END R RAD, 7THD, STIFFNESS OF RIGHT WRIST, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT WRIST   | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTH FRACTURE OF L LOW LEG, SUBS FOR CLOS FX W ROUNTN HEAL, STIFFNESS OF LEFT ANKLE, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED), UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | OTH FX FOURTH MC BONE, LEFT HAND, SUBS FOR FX W ROUNTN HEAL, STIFFNESS OF LEFT HAND, NOT ELSEWHERE CLASSIFIED, PAIN IN LEFT HAND  | Occupational Therapy |                    | 3                | 3               |  |                          |                        |                      |                 |
|                            | OTH INTARTIC FX LOW END L RAD, SUBS FOR CLOS FX W ROUNTN HEAL   | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTH INTARTIC FX LOW END L RAD, SUBS FOR CLOS FX W ROUNTN HEAL   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | OTH SPECIFIC JOINT DERANGEMENTS OF RIGHT SHOULDER, NEC, MUSCLE WEAKNESS (GENERALIZED), PAIN IN RIGHT SHOULDER   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM, STIFFNESS OF RIGHT KNEE, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT KNEE, OTHER SPECIFIED POSTPROCEDURAL STATES                   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTH TEAR OF MEDIAL MENISCUS, CURRENT INJURY, R KNEE, INIT   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER ABNORMALITIES OF GAIT AND MOBILITY, PAIN IN RIGHT LEG, OTHER JUVENILE OSTEOCHONDROSIS OF HIP AND PELVIS, RIGHT LEG  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER ACUTE POSTPROCEDURAL PAIN, OTHER SPECIFIED POSTPROCEDURAL STATES, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM, OTHER ABNORMALITIES OF GAIT AND MOBILITY               | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER ACUTE POSTPROCEDURAL PAIN, PAIN IN RIGHT SHOULDER   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | OTHER ARTICULAR CARTILAGE DISORDERS, LEFT SHOULDER, OTHER SPECIFIED DISORDERS OF TENDON, LEFT SHOULDER, PAIN IN LEFT SHOULDER, UNSP ROTATR-CUFF TEAR/RUPTR OF LEFT SHOULDER, NOT TRAUMA     | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | OTHER CERVICAL DISC DEGENERATION AT C6-C7 LEVEL, RADICULOPATHY, CERVICAL REGION, OTHER CERVICAL DISC DEGENERATION AT C5-C6 LEVEL  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER CHRONIC PAIN, Other low back pain   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | OTHER DORSALGIA, CERVICALGIA, LOW BACK PAIN   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER FORMS OF SCOLIOSIS, THORACIC REGION, OTH ACQUIRED DEFORMITIES OF MUSCULOSKELETAL SYSTEM   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER LACK OF COORDINATION  | Occupational Therapy | 1                  |                  |                 |  |                          |                        |                      |                 |

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|                            | OTHER SHOULDER LESIONS, LEFT SHOULDER, PAIN IN LEFT SHOULDER   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | OTHER SHOULDER LESIONS, UNSPECIFIED SHOULDER   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | OTHER SPECIFIED CONGENITAL DEFORMITIES OF HIP  | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | Other specified disorders of central nervous system, DELAYED MILESTONE IN CHILDHOOD  | Occupational Therapy | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | OTHER SPECIFIED JOINT DISORDERS, LEFT HIP, STRAIN OF ADDUCTOR MUSC/FASC/TEND LEFT THIGH, INIT, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, PAIN, UNSPECIFIED                                  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER SPECIFIED JOINT DISORDERS, RIGHT HIP, OTHER SPRAIN OF RIGHT HIP, SUBSEQUENT ENCOUNTER, PAIN IN RIGHT HIP, ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE   | Physical Therapy     |                    | 4                | 4               |  |                          |                        |                      |                 |
|                            | OTHER SPECIFIED POSTPROCEDURAL STATES  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER SPECIFIED POSTPROCEDURAL STATES  | Rehab Provider       |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | OTHER SPECIFIED POSTPROCEDURAL STATES, STIFFNESS OF LEFT KNEE, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM, OTHER ACUTE POSTPROCEDURAL PAIN              | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT   | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT, DISPL TRIMALLEOL FX L LOW LEG, SUBS FOR CLOS FX W ROUTN HEAL, STIFFNESS OF LEFT ANKLE, NOT ELSEWHERE CLASSIFIED  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT, OTHER SPECIFIED POSTPROCEDURAL STATES, EFFUSION, LEFT ANKLE, SPRAIN OF DELTOID LIGAMENT OF LEFT ANKLE, SUBS ENCNTR                                     | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT, POSTERIOR TIBIAL TENDINITIS, UNSPECIFIED LEG   | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT, SPRAIN OF DELTOID LIGAMENT OF LEFT ANKLE, SUBS ENCNTR, UNSP FRACTURE OF LEFT TALUS, SUBS FOR FX W ROUTN HEAL, ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT ELBOW   | Occupational Therapy |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT FOOT, STIFFNESS OF LEFT ANKLE, NOT ELSEWHERE CLASSIFIED, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, PLANTAR FASCIAL FIBROMATOSIS  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT HIP   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT HIP, CERVICALGIA  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT HIP, LOW BACK PAIN  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | PAIN IN LEFT HIP, PAIN IN RIGHT HIP, LOW BACK PAIN  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT HIP, STIFFNESS OF LEFT HIP, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED)  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE   | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, LOCALIZED EDEMA   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, STIFFNESS OF LEFT KNEE, NOT ELSEWHERE CLASSIFIED, EFFUSION, LEFT KNEE                         | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, EFFUSION, LEFT KNEE, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM, OTH TEAR OF MEDIAL MENISCUS, CURRENT INJURY, LEFT KNEE, SUBS | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, EFFUSION, LEFT KNEE, PAIN IN LEFT HIP  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, EFFUSION, LEFT KNEE, STIFFNESS OF LEFT KNEE, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, SPRAIN OF ANTERIOR CRUCIATE LIGAMENT OF LEFT KNEE, SUBS, OTH MENISCUS DERANGEMENTS, OTHER MEDIAL MENISCUS, LEFT KNEE                           | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, STIFFNESS OF LEFT KNEE, NOT ELSEWHERE CLASSIFIED, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, STIFFNESS OF LEFT KNEE, NOT ELSEWHERE CLASSIFIED, MUSCLE WASTING AND ATROPHY, NEC, LEFT THIGH, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT KNEE, STRAIN MUSC/TEND POST GRP AT LOW LEG LEVEL, LEFT LEG, INIT   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT LEG, EFFUSION, LEFT ANKLE, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT LEG, LOW BACK PAIN   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT LEG, MUSCLE WEAKNESS (GENERALIZED), OTHER SPECIFIED DISORDERS OF MUSCLE, PAIN, UNSPECIFIED   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER   | Physical Therapy   |                    | 4                | 4               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, DISORDER OF BONE, UNSPECIFIED, IMPINGEMENT SYNDROME OF LEFT SHOULDER   | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE   | Physical Therapy   |                    | 3                | 3               |  |                          |                        |                      |                 |



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|                            | PAIN IN LEFT SHOULDER, MUSCLE WEAKNESS (GENERALIZED), STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, UNSPECIFIED DISLOCATION OF LEFT SHOULDER JOINT, SUBS ENCNTR                | Occupational Therapy |                    |                  | 3               | 3                                      |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, PAIN IN LEFT SHOULDER   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, PAIN IN LEFT WRIST, 2-PART NONDISP FX OF SURG NK OF L HUMER, 7THD, OTHER SPECIFIED POSTPROCEDURAL STATES  | Physical Therapy     |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, PAIN IN RIGHT SHOULDER  | Physical Therapy     | 2                  | 3                | 3               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, PRESENCE OF RIGHT ARTIFICIAL HIP JOINT, PAIN IN RIGHT HIP   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, ABNORMAL POSTURE, PAIN IN LEFT SHOULDER   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT SHOULDER, STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, SUPERIOR GLENOID LABRUM LESION OF LEFT SHOULDER, INIT ENCNTR  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT UPPER ARM, DISP FX OF GREATER TUBEROSITY OF LEFT HUMERUS, SEQUELA   | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT WRIST   | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT WRIST, STIFFNESS OF LEFT WRIST, NOT ELSEWHERE CLASSIFIED, STRESS FRACTURE, LEFT ULNA, SUBS FOR FX W ROUNN HEAL  | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN LEFT WRIST, UNSPECIFIED FRACTURE OF LEFT WRIST AND HAND, SEQUELA   | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT ANKLE AND JOINTS OF RIGHT FOOT   | Physical Therapy     | 2                  |                  |                 |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT ANKLE AND JOINTS OF RIGHT FOOT, MUSCLE WEAKNESS (GENERALIZED), INJ OTH MUSC/TEND AT LOWER LEG LEVEL, RIGHT LEG, SUBS, STIFFNESS OF RIGHT ANKLE, NOT ELSEWHERE CLASSIFIED | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT ANKLE AND JOINTS OF RIGHT FOOT, STIFFNESS OF RIGHT ANKLE, NOT ELSEWHERE CLASSIFIED, EFFUSION, RIGHT ANKLE  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT ELBOW  | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT ELBOW, PAIN IN LEFT ELBOW  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |

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|                            | PAIN IN RIGHT ELBOW, STIFFNESS OF RIGHT WRIST, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT ELBOW, STIFFNESS OF RIGHT WRIST, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED), STIFFNESS OF RIGHT ELBOW, NOT ELSEWHERE CLASSIFIED                       | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT FINGER(S), STIFFNESS OF RIGHT HAND, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM, SCAR CONDITIONS AND FIBROSIS OF SKIN    | Occupational Therapy |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT FOOT, MUSCLE WEAKNESS (GENERALIZED), STIFFNESS OF RIGHT FOOT, NOT ELSEWHERE CLASSIFIED, PLANTAR FASCIAL FIBROMATOSIS   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT FOOT, PAIN IN LEFT FOOT  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT FOOT, PAIN IN RIGHT ANKLE AND JOINTS OF RIGHT FOOT, OTHER SPECIFIED DISORDERS OF MUSCLE, STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED                  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT HIP, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT HIP, MUSCLE WEAKNESS (GENERALIZED), STRAIN OF MUSCLE, FASCIA AND TENDON OF RIGHT HIP, INIT, STRAIN OF MUSCLE, FASCIA AND TENDON OF RIGHT HIP, INIT                 | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT HIP, OTHER SPECIFIED CONGENITAL DEFORMITIES OF HIP, OTHER CHRONIC PAIN   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT HIP, PAIN IN LEFT HIP, MUSCLE WEAKNESS (GENERALIZED), Low back pain, unspecified   | Physical Therapy     |                    | 3                | 3               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT HIP, PAIN IN LEFT HIP, PAIN IN RIGHT ANKLE AND JOINTS OF RIGHT FOOT  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT HIP, STIFFNESS OF RIGHT HIP, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM, UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT KNEE   | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT KNEE, OTH TEAR OF LAT MENS, CURRENT INJURY, RIGHT KNEE, SEQUELA  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT KNEE, OTHER ABNORMALITIES OF GAIT AND MOBILITY, MUSCLE WEAKNESS (GENERALIZED)  | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT KNEE, PATELLAR TENDINITIS, RIGHT KNEE, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | PAIN IN RIGHT KNEE, PRESENCE OF RIGHT ARTIFICIAL KNEE JOINT, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY                                   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT KNEE, SPRAIN OF MEDIAL COLLATERAL LIGAMENT OF RIGHT KNEE, SUBS  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT KNEE, STIFFNESS OF RIGHT KNEE, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED), UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY  | Physical Therapy     |                    | 3                | 3               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT KNEE, UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE, STRAIN OF UNSP MUSC/TEND AT LOWER LEG LEVEL, RIGHT LEG, INIT, STRAIN OF UNSP MUSC/TEND AT LOWER LEG LEVEL, RIGHT LEG, INIT | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT KNEE, WEAKNESS  | Physical Therapy     | 1                  | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT LOWER LEG, Low back pain, unspecified, MUSCLE WEAKNESS (GENERALIZED), UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY  | Physical Therapy     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, ADHESIVE CAPSULITIS OF RIGHT SHOULDER   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, ADHESIVE CAPSULITIS OF RIGHT SHOULDER, STRAIN OF MUSC/TEND THE ROTATOR CUFF OF RIGHT SHOULDER, SUBS   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, EFFUSION, RIGHT SHOULDER  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, OTHER ENTHESOPATHIES, NOT ELSEWHERE CLASSIFIED  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, OTHER SPECIFIED POSTPROCEDURAL STATES, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED)   | Occupational Therapy |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, PAIN IN LEFT SHOULDER, PAIN IN LEFT HIP, PAIN IN RIGHT HIP  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED, ABNORMAL POSTURE, MUSCLE WEAKNESS (GENERALIZED)  | Physical Therapy     |                    | 3                | 3               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED, MUSCLE WASTING AND ATROPHY, NEC, RIGHT SHOULDER, ADHESIVE CAPSULITIS OF LEFT SHOULDER                          | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | PAIN IN RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED, MUSCLE WASTING AND ATROPHY, NEC, RIGHT SHOULDER, ADHESIVE CAPSULITIS OF RIGHT SHOULDER                     | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, SUPERIOR GLENOID LABRUM LESION OF RIGHT SHOULDER, SUBS, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy   |                    | 4                | 4               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT SHOULDER, UNSPECIFIED DISORDER OF SYNOVIUM AND TENDON, RIGHT SHOULDER   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN RIGHT WRIST, RADICULOPATHY, CERVICAL REGION, MUSCLE WEAKNESS (GENERALIZED)  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN THORACIC SPINE, MALIGNANT NEOPLASM OF MYOMETRIUM, LOW BACK PAIN, OTHER SPECIFIED DISORDERS OF BONE DENSITY AND STRUCTURE  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PAIN IN UNSPECIFIED KNEE, PAIN IN LEFT KNEE, PLICA SYNDROME, UNSPECIFIED KNEE, PLICA SYNDROME, LEFT KNEE  | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PARKINSON'S DISEASE   | Physical Therapy   | 2                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | PARKINSON'S DISEASE, MUSCLE WEAKNESS (GENERALIZED)  | Physical Therapy   | 1                  | 3                | 3               |  |                          |                        |                      |                 |
|                            | PELVIC AND PERINEAL PAIN, LOWER ABDOMINAL PAIN, UNSPECIFIED   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PELVIC AND PERINEAL PAIN, RETENTION OF URINE, UNSPECIFIED, OTHER MUSCLE SPASM, Low back pain, unspecified, OTHER CHRONIC PAIN   | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST, LYMPHEDEMA, NOT ELSEWHERE CLASSIFIED  | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | PLANTAR FASCIAL FIBROMATOSIS  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | PLANTAR FASCIAL FIBROMATOSIS, STIFFNESS OF LEFT ANKLE, NOT ELSEWHERE CLASSIFIED, PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT, SPRAIN OF OTHER LIGAMENT OF LEFT ANKLE, SUBSEQUENT ENCOUNTER | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PLANTAR FASCIAL FIBROMATOSIS, STIFFNESS OF LEFT ANKLE, NOT ELSEWHERE CLASSIFIED, SPRAIN OF OTHER LIGAMENT OF LEFT ANKLE, SUBSEQUENT ENCOUNTER, PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | POSTERIOR TIBIAL TENDINITIS, LEFT LEG, PAIN IN LEFT FOOT, RADICULOPATHY, CERVICAL REGION, STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | POSTERIOR TIBIAL TENDINITIS, RIGHT LEG, POSTERIOR TIBIAL TENDINITIS, LEFT LEG   | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | PRESENCE OF LEFT ARTIFICIAL HIP JOINT, UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT HIP, UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PRESENCE OF RIGHT ARTIFICIAL KNEE JOINT, UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE, PAIN IN RIGHT KNEE, STIFFNESS OF RIGHT KNEE, NOT ELSEWHERE CLASSIFIED, OTHER ABNORMALITIES OF GAIT AND MOBILITY, MUSCLE WEAKNESS (GENERALIZED) | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | PRPH TEAR OF MEDIAL MENISCUS, CURRENT INJURY, R KNEE, SUBS, PAIN IN RIGHT KNEE   | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, CERVICAL REGION   | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION   | Physical Therapy   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION, CERVICALGIA  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION, Low back pain, unspecified   | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION, OTH SYMPTOMS AND SIGNS INVOLVING THE DGSTV SYS AND ABDOMEN, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION, OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBAR REGION, ARTHRODESIS STATUS  | Physical Therapy   |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION, OTHER SPECIFIED POSTPROCEDURAL STATES, PAIN IN LEFT KNEE, STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION, SACROCCYGEAL DISORDERS, NOT ELSEWHERE CLASSIFIED, SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, LUMBAR REGION, LOW BACK PAIN  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION, SCIATICA, RIGHT SIDE, UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT HIP   | Physical Therapy   |                    | 3                | 3               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBAR REGION, Stiffness of other specified joint, not elsewhere classified, OTH SYMPTOMS AND SIGNS INVOLVING THE DGSTV SYS AND ABDOMEN   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | RADICULOPATHY, LUMBOSACRAL REGION  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | SACROCCYGEAL DISORDERS, NOT ELSEWHERE CLASSIFIED, LUMBAGO WITH SCIATICA, RIGHT SIDE, THORACIC ROOT DISORDERS, NOT ELSEWHERE CLASSIFIED, PAIN IN THORACIC SPINE   | Chiropractic       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | SACROILIITIS, NOT ELSEWHERE CLASSIFIED, LOW BACK PAIN  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | SCIATICA, RIGHT SIDE, LOW BACK PAIN, OTHER ABNORMALITIES OF GAIT AND MOBILITY, WEAKNESS   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPINAL STENOSIS, CERVICAL REGION, CERVICALGIA, ABNORMAL POSTURE, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM  | Physical Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | SPINAL STENOSIS, CERVICAL REGION, CERVICALGIA, RADICULOPATHY, CERVICAL REGION, ABNORMAL POSTURE   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPINAL STENOSIS, CERVICAL REGION, PAIN, UNSPECIFIED, WEAKNESS, STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, LUMBAR REGION, LOW BACK PAIN, ABNORMAL POSTURE   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, LUMBAR REGION, PAIN IN LEFT HIP, STIFFNESS OF LEFT HIP, NOT ELSEWHERE CLASSIFIED, LOW BACK PAIN                                  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPRAIN OF ANTERIOR CRUCIATE LIGAMENT OF LEFT KNEE, SUBS, COMPLEX TEAR OF MEDIAL MENS, CURRENT INJURY, L KNEE, SUBS, COMPLEX TEAR OF LAT MENS, CURRENT INJURY, LEFT KNEE, SUBS | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPRAIN OF ANTERIOR CRUCIATE LIGAMENT OF RIGHT KNEE, SUBS, CHRONIC INSTABILITY OF KNEE, RIGHT KNEE, PAIN IN RIGHT KNEE   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPRAIN OF LEFT ROTATOR CUFF CAPSULE, INITIAL ENCOUNTER, ADHESIVE CAPSULITIS OF LEFT SHOULDER  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPRAIN OF OTHER LIGAMENT OF RIGHT ANKLE, SUBS ENCNR, PAIN IN RIGHT ANKLE AND JOINTS OF RIGHT FOOT   | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPRAIN OF RIGHT ROTATOR CUFF CAPSULE, INITIAL ENCOUNTER, CRAMP AND SPASM, PARESTHESIA OF SKIN, CERVICALGIA  | Chiropractic       | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | SPRAIN OF TIBIOFIBULAR LIGAMENT OF RIGHT ANKLE, SEQUELA, SPRAIN OF TIBIOFIBULAR LIGAMENT OF LEFT ANKLE, SEQUELA, OTHER ABNORMALITIES OF GAIT AND MOBILITY, PAIN IN LEFT KNEE  | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | SPRAIN OF UNSP PARTS OF LUMBAR SPINE AND PELVIS, SUBS ENCNR, PAIN IN RIGHT HIP, PAIN IN LEFT KNEE, STRAIN OF MUSC/TEND AT LOWER LEG LEVEL, UNSP LEG, SUBS                     | Physical Therapy   |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | STIFFNESS OF LEFT ANKLE, NOT ELSEWHERE CLASSIFIED, SPRAIN OF OTHER LIGAMENT OF LEFT ANKLE, SUBSEQUENT ENCOUNTER, PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT               | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF LEFT FOOT, NOT ELSEWHERE CLASSIFIED  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF LEFT KNEE, NOT ELSEWHERE CLASSIFIED, MUSCLE WASTING AND ATROPHY, NEC, LEFT THIGH, PAIN IN LEFT KNEE, PRESENCE OF LEFT ARTIFICIAL KNEE JOINT                  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF LEFT KNEE, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED), ABNORMAL POSTURE, PAIN IN LEFT SHOULDER  | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED), UNSTEADINESS ON FEET   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, PAIN IN LEFT SHOULDER, ADHESIVE CAPSULITIS OF LEFT SHOULDER, ABNORMAL POSTURE                                       | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, STRAIN UNSP MUSC/FASC/TEND AT SHLDR/UP ARM, LEFT ARM, INIT  | Physical Therapy     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF RIGHT ANKLE, NOT ELSEWHERE CLASSIFIED, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM          | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF RIGHT ANKLE, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT ANKLE AND JOINTS OF RIGHT FOOT, MUSCLE WEAKNESS (GENERALIZED), OTHER ABNORMALITIES OF GAIT AND MOBILITY | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF RIGHT HAND, NOT ELSEWHERE CLASSIFIED, EFFUSION, RIGHT HAND, MUSCLE WEAKNESS (GENERALIZED), SOFT TISSUE DISORDER, UNSPECIFIED                                 | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | STIFFNESS OF RIGHT HIP, NOT ELSEWHERE CLASSIFIED, STIFFNESS OF LEFT HIP, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT SHOULDER, Low back pain, unspecified                     | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF RIGHT KNEE, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT KNEE, UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE, OTHER ABNORMALITIES OF GAIT AND MOBILITY            | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT SHOULDER, BICIPITAL TENDINITIS, RIGHT SHOULDER   | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | STIFFNESS OF RIGHT WRIST, NOT ELSEWHERE CLASSIFIED, NONDISPLACED FRACTURE OF RIGHT ULNA STYLOID PROCESS, SEQUELA, OTH INTARTIC FRACTURE OF LOWER END OF RIGHT RADIUS, SEQUELA, INJURY OF MEDIAN NERVE AT WRS/HND LV OF RIGHT ARM, SEQUELA | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF RIGHT WRIST, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT WRIST, GANGLION, RIGHT WRIST  | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | STIFFNESS OF RIGHT WRIST, NOT ELSEWHERE CLASSIFIED, STIFFNESS OF RIGHT ELBOW, NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT ARM, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM  | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STIFFNESS OF UNSPECIFIED JOINT, NOT ELSEWHERE CLASSIFIED, MUSCLE WEAKNESS (GENERALIZED), SPRAIN OF ANTERIOR CRUCIATE LIGAMENT OF RIGHT KNEE, SUBS, OTHER ABNORMALITIES OF GAIT AND MOBILITY   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STRAIN MSL/FASC/TND POST GRP AT THI LEV, RIGHT THIGH, SUBS  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STRAIN MSL/TND LNG EXTN MSL TOE AT ANK/FT LEV, R FOOT, SUBS, PAIN IN RIGHT ANKLE AND JOINTS OF RIGHT FOOT, PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT, MUSCLE WASTING AND ATROPHY, NEC, RIGHT ANKLE AND FOOT                              | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | STRAIN OF LEFT ACHILLES TENDON, INITIAL ENCOUNTER, STIFFNESS OF LEFT ANKLE, NOT ELSEWHERE CLASSIFIED, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM                        | Physical Therapy     |                    | 2                | 2               |  |                          |                        |                      |                 |
|                            | STRAIN OF LEFT ACHILLES TENDON, SUBSEQUENT ENCOUNTER, PAIN IN LEFT ANKLE AND JOINTS OF LEFT FOOT  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STRAIN OF MSL/FASC/TND POST GRP AT THI LEV, LEFT THIGH, INIT, UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STRAIN OF MSL/FASC/TND POST GRP AT THI LEV, LEFT THIGH, SUBS, PAIN IN LEFT THIGH  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STRAIN OF MUSC/TEND THE ROTATOR CUFF OF LEFT SHOULDER, SUBS, STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED, PAIN IN LEFT SHOULDER, MUSCLE WASTING AND ATROPHY, NEC, LEFT SHOULDER  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STRAIN OF MUSCLE AND TENDON OF FRONT WALL OF THORAX, SUBS, ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE, PAIN IN RIGHT ARM  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |



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|----------------------------|--|----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|                            | STRAIN OF MUSCLE AND TENDON OF FRONT WALL OF THORAX, SUBS, PAIN IN LEFT SHOULDER, STIFFNESS OF LEFT SHOULDER, NOT ELSEWHERE CLASSIFIED   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | STRAIN OF MUSCLE, FASCIA AND TENDON OF LOWER BACK, INIT, OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBAR REGION   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | STRAIN OF RIGHT QUADRICEPS MUSCLE, FASCIA AND TENDON, SUBS, EFFUSION, RIGHT KNEE, STIFFNESS OF RIGHT KNEE, NOT ELSEWHERE CLASSIFIED, MUSCLE WASTING AND ATROPHY, NEC, RIGHT THIGH  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | STRAIN OF UNSP MUSC/TEND AT LOWER LEG LEVEL, LEFT LEG, INIT  | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | STRESS INCONTINENCE (FEMALE) (MALE), OTHER SPECIFIED DISORDERS OF MUSCLE   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | TORTICOLLIS  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | TORTICOLLIS, MUSCLE WEAKNESS (GENERALIZED)   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | TORTICOLLIS, PLAGIOCEPHALY   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | TROCHANTERIC BURSITIS, RIGHT HIP   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | TROCHANTERIC BURSITIS, RIGHT HIP, Low back pain, unspecified   | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | ULNAR COLLATERAL LIGAMENT SPRAIN OF RIGHT ELBOW, SUBS ENCNTR   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT HIP, PRESENCE OF LEFT ARTIFICIAL HIP JOINT, UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY, MUSCLE WEAKNESS (GENERALIZED)  | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE, PAIN IN LEFT KNEE  | Physical Therapy     | 1                  |                  |                 |  |                          |                        |                      |                 |
|                            | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT HIP, UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT HIP, PAIN IN LEFT HIP, PAIN IN RIGHT HIP   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE, UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE, Ehlers-Danlos syndrome, unspecified   | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | UNSP FX SHAFT OF HUMER, RIGHT ARM, SUBS FOR FX W ROUNTN HEAL, PAIN IN RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER, NOT ELSEWHERE CLASSIFIED  | Physical Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | UNSP FX SHAFT OF RIGHT ULNA, SUBS FOR CLOS FX W ROUNTN HEAL, STIFFNESS OF RIGHT WRIST, NOT ELSEWHERE CLASSIFIED, STIFFNESS OF RIGHT ELBOW, NOT ELSEWHERE CLASSIFIED, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |
|                            | UNSP FX THE LOWER END R RAD, SUBS FOR CLOS FX W ROUNTN HEAL  | Occupational Therapy |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
|  | UNSP INJ MSL/FASC/TND POST GRP AT THI LEV, RIGHT THIGH, INIT   | Physical Therapy    |                    | 2                | 2               |  |                          |                        |                      |                 |
|  | UNSP INJURY OF MUSCLE, FASCIA AND TENDON OF RIGHT HIP, SUBS, PAIN IN RIGHT HIP   | Physical Therapy    |                    | 1                | 1               |  |                          |                        |                      |                 |
|  | UNSP PHYSL FX UPPER END OF R TIBIA, SUBS FOR FX W ROUN HEAL, OTHER SPECIFIED POSTPROCEDURAL STATES, PAIN IN RIGHT KNEE   | Physical Therapy    |                    | 1                | 1               |  |                          |                        |                      |                 |
|  | UNSP ROTATR-CUFF TEAR/RUPTR OF LEFT SHOULDER, NOT TRAUMA   | Physical Therapy    | 1                  |                  |                 |  |                          |                        |                      |                 |
|  | UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM, OTHER ABNORMALITIES OF GAIT AND MOBILITY, PRESENCE OF LEFT ARTIFICIAL HIP JOINT | Physical Therapy    |                    | 1                | 1               |  |                          |                        |                      |                 |
|  | UNSPECIFIED INJURY OF RIGHT FOOT, INITIAL ENCOUNTER  | Physical Therapy    |                    | 1                | 1               |  |                          |                        |                      |                 |
|  | UNSPECIFIED SUBLUXATION OF RIGHT PATELLA, SUBS ENCNTR, CHONDROMALACIA PATELLAE, RIGHT KNEE, PAIN IN RIGHT KNEE, OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM                  | Physical Therapy    |                    | 1                | 1               |  |                          |                        |                      |                 |
|  | WEAKNESS, PAIN IN RIGHT THIGH  | Physical Therapy    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| 3-D RADIOTHERAPY PLAN  | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST   | Radiation Oncology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | ARTHRODESIS STATUS   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | Atypical small acinar proliferation of prostate  | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | BENIGN NEOPLASM UNSPECIFIED SITE   | PLASTIC SURGERY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | Elevated prostate specific antigen [PSA]   | UROLOGY             | 2                  |                  |                 |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | ENLARGED PROSTATE W/O LOWER URINARY TRACT SX   | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |

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| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | INCONCLUSIVE MAMMOGRAM   | RADIOLOGY - DIAGNOSTIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | MALIGNANT NEOPLASM OF PROSTATE   | RADIATION ONCOLOGY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | MALIGNANT NEOPLASM OF PROSTATE   | UROLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | NONTOXIC SINGLE THYROID NODULE   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | ORTHOPEDIC SURGERY     | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | PAIN IN RIGHT HIP  | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | PALPITATIONS, DIZZINESS AND GIDDINESS  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | SHORTNESS OF BREATH  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| 3D Rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | SOLITARY PULMONARY NODULE, CYST OF PANCREAS, NEOPLASM OF UNS BEHAVIOR DIGESTIVE SYSTEM | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |

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| 62321 (Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances), 62321 (Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances), 62321 (Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances), 62321 (Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances) | CERVICALGIA  | Anesthesiology            |                    |                  |                 |  |                          |                        | 1                    |                 |
| 70450 (CT HEAD or Brain; without contrast material), 70450 (CT HEAD or Brain; without contrast material),  | CEREBRAL INFARCTION UNSPECIFIED  | Pediatrics                |                    |                  |                 |  |                          | 1                      |                      |                 |
| 70491 (CT NECK Soft Tissue; with contrast material(s)), 70491 (CT NECK Soft Tissue; with contrast material(s)),  | Postnasal drip   | Cardiology                |                    |                  |                 |  |                          |                        | 1                    |                 |
| 70544 (MRA Head; without contrast material(s)), 70544 (MRA Head; without contrast material(s)), 70551 (MRI BRAIN (head); without contrast material), 70551 (MRI BRAIN (head); without contrast material),  | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE, TENSION-TYPE HEADACHE UNS NOT INTRACTABLE | Hematology                |                    |                  |                 |  |                          | 1                      |                      |                 |
| 70553 (MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences), 70553 (MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences),  | LOC-REL IDIO EPI W/SZ LOC ONSET NOT INTRCT NO SE                                     | Rheumatology              |                    |                  |                 |  |                          | 1                      |                      |                 |
| 71250 (CT CHEST (thorax); without contrast material), 71250 (CT CHEST (thorax); without contrast material),  | MALIGNANT NEOPLASM LONG BONES LEFT LOWER LIMB  | Pediatrics                |                    |                  |                 |  |                          | 1                      |                      |                 |
| 72125 (CT Cervical Spine; without contrast material), 72125 (CT Cervical Spine; without contrast material),  | PARESTHESIA OF SKIN  | Surgery, General          |                    |                  |                 |  |                          |                        | 1                    |                 |
| 72148 (MRI Lumbar Spine, (spinal canal and contents); without contrast material), 72148 (MRI Lumbar Spine, (spinal canal and contents); without contrast material),  | RADICULOPATHY LUMBAR REGION  | Pain Management           |                    |                  |                 |  |                          |                        | 1                    |                 |
| 74177 (Computed tomography; abdomen and pelvis; with contrast material(s)), 74177 (Computed tomography; abdomen and pelvis; with contrast material(s)),  | GENERALIZED ABDOMINAL PAIN   | Cardiac Electrophysiology |                    |                  |                 |  |                          | 1                      |                      |                 |
| 74177 (Computed tomography; abdomen and pelvis; with contrast material(s)), 74177 (Computed tomography; abdomen and pelvis; with contrast material(s)),  | HEMATURIA UNSPECIFIED  | Urology                   |                    |                  |                 |  |                          |                        | 1                    |                 |
| 78452 (Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest   | PRECORDIAL PAIN  | Cardiology                |                    |                  |                 |  |                          | 1                      |                      |                 |
| 93458 (Native coronary artery catheterization with left heart catheterization  | PRECORDIAL PAIN  | Cardiology                |                    |                  |                 |  |                          | 1                      |                      |                 |
| ABATACEPT INJECTION  | RHEU ARTHRITIS W RHEU FACTOR MULT SITE W/O ORG/SYS INVOLV                            | Internal Medicine         | 2                  |                  |                 |  |                          |                        |                      |                 |
| ABATACEPT INJECTION  | RHEU ARTHRITIS W RHEU FACTOR MULT SITE W/O ORG/SYS INVOLV                            | Rheumatology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| ABATACEPT INJECTION  | RHEUMATOID ARTHRITIS W/O RHEUMATOID FACTOR, MULTIPLE SITES                           | Rheumatology              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ABIRATERONE ACETATE 500 MG TABLET  |  | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| ABLATE ARRHYTHMIA ADD ON                | LONGSTANDING PERSISTENT ATRIAL FIBRILLATION                  | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| ABLATE ARRHYTHMIA ADD ON                | OTHER PERSISTENT ATRIAL FIBRILLATION                         | Cardiac Electrophysiology | 3                  |                  |                 |  |                          |                        |                      |                 |
| ABLATE ARRHYTHMIA ADD ON                | PAROXYSMAL ATRIAL FIBRILLATION                               | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| ABLATE ARRHYTHMIA ADD ON                | PAROXYSMAL ATRIAL FIBRILLATION                               | Cardiovascular Disease    | 1                  |                  |                 |  |                          |                        |                      |                 |
| ABLATE ARRHYTHMIA ADD ON                | SUPRAVENTRICULAR TACHYCARDIA                                 | Pediatrics                | 1                  |                  |                 |  |                          |                        |                      |                 |
| ABLATE ARRHYTHMIA ADD ON                | UNSPECIFIED ATRIAL FLUTTER                                   | Cardiovascular Disease    | 2                  |                  |                 |  |                          |                        |                      |                 |
| ABLATE ATRIA X10SV ENDO                 | PAROXYSMAL ATRIAL FIBRILLATION                               | Surgery, Cardiovascular   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ABOBOTULINUMTOXINA                      | INTRAVENTRICULAR HEMORRHAGE, GRADE 3, OF NEWBORN             | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ABSORICA LD 24 MG CAPSULE               |  | Other                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| ABSORICA LD 32 MG CAPSULE               |  | Other                     | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| ACCOLATE 20 MG TABLET                   |  | Family Medicine           |                    | 1                | 1               |  |                          |                        |                      |                 |
| ACCU-CHEK AVIVA PLUS STRIP              |  | Other                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | DISPROPORTION OF RECONSTRUCTED BREAST                        | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | ENCOUNTER FOR ADJUSTMENT OR REMOVAL OF LEFT BREAST IMPLANT   | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | GENETIC SUSCEPTIBILITY TO MALIGNANT NEOPLASM OF BREAST       | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | MALIG NEOPLASM OF UPPER-OUTER QUADRANT OF LEFT FEMALE BREAST | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | MALIG NEOPLM OF UPPER-INNER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | MALIG NEOPLM OF UPPER-OUTER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT FEMALE BREAST     | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, Plastic          | 2                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, Plastic          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ACELLULAR DERM MATRIX IMPLT             | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACETAMINOPHEN-CODEINE 300MG-30MG TABLET |  | Other                     | 3                  |                  |                 |  |                          |                        |                      |                 |
| ACETAMINOPHEN-CODEINE 300MG-30MG TABLET |  | PCP/Pediatrician          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACETAMINOPHEN-CODEINE 300MG-30MG TABLET |  | Surgery, Orthopedic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACTEMRA 162 MG/0.9 SYRINGE              |  | Other                     | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| ACTEMRA 162 MG/0.9 SYRINGE              |  | Rheumatology              | 2                  |                  |                 |  |                          |                        |                      |                 |
| ACTEMRA ACTPEN 162 MG/0.9 PEN INJCTR    |  | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description              | Diagnosis Code Description   | Provider Specialty                     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| ACTHAR GEL                              | Rheumatoid arthritis with rheumatoid factor of multiple sites without organ or systems involvement | Home Health                            |                    |                  |                 |  |                          |                        | 1                    |                 |
| Acute Inpatient Mental Health Treatment | Bipolar disord, crnt episode manic severe w psych features   | Behavioral Health                      |                    |                  |                 |  |                          |                        | 1                    |                 |
| Acute Inpatient Mental Health Treatment | Unsp psychosis not due to a substance or known physiol cond  | Behavioral Health                      |                    |                  |                 |  |                          |                        | 1                    |                 |
| ACYCLOVIR 5 % CREAM (G)                 |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| ACYCLOVIR 5 % OINT. (G)                 |  | PCP/Pediatrician                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| ACZONE 7.5 % GEL W/PUMP                 |  | Dermatology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| ACZONE 7.5 % GEL W/PUMP                 |  | Other                                  | 4                  | 3                | 3               |  |                          |                        |                      |                 |
| ADAPALENE 0.3 % GEL (GM)                |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Adaptive Behavior Treatment Procedures  | Autistic disorder  | Behavioral Health                      | 6                  |                  |                 |  |                          |                        |                      |                 |
| ADDERALL 10 MG TABLET                   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ADDERALL 15 MG TABLET                   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ADDERALL XR                             | Attention-deficit hyperactivity disorder, combined type  | Psychiatry                             |                    |                  |                 |  |                          |                        | 1                    |                 |
| ADDERALL XR 20 MG CAP.SR 24H            |  | Other                                  |                    | 3                | 3               |  |                          |                        |                      |                 |
| ADDERALL XR 30 MG CAP.SR 24H            |  | Other                                  |                    | 5                | 5               |  |                          |                        |                      |                 |
| ADDYI 100 MG TABLET                     |  | Other                                  | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| ADEMPAS 1 MG TABLET                     |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ADHANSIA XR 25 MG CPBP 20-80            |  | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ADHESIVE REMOVER, WIPES                 | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| ADHESIVE REMOVER, WIPES                 | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| ADMELOG SOLOSTAR 100/ML INSULN PEN      |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| ADVAIR                                  | ASTHMA   | Internal Medicine                      |                    |                  |                 |  |                          |                        | 1                    |                 |
| ADVAIR DISKUS 100-50 MCG BLST W/DEV     |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| ADVAIR DISKUS 250-50 MCG BLST W/DEV     |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| ADVAIR DISKUS 250-50 MCG BLST W/DEV     |  | PCP/Pediatrician                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| ADVAIR DISKUS 500-50 MCG BLST W/DEV     |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| ADVAIR HFA 115-21MCG HFA AER AD         |  | Other                                  |                    | 4                | 4               |  |                          |                        |                      |                 |
| ADVAIR HFA 115-21MCG HFA AER AD         |  | Pulmonology                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| ADVAIR HFA 230-21MCG HFA AER AD         |  | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ADVAIR HFA 230-21MCG HFA AER AD         |  | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ADVAIR HFA 45-21 MCG HFA AER AD         |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ADZENYS XR-ODT 12.5 MG TAB RAP BP       |  | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ADZENYS XR-ODT 6.3 MG TAB RAP BP        |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| ADZENYS XR-ODT 9.4 MG TAB RAP BP        |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| AED GARMENT W ELEC ANALYSIS             | DILATED CARDIOMYOPATHY   | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| AED GARMENT W ELEC ANALYSIS             | DILATED CARDIOMYOPATHY   | Family Medicine                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| AED GARMENT W ELEC ANALYSIS             | DILATED CARDIOMYOPATHY   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| AED GARMENT W ELEC ANALYSIS             | OLD MYOCARDIAL INFARCTION  | Cardiovascular Disease                 | 3                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| AED GARMENT W ELEC ANALYSIS                        | ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSP SITE      | Cardiology, Interventional | 1                  |                  |                 |  |                          |                        |                      |                 |
| AED GARMENT W ELEC ANALYSIS                        | ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSP SITE      | Cardiovascular Disease     | 2                  |                  |                 |  |                          |                        |                      |                 |
| AFAMELANOTIDE IMPLANT, 1 MG                        | HEREDITARY ERYTHROPOIETIC PORPHYRIA                          | Dermatology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | EXDTVE AGE-REL MCLR DEGN, LEFT EYE, WITH ACTV CHRDL NEOVAS   | Ophthalmology              | 2                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | EXDTVE AGE-REL MCLR DEGN, RIGHT EYE, WITH ACTV CHRDL NEOVAS  | Ophthalmology              | 6                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | EXUDATIVE AGE-REL MCLR DEGN, BI, WITH ACTV CHRDL NEOVAS      | Ophthalmology              | 2                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | EXUDATIVE AGE-REL MCLR DEGN, BILATERAL, STAGE UNSPECIFIED    | Ophthalmology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TRIB RTNL VEIN OCCLUSION, LEFT EYE, WITH MACULAR EDEMA       | Ophthalmology              | 4                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 1 DIAB WITH PROLIF DIAB RTNOP WITH MACULAR EDEMA, BI    | Ophthalmology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 2 DIAB WITH MODERATE NONP RTNOP WITH MACULAR EDEMA, BI  | Ophthalmology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITH MACULAR EDEMA, BI    | Ophthalmology              | 5                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITH MACULAR EDEMA, L EYE | Ophthalmology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITH MACULAR EDEMA, R EYE | Ophthalmology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITHOUT MCLR EDEMA, R EYE | Ophthalmology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 2 DIAB WITH SEVERE NONP RTNOP WITH MACULAR EDEMA, BI    | Ophthalmology              | 2                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 2 DIAB WITH SEVERE NONP RTNOP WITH MACULAR EDEMA, R EYE | Ophthalmology              | 2                  |                  |                 |  |                          |                        |                      |                 |
| AFLIBERCEPT INJECTION                              | TYPE 2 DIABETES W UNSP DIABETIC RETINOPATHY W MACULAR EDEMA  | Ophthalmology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| AIMOVIG AUTOINJECTOR 140 MG/ML AUTO INJCT          |  | Neurology                  | 8                  |                  |                 |  |                          |                        |                      |                 |
| AIMOVIG AUTOINJECTOR 140 MG/ML AUTO INJCT          |  | Other                      | 26                 | 4                | 4               |  |                          |                        |                      |                 |
| AIMOVIG AUTOINJECTOR 70 MG/ML AUTO INJCT           |  | Neurology                  | 9                  | 2                | 2               |  |                          |                        |                      |                 |
| AIMOVIG AUTOINJECTOR 70 MG/ML AUTO INJCT           |  | Other                      | 8                  | 6                | 6               |  |                          |                        |                      |                 |
| AJOVY AUTOINJECTOR 225 MG/1.5 AUTO INJCT           |  | Neurology                  | 6                  |                  |                 |  |                          |                        |                      |                 |
| AJOVY AUTOINJECTOR 225 MG/1.5 AUTO INJCT           |  | Other                      | 11                 |                  |                 |  |                          |                        |                      |                 |
| AJOVY SYRINGE 225 MG/1.5 SYRINGE                   |  | Other                      | 7                  | 4                | 3               | 1                                      |                          |                        |                      |                 |
| AJOVY SYRINGE 225 MG/1.5 SYRINGE                   |  | PCP/Pediatrician           | 2                  |                  |                 |  |                          |                        |                      |                 |
| AKLIEF 0.005 % CREAM (G)                           |  | Dermatology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| AKLIEF 0.005 % CREAM (G)                           |  | Other                      | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| ALBUTEROL SULFATE HFA 90 MCG HFA AER AD            |  | Other                      | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| ALBUTEROL SULFATE HFA 90 MCG HFA AER AD            |  | PCP/Pediatrician           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Alcohol and/or drug services; intensive outpatient | Alcohol dependence, uncomplicated                            | Behavioral Health          | 3                  |                  |                 |  |                          |                        |                      |                 |
| Alcohol and/or drug services; intensive outpatient | Cannabis dependence, uncomplicated                           | Behavioral Health          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Alcohol and/or drug services; intensive outpatient | Cocaine dependence, uncomplicated                            | Behavioral Health          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Alcohol and/or drug services; intensive outpatient | Opioid dependence, uncomplicated                             | Behavioral Health          | 2                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| ALCOHOL WIPES PER BOX                                      | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK                   | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| ALCOHOL WIPES PER BOX                                      | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                   | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| ALECENSA 150 MG CAPSULE                                    |   | Oncology/Radiation                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| ALLERGEN SPECIFIC IGG                                      | ANAPHYLACTIC REACTION DUE TO PEANUTS, SUBSEQUENT ENCOUNTER  | Pediatrics                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| ALLG SPEC IGE CRUDE XTRC EA                                | ANAPHYLACTIC REACTION DUE TO PEANUTS, SUBSEQUENT ENCOUNTER  | Pediatrics                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| ALOGLIPTIN 12.5 MG TABLET                                  |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ALOGLIPTIN 25 MG TABLET                                    |   | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ALOGLIPTIN 25 MG TABLET                                    |   | PCP/Pediatrician                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| ALTRENO 0.05 % LOTION                                      |   | Other                                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| ALVESCO 80 MCG HFA AER AD                                  |   | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| AMIKACIN SULFATE 500 MG/2ML VIAL                           |   | Pediatric Pulmonology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| AMIKACIN SULFATE INJECTION                                 | BRONCHIECTASIS WITH (ACUTE) EXACERBATION                    | Pulmonary Disease                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| AMNESTEEM 40 MG CAPSULE                                    |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| AMZEEQ 4 % FOAM  |   | Dermatology                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| AMZEEQ 4 % FOAM  |   | Other                                  | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| ANAL PRESSURE RECORD                                       | FULL INCONTINENCE OF FECES                                  | Gastroenterology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| ANDRODERM 4 MG/24 HR PATCH TD24                            |   | General Surgery                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ANDRODERM 4 MG/24 HR PATCH TD24                            |   | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ANES UPR GI NDSC PX ERCP                                   | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST | Gastroenterology                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ANESTH SURG LOWER ABDOMEN                                  | ABNORMAL FINDINGS ON DX IMAGING OF OTH BODY STRUCTURES      | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ANESTH SURG LOWER ABDOMEN                                  | MISSED ABORTION   | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ANESTH SURG LOWER ABDOMEN                                  | PELVIC AND PERINEAL PAIN                                    | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ANL SP INF PMP W/MDREPRG&FIL                               | AMYOTROPHIC LATERAL SCLEROSIS                               | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Anterior tibial tubercleplasty (eg, Maquet type procedure) | OTHER INSTABILITY LEFT KNEE                                 | SURGERY-ORTHOPEDIC                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| AORTIC DYSFUNCTION/DILATION                                | PECTUS EXCAVATUM  | Pediatrics                             |                    | 2                | 2               |  |                          |                        |                      |                 |
| AORTIC DYSFUNCTION/DILATION                                | THORACIC AORTIC ANEURYSM, WITHOUT RUPTURE                   | Clinical Genetics                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| APC GENE DUP/DELET VARIANTS                                | PERSONAL HISTORY OF COLONIC POLYPS                          | Gastroenterology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| APC GENE DUP/DELET VARIANTS                                | PERSONAL HISTORY OF COLONIC POLYPS                          | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| APC GENE DUP/DELET VARIANTS                                | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY      | Oncology                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| APC GENE FULL SEQUENCE                                     | FAMILY HISTORY OF CARRIER OF GENETIC DISEASE                | Hematology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| APC GENE FULL SEQUENCE                                     | FAMILY HISTORY OF OTHER SPECIFIED CONDITIONS                | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| APC GENE FULL SEQUENCE                                     | PERSONAL HISTORY OF COLONIC POLYPS                          | Gastroenterology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| APC GENE FULL SEQUENCE                                     | PERSONAL HISTORY OF COLONIC POLYPS                          | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| APC GENE FULL SEQUENCE                                     | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY      | Oncology                               |                    | 1                | 1               |  |                          |                        |                      |                 |



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|-------------------------------------|--|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| APIDRA SOLOSTAR 100/ML INSULN PEN   |  | Other                        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| APLENZIN 522MG TAB ER 24H           |  | Other                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| APRISO 0.375G CAP ER 24H            |  | Other                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| APTIOM 400 MG TABLET                |  | Pediatrics                   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| APTIOM 800 MG TABLET                |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARANESP 100 MCG/ML VIAL             |  | Nephrology                   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ARAZLO 0.045 % LOTION               |  | Other                        | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| ARIKAYCE                            | Mycobacterium avium complex                                  | Infectious Disease           |                    |                  |                 |  |                          | 1                      |                      |                 |
| ARIKAYCE 590 MG/8.4 VIAL-NEB        |  | Infectious Disease           |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARIKAYCE 590 MG/8.4 VIAL-NEB        |  | Other                        |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| ARIKAYCE 590 MG/8.4 VIAL-NEB        |  | Pediatric Pulmonology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARIPIPRAZOLE 5 MG TABLET            |  | Other                        | 3                  |                  |                 |  |                          |                        |                      |                 |
| ARMODAFINIL 150 MG TABLET           |  | Other                        | 2                  | 4                | 4               |  |                          |                        |                      |                 |
| ARMODAFINIL 200 MG TABLET           |  | Other                        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| ARMODAFINIL 250 MG TABLET           |  | Other                        | 4                  | 5                | 5               |  |                          |                        |                      |                 |
| ARMOUR THYROID 30 MG TABLET         |  | Endocrinology And Metabolism | 2                  |                  |                 |  |                          |                        |                      |                 |
| ARMOUR THYROID 30 MG TABLET         |  | Other                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARMOUR THYROID 60 MG TABLET         |  | Other                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARNUIITY ELLIPTA 100 MCG BLST W/DEV |  | Other                        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ART BYP AORTOBIFEMORAL              | OTHER ARTERIAL EMBOLISM AND THROMBOSIS OF ABDOMINAL AORTA    | Surgery, Vascular            | 1                  |                  |                 |  |                          |                        |                      |                 |
| ART BYP GRFT AORTOBI-ILIAC          | ABDOMINAL AORTIC ANEURYSM, WITHOUT RUPTURE                   | Surgery, Vascular            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ART BYP GRFT FEM-POPLITEAL          | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED                     | Surgery, Vascular            |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD CERVICAL EA        | DISEASE OF SPINAL CORD, UNSPECIFIED                          | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD CERVICAL EA        | RADICULOPATHY, CERVICAL REGION                               | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD CERVICAL EA        | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Neurological        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD CERVICAL EA        | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD MIN DSC CRV        | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD MIN DSC LUM        | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED     | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD MIN DSC LUM        | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Orthopedic          |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD MIN DSC LUM        | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBD MIN DSC LUM        | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBDY CERVICAL          | CERVICAL DISC DISORDER W RADICULOPATHY, UNSP CERVICAL REGION | Surgery, Orthopedic          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBDY CERVICAL          | DISEASE OF SPINAL CORD, UNSPECIFIED                          | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBDY CERVICAL          | RADICULOPATHY, CERVICAL REGION                               | Surgery, Orthopedic          | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| ARTHRD ANT NTRBDY CERVICAL   | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Neurological | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD ANT NTRBDY CERVICAL   | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Orthopedic   | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC EA ADDL  | ARTHRODESIS STATUS   | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC EA ADDL  | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION        | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC EA ADDL  | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC EA ADDL  | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC LUMBAR   | OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBAR REGION        | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC LUMBAR   | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION        | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC LUMBAR   | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Neurological |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC LUMBAR   | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC LUMBAR   | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD CMBN 1NTRSPC LUMBAR   | SPONDYLOLISTHESIS, LUMBAR REGION                             | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC CRV    | RADICULOPATHY, CERVICAL REGION                               | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC CRV    | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC EA ADD | CERVICALGIA  | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC EA ADD | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC EA ADD | OTHER SECONDARY SCOLIOSIS, LUMBAR REGION                     | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC EA ADD | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED     | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC EA ADD | RADICULOPATHY, CERVICAL REGION                               | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC EA ADD | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC EA ADD | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC EA ADD | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC LUMBAR | OTHER SECONDARY SCOLIOSIS, LUMBAR REGION                     | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC LUMBAR | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| ARTHRD PST TQ 1NTRSPC LUMBAR  | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION    | Surgery, Neurological | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC LUMBAR  | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION    | Surgery, Orthopedic   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC LUMBAR  | SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUD        | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC THRC  | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION   | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC THRC  | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED       | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| ARTHRD PST TQ 1NTRSPC THRC  | RADICULOPATHY, CERVICAL REGION                                 | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRODESIS SACROILIAC JOINT  | Sacrococcygeal disorders, not elsewhere classified             | Other                 |                    |                  |                 |  |                          |                        | 1                    |                 |
| ARTHRODESIS SACROILIAC JOINT  | SACROCCOCCYGEAL DISORDERS, NOT ELSEWHERE CLASSIFIED            | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| ARTHRODESIS SACROILIAC JOINT  | SACROILIITIS, NOT ELSEWHERE CLASSIFIED                         | Pain Management       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | IDIOPATHIC ASEPTIC NECROSIS OF LEFT FEMUR                      | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | IDIOPATHIC ASEPTIC NECROSIS OF RIGHT FEMUR                     | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | PAIN IN LEFT HIP, BILATERAL PRIMARY OSTEOARTHRITIS OF HIP      | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | PAIN IN RIGHT HIP  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | PAIN IN RIGHT HIP, UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT HIP | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT HIP                     | ORTHOPEDIC SURGERY    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT HIP                     | SURGERY- ORTHOPEDIC   | 14                 | 6                | 6               |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT HIP                    | ORTHOPEDIC SURGERY    | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT HIP                    | SURGERY- ORTHOPEDIC   | 16                 | 5                | 5               |  |                          |                        |                      |                 |
| Arthroplasty, glenohumeral joint; hemiarthroplasty  | PRIMARY OSTEOARTHRITIS LEFT SHOULDER                           | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, glenohumeral joint; hemiarthroplasty  | PRIMARY OSTEOARTHRITIS RIGHT SHOULDER                          | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (eg, total shoulder))                      | PAIN IN LEFT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (eg, total shoulder))                      | SPONTANEOUS RUPTURE OF OTHER TENDONS RT UP ARM   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE   | SURGERY- ORTHOPEDIC | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | PAIN IN LEFT KNEE, UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | TRAUMATIC ARTHROPATHY LEFT KNEE  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | ORTHOPEDIC SURGERY  | 4                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | SURGERY- ORTHOPEDIC | 17                 | 1                | 1               |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE   | ORTHOPEDIC SURGERY  | 4                  | 3                | 3               |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE   | SURGERY- ORTHOPEDIC | 15                 | 1                | 1               |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial OR lateral compartment  | PAIN IN RIGHT KNEE, UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroplasty, knee, condyle and plateau; medial OR lateral compartment  | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE   | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction   | ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION, EFFUSION LEFT KNEE, OTHER INSTABILITY LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction   | OTH TEAR LAT MENISC CURRRNT INJ RT KNEE INIT ENC   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | OTHER SPONTANEOUS DISRUPTION OF ACL OF LEFT KNEE, BUCKET-HANDLE TEAR UNS MENISC CURR LT KNEE SBSQT, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | OTHER SPONTANEOUS DISRUPTION OF ACL OF LEFT KNEE, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE SBSQT ENC | SURGERY- ORTHOPEDIC   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | PAIN IN LEFT KNEE, OTHER INSTABILITY LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | PAIN IN LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC   | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, DERANG OTH MED MENISCUS D/T OLD TEAR/INJ LT KNEE  | ORTHOPEDIC SURGERY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQT ENC   | PEDIATRIC ORTHOPEDIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQT ENC   | SURGERY- ORTHOPEDIC   | 3                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQT ENC, COMPLEX TEAR MED MENISCUS CURR LT KNEE SBSQT ENC, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE SUBSQT  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQT ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC, SPRAIN LAT COLLATERAL LIGAMENT RT KNEE INITIAL   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE SUBSQT ENC   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction | UNS FRACTURE SHAFT LT TIBIA INIT ENC CLOS FX, UNS TEAR UNS MENISCUS CURR INJ LT KNEE INIT ENC   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction  | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction  | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQ ENC      | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided treatment of tibial fracture, proximal (plateau); unicondylar, with or without internal or external fixation (includes arthroscopy) | DISPLACED FX RT TIBIAL SPINE INIT ENC CLOS FX  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided treatment of tibial fracture, proximal (plateau); unicondylar, with or without internal or external fixation (includes arthroscopy) | UNS FRACTURE SHAFT LT TIBIA INIT ENC CLOS FX, UNS TEAR UNS MENISCUS CURR INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopically aided treatment of tibial fracture, proximal (plateau); unicondylar, with or without internal or external fixation (includes arthroscopy) | UNS FX UPPER LT TIBIA SUBSQ CLOS FX RTN HEAL, UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE      | SURGERY- ORTHOPEDIC |                    |                  | 1               |  | 1                        |                        |                      |                 |
| ARTHROSCOPY OF JOINT   | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | ORTHOPEDIC SURGERY  |                    |                  | 2               | 2                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with acetabuloplasty (ie, treatment of pincer lesion)  | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | ORTHOPEDIC SURGERY  |                    |                  | 2               | 2                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with acetabuloplasty (ie, treatment of pincer lesion)  | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP  | SURGERY- ORTHOPEDIC |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with debridement/shaving of articular cartilage (chondroplasty), abrasion arthroplasty, and/or resection of labrum             | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | ORTHOPEDIC SURGERY  |                    |                  | 2               | 2                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)  | OSTEOPHYTE RIGHT HIP, PAIN IN RIGHT HIP, LOOSE BODY IN RIGHT HIP                               | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)  | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | ORTHOPEDIC SURGERY  |                    |                  | 2               | 2                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)  | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP  | SURGERY- ORTHOPEDIC |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)  | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP, OTHER SPRAIN OF RIGHT HIP INITIAL ENCOUNTER         | ORTHOPEDIC SURGERY  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)  | OTHER SPECIFIED JOINT DISORDERS UNSPECIFIED HIP, OTHER SPRAIN OF LEFT HIP SUBSEQUENT ENCOUNTER | SURGERY- ORTHOPEDIC |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with labral repair   | OSTEOPHYTE RIGHT HIP, PAIN IN RIGHT HIP, LOOSE BODY IN RIGHT HIP                               | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with labral repair   | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | ORTHOPEDIC SURGERY  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with labral repair   | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | SURGERY- ORTHOPEDIC |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with labral repair   | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP  | SURGERY- ORTHOPEDIC |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with labral repair   | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP, OTHER SPRAIN OF RIGHT HIP INITIAL ENCOUNTER         | ORTHOPEDIC SURGERY  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with labral repair   | OTHER SPECIFIED JOINT DISORDERS UNSPECIFIED HIP, OTHER SPRAIN OF LEFT HIP SUBSEQUENT ENCOUNTER | SURGERY- ORTHOPEDIC |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, hip, surgical; with labral repair   | OTHER SPRAIN OF RIGHT HIP SEQUELA  | SURGERY- NEUROLOGY  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, hip, surgical; with removal of loose body or foreign body  | OSTEOPHYTE RIGHT HIP, PAIN IN RIGHT HIP, LOOSE BODY IN RIGHT HIP  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)   | COMPLEX TEAR MED MENISCUS CURR RT KNEE INIT ENC   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)   | LOOSE BODY IN KNEE LEFT KNEE, UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC                     | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)   | OSTEOCHONDritis DISSECANS RIGHT KNEE  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)   | OTH MENISCUS DERANG POST HORN MED MENISC LT KNEE  | PREVENTIVE MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)   | PAIN IN RIGHT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)   | PATELLAR TENDINITIS LEFT KNEE   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)   | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC, SPRAIN LAT COLLATERAL LIGAMENT RT KNEE INITIAL | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)   | UNSPECIFIED DISLOCATION RT KNEE INITIAL ENCNR, SPRAIN MED COLLATERAL LIGAMENT RT KNEE INITIAL   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | COMPLEX TEAR MED MENISCUS CURR LT KNEE SBSQT ENC  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | LOOSE BODY IN KNEE LEFT KNEE, UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC                     | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | OSTEOCHONDritis DISSECANS LEFT KNEE   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | OTH MENISCUS DERANG POST HORN LAT MENISC LT KNEE  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | OTH MENISCUS DERANG POST HORN MED MENS UNK KNEE   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture | PAIN IN RIGHT KNEE  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multipledrillingor microfracture                                     | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SBSQT ENC, COMPLEX TEAR MED MENISCUS CURR LT KNEE SBSQT ENC, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE SBSQT | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | CHONDROMALACIA PATELLAE LEFT KNEE  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | COMPLEX TEAR LAT MENISC CURR INJ RT KNEE INITIAL, COMPLEX TEAR MED MENISCUS CURR RT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | COMPLEX TEAR MED MENISCUS CURR RT KNEE INIT ENC  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | EFFUSION LEFT KNEE, LATERAL DISLOCATION LT PATELLA INITIAL ENCOUNTER   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | EFFUSION LEFT KNEE, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | LOOSE BODY IN KNEE LEFT KNEE, UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC                    | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | OTH MENISCUS DERANG POST HORN LAT MENISC LT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | OTH MENISCUS DERANG POST HORN MED MENS UNK KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | OTH MENISCUS DERANGEMNT UNS LAT MENISCUS RT KNEE, OTHER INTERNAL DERANGEMENTS OF RIGHT KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | OTH TEAR LAT MENISC CURRNT INJ RT KNEE SBSQT ENC   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC  | ORTHOPEDIC SURGERY  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | OTHER DERANGEMENTS OF PATELLA RIGHT KNEE   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | PAIN IN LEFT KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)   | PAIN IN LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion with internal fixation  | LOOSE BODY IN KNEE RIGHT KNEE, OSTEOCHONDRITIS DISSECANS RIGHT KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; drilling for osteochondritis dissecans with bone grafting, with or without internal fixation (including debridement of base of lesion) | EFFUSION RIGHT KNEE, OSTEOCHONDRITIS DISSECANS RIGHT KNEE  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, knee, surgical; drilling for osteochondritis dissecans with bone grafting, with or without internal fixation (including debridement of base of lesion) | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; for infection, lavage and drainage   | ARTHRITIS DUE TO OTHER BACTERIA LEFT KNEE   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)                        | EFFUSION RIGHT KNEE, OSTEOCHONDRITIS DISSECANS RIGHT KNEE   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)                        | LOOSE BODY IN KNEE LEFT KNEE, UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC                       | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)                        | LOOSE BODY IN KNEE RIGHT KNEE, OSTEOCHONDRITIS DISSECANS RIGHT KNEE   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)                        | OTH MENISCUS DERANG POST HORN MED MENS UN KNEE  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)                        | OTHER DERANGEMENTS OF PATELLA RIGHT KNEE  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)                        | PAIN IN RIGHT KNEE  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)   | CHONDROMALACIA PATELLAE LEFT KNEE   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)   | COMPLEX TEAR MED MENISCUS CURR RT KNEE INIT ENC   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)   | HYPERTROPHY OF INFRAPATELLAR FAT PAD  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)   | OTH MENISCUS DERANG POST HORN MED MENS UN KNEE  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)   | OTH TEAR LAT MENISC CURRNT INJ RT KNEE INIT ENC   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)   | OTHER SPECIFIED JOINT DISORDERS LEFT KNEE   | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)   | OTHER SPONTANEOUS DISRUPTION OF ACL OF LEFT KNEE, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE SBSQT ENC | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)   | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical; synovectomy, major, two or more compartments (eg, medial or lateral)   | OTH MENISCUS DERANG POST HORN MED MENS UN KNEE  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, knee, surgical; synovectomy, major, two or more compartments (eg, medial or lateral)  | SYNOVITIS AND TENOSYNOVITIS UNSPECIFIED, LOOSE BODY IN KNEE LEFT KNEE, DERANG OTH LAT MENISC D/T OLD TEAR/INJ LT KNEE, DERANG OTH MED MENISCUS D/T OLD TEAR/INJ LT KNEE, HYPERTROPHY OF INFRAPATELLAR FAT PAD, UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE, LO | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with lateral release   | OTH MENISCUS DERANG POST HORN MED MENS UNK KNEE  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with lateral release   | UNS INJURY RT QUAD MUSCLE FASCIA TENDON INIT ENC   | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | CHONDROMALACIA PATELLAE LEFT KNEE, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE INITIAL, COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | COMPLEX TEAR LAT MENISC CURR INJ RT KNEE INITIAL, COMPLEX TEAR MED MENISCUS CURR RT KNEE INIT ENC  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | DERANG OTH LAT MENISC D/T OLD TEAR/INJ LT KNEE   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | EFFUSION RIGHT KNEE, OSTEOCHONDRITIS DISSECANS RIGHT KNEE  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH MENISCUS DERANG POST HORN LAT MENISC LT KNEE   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH MENISCUS DERANG POST HORN MED MENS UNK KNEE  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH TEAR LAT MENISC CURRNT INJ RT KNEE INIT ENC  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH TEAR LAT MENISC CURRNT INJ RT KNEE SBSQT ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC   | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC   | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC   | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ RT KNEE SEQUELA   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | OTHER SPONTANEOUS DISRUPTION OF ACL OF LEFT KNEE, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE SBSQT ENC  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC   | SURGERY-ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial AND lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SBSQT ENC, COMPLEX TEAR MED MENISCUS CURR LT KNEE SBSQT ENC, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE SBSQT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT  | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | CHONDROMALACIA PATELLAE LEFT KNEE, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE INITIAL, COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC               | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | CHONDROMALACIA PATELLAE LEFT KNEE, HYPERTROPHY OF INFRAPATELLAR FAT PAD  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | COMPLEX TEAR MED MENISCUS CURR LT KNEE SBSQT ENC   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | COMPLEX TEAR MED MENISCUS CURR LT KNEE SBSQT ENC   | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | COMPLEX TEAR MED MENISCUS CURR RT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | COMPLEX TEAR MED MENISCUS CURR RT KNEE SBSQT ENC   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | COMPLEX TEAR MED MENISCUS CURR RT KNEE SEQUELA, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | DERANG OTH LAT MENISC D/T OLD TEAR/INJ LT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | DERANGEMNT UNS MED MENISCUS OLD TEAR/INJ LT KNEE   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | EFFUSION LEFT KNEE, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | EFFUSION RIGHT KNEE, OSTEOCHONDRITIS DISSECANS RIGHT KNEE  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | LOOSE BODY IN KNEE LEFT KNEE, UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC                      | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | OTH MENISCUS DERANG POST HORN LAT MENISC LT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | OTH MENISCUS DERANG POST HORN MED MENS UNS KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | OTH MENISCUS DERANGEMNT UNS LAT MENISCUS LT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | OTH MENISCUS DERANGEMNT UNS LAT MENISCUS RT KNEE, OTHER INTERNAL DERANGEMENTS OF RIGHT KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving)  | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | ORTHOPEDIC SURGERY  | 1                  | 2                | 2               |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR LAT MENISC CURRNT INJ LT KNEE SBSQT ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR LAT MENISC CURRNT INJ RT KNEE INIT ENC   | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR LAT MENISC CURRNT INJ RT KNEE SBSQT ENC  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR LAT MENISC CURRNT INJ RT KNEE SBSQT ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | SURGERY- ORTHOPEDIC | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC  | GENERAL SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | ORTHOPEDIC SURGERY  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | SURGERY- ORTHOPEDIC | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC  | SURGERY- ORTHOPEDIC | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ RT KNEE SEQUELA  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTH TEAR MED MENISCUS CURR INJ UNS KNEE INIT ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | OTHER SPONTANEOUS DISRUPTION OF ACL OF LEFT KNEE, BUCKET-HANDLE TEAR UNS MENISC CURR LT KNEE SBSQT, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | PAIN IN LEFT KNEE, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | PAIN IN LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | PAIN IN RIGHT KNEE  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | PAIN IN RIGHT KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, OTH TEAR LAT MENISC CURRRT INJ LT KNEE INIT ENC | SURGERY- ORTHOPEDIC   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQT ENC  | PEDIATRIC ORTHOPEDIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQT ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC, SPRAIN LAT COLLATERAL LIGAMENT RT KNEE INITIAL  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE SUBSQT ENC  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | SPRAIN OTHER SPEC PARTS LEFT KNEE SUBSQT ENC, OTH TEAR LAT MENISC CURRRT INJ LT KNEE SBSQT ENC   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | UNS FX UPPER LT TIBIA SUBSQT CLOS FX RTN HEAL, UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE   | SURGERY- ORTHOPEDIC   |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscectomy (medial OR lateral, including any meniscal shaving) | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial AND lateral)                             | BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial AND lateral)                             | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial AND lateral)                             | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, OTH TEAR LAT MENISC CURRRT INJ LT KNEE INIT ENC | SURGERY- ORTHOPEDIC   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                              | BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT  | SURGERY- ORTHOPEDIC   | 2                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                              | CHONDROMALACIA PATELLAE LEFT KNEE, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE INITIAL, COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC               | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                              | COMPLEX TEAR MED MENISCUS CURR LT KNEE SUBSQT ENC  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                              | DISPLACED FX RT TIBIAL SPINE INIT ENC CLOS FX  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                              | LOOSE BODY IN KNEE LEFT KNEE, UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC, OTH TEAR LAT MENISC CURRRT INJ LT KNEE INIT ENC                      | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                              | OTH MENISCUS DERANG POST HORN LAT MENISC LT KNEE   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC   | ORTHOPEDIC SURGERY  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTH TEAR LAT MENISC CURRNT INJ RT KNEE INIT ENC   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC  | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | OTHER SPONTANEOUS DISRUPTION OF ACL OF LEFT KNEE, BUCKET-HANDLE TEAR UNS MENISC CURR LT KNEE SBSQT, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | PAIN IN LEFT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | PAIN IN LEFT KNEE, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC | 4                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, DERANG OTH MED MENISCUS D/T OLD TEAR/INJ LT KNEE  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC, SPRAIN LAT COLLATERAL LIGAMENT RT KNEE INITIAL   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | SPRAIN OTHER SPEC PARTS LEFT KNEE SBSQT ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE SBSQT ENC   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | UNS FRACTURE SHAFT LT TIBIA INIT ENC CLOS FX, UNS TEAR UNS MENISCUS CURR INJ LT KNEE INIT ENC   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, knee, surgical;with meniscus repair (medial OR lateral)                    | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure) | ADHESIVE CAPSULITIS OF RIGHT SHOULDER   | SURGERY- ORTHOPEDIC |                    |                  | 1               | 1                                      |                          |                        |                      |                 |

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|---|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure) | BURSITIS OF RIGHT SHOULDER  | SURGERY-<br>ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure) | UNS ROT CUFF TEAR/RUPT UNS SHOULDER NOT TRAUMAT   | SURGERY-<br>ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | ADHESIVE CAPSULITIS OF RIGHT SHOULDER   | SURGERY-<br>ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | CARPAL TUNNEL SYNDROME RIGHT UPPER LIMB, BICIPITAL TENDINITIS RIGHT SHOULDER, IMPINGEMENT SYNDROME OF RIGHT SHOULDER  | SURGERY-<br>ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | ORTHOPEDIC<br>SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | IMPINGEMENT SYNDROME OF LEFT SHOULDER, SPRAIN LT ROTATOR CUFF CAPSULE SUBSEQUENT ENCNR  | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM  | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | PAIN IN LEFT SHOULDER, STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, STRAIN MUSC FASC TEND OTH PART BICPS LA INIT ENC  | ORTHOPEDIC<br>SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | PAIN IN RIGHT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | SPRAIN RT ROTATOR CUFF CAPSULE SUBSEQUENT ENCNR   | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | STRAIN MUSC & TEND ROTATOR CUFF LT SHLDR SUB ENC, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER   | ORTHOPEDIC<br>SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, BICIPITAL TENDINITIS LEFT SHOULDER   | SURGERY-<br>ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | STRAIN OTH M&T SHLDR UP ARM LEVL LT ARM INIT ENC  | ORTHOPEDIC<br>SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | UNS INJ MUSC TEND ROTAT CUFF RT SHLDR INIT ENC  | SURGERY-<br>ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT  | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, BICIPITAL TENDINITIS LEFT SHOULDER, PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER, SUPERIOR GLENOID LABRUM LESION LT SHOULDER SUB | ORTHOPEDIC<br>SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; biceps tenodesis                                       | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT  | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

Prior Authorization Statistics - IL - CY 2021

| Procedure Code Description                              | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; biceps tenodesis       | UNS ROT CUFF TEAR/RUPT UNS SHOULDER NOT TRAUMAT   | SURGERY- ORTHOPEDIC |                    | 2                | 2               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | HAND SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | OTHER INSTABILITY RIGHT SHOULDER, OTHER ARTICULAR CARTILAGE DISORDERS RT SHOULDER   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | OTHER INSTABILITY RIGHT SHOULDER, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | PAIN IN LEFT SHOULDER, POSTERIOR SUBLUXATION LT HUMERUS INITIAL ENC   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | RECURRENT DISLOCATION RIGHT SHOULDER  | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | STRAIN OTH M&T SHLDR UP ARM LEVEL LT ARM INIT ENC   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | SUPERIOR GLENOID LABRUM LESION RT SHOULDER SUB  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | SUPERIOR GLENOID LABRUM LESION UNS SHOULDER INIT  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; capsulorrhaphy         | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER, SUPERIOR GLENOID LABRUM LESION LT SHOULDER SUB | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | ADHESIVE CAPSULITIS OF RIGHT SHOULDER   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | HAND SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, IMPINGEMENT SYNDROME OF RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | IMPINGEMENT SYNDROME OF LEFT SHOULDER   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | IMPINGEMENT SYNDROME OF LEFT SHOULDER, UNSPECIFIED OSTEOARTHRITIS UNSPECIFIED SITE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |



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| Procedure Code Description                              | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; debridement, extensive | OSTEOCHONDRODYSPLASIA UNSPECIFIED, PAIN IN RIGHT SHOULDER, STRAIN MUSC FASC TEND OTH PART BICPS LA INIT ENC   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | STRAIN MUSC & TEND ROTATOR CUFF LT SHLDR SUB ENC, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, BICIPITAL TENDINITIS RIGHT SHOULDER, IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | UNS INJ MUSC TEND ROTAT CUFF RT SHLDR INIT ENC  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, BICIPITAL TENDINITIS LEFT SHOULDER, PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER, SUPERIOR GLENOID LABRUM LESION LT SHOULDER SUB | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, extensive | UNS ROT CUFF TEAR/RUPT UNS SHOULDER NOT TRAUMAT   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | ADHESIVE CAPSULITIS OF LEFT SHOULDER, UNS DISORDER SYNOVIUM & TENDON LT UPPER ARM   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | ADHESIVE CAPSULITIS OF RIGHT SHOULDER   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | BURSITIS OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | PAIN IN LEFT SHOULDER, IMPINGEMENT SYNDROME OF LEFT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT, PRIMARY OSTEOARTHRITIS LEFT SHOULDER                        | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | PAIN IN LEFT SHOULDER, POSTERIOR SUBLUXATION LT HUMERUS INITIAL ENC   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, BICIPITAL TENDINITIS LEFT SHOULDER   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited   | STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |

Prior Authorization Statistics - IL - CY 2021

| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; debridement, limited  | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT                               | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; debridement, limited  | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | ADHESIVE CAPSULITIS OF LEFT SHOULDER  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | BURSITIS OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | CARPAL TUNNEL SYNDROME RIGHT UPPER LIMB, BICIPITAL TENDINITIS RIGHT SHOULDER, IMPINGEMENT SYNDROME OF RIGHT SHOULDER            | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT, PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, IMPINGEMENT SYNDROME OF RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | IMPINGEMENT SYNDROME OF LEFT SHOULDER   | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | IMPINGEMENT SYNDROME OF LEFT SHOULDER, SPRAIN LT ROTATOR CUFF CAPSULE SUBSEQUENT ENCNTN   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | IMPINGEMENT SYNDROME OF LEFT SHOULDER, UNSPECIFIED OSTEOARTHRITIS UNSPECIFIED SITE  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | IMPINGEMENT SYNDROME OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER, SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

Prior Authorization Statistics - IL - CY 2021

| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | LOOSE BODY IN LEFT SHOULDER   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | OTHER INSTABILITY LEFT SHOULDER, STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, BURSITIS OF LEFT SHOULDER, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | PAIN IN LEFT SHOULDER, IMPINGEMENT SYNDROME OF LEFT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT, PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | PAIN IN RIGHT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | PAIN IN RIGHT SHOULDER, UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | SPRAIN RT ROTATOR CUFF CAPSULE SUBSEQUENT ENCNR   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | STRAIN MUSC & TEND ROTATOR CUFF LT SHLDR SUB ENC  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | STRAIN MUSC & TEND ROTATOR CUFF LT SHLDR SUB ENC, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | STRAIN OTH M&T SHLDR UP ARM LEVL LT ARM INIT ENC  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, BICIPITAL TENDINITIS RIGHT SHOULDER, IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | UNS INJ MUSC TEND ROTAT CUFF RT SHLDR INIT ENC  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, BICIPITAL TENDINITIS LEFT SHOULDER, PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER   | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER, SUPERIOR GLENOID LABRUM LESION LT SHOULDER SUB | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT  | SURGERY-ORTHOPEDIC | 3                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with or without coracoacromial release | UNS ROT CUFF TEAR/RUPT UNS SHOULDER NOT TRAUMAT   | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)                           | ADHESIVE CAPSULITIS OF LEFT SHOULDER  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)                           | CARPAL TUNNEL SYNDROME RIGHT UPPER LIMB, BICIPITAL TENDINITIS RIGHT SHOULDER, IMPINGEMENT SYNDROME OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)                           | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | HAND SURGERY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)                           | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)                           | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)                           | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, IMPINGEMENT SYNDROME OF RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)                           | IMPINGEMENT SYNDROME OF LEFT SHOULDER, UNSPECIFIED OSTEOARTHRITIS UNSPECIFIED SITE  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)                           | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER, SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | OTHER INSTABILITY LEFT SHOULDER, STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, BURSITIS OF LEFT SHOULDER, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | PAIN IN LEFT SHOULDER, IMPINGEMENT SYNDROME OF LEFT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT, PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | PAIN IN RIGHT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | STRN MUSC FASC TEND LNG HD BICPS RT ARM INIT ENC, INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER                        | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure) | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, BICIPITAL TENDINITIS LEFT SHOULDER, PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | BURSITIS OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | LOOSE BODY IN LEFT SHOULDER   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | OTHER INSTABILITY LEFT SHOULDER, STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, BURSITIS OF LEFT SHOULDER, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | OTHER INSTABILITY RIGHT SHOULDER, OTHER ARTICULAR CARTILAGE DISORDERS RT SHOULDER   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | PAIN IN RIGHT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | STRAIN OTH M&T SHLDR UP ARM LVL UNS ARM INIT ENC, SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | STRN MUSC FASC TEND LNG HD BICPS RT ARM INIT ENC, INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT  | SURGERY-ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | SUPERIOR GLENOID LABRUM LESION RT SHOULDER SUB   | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | SUPERIOR GLENOID LABRUM LESION UNS SHOULDER INIT   | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; repair of SLAP lesion   | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER, SUPERIOR GLENOID LABRUM LESION LT SHOULDER SUB              | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; synovectomy, complete   | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation | ADHESIVE CAPSULITIS OF LEFT SHOULDER   | SURGERY-ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation | ADHESIVE CAPSULITIS OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC |                    | 2                | 2               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation | ADHESIVE CAPSULITIS OF RIGHT SHOULDER, ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT   | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation | SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair  | ADHESIVE CAPSULITIS OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair  | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT   | ORTHOPEDIC SURGERY | 2                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair  | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair  | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT, PRIMARY OSTEOARTHRITIS LEFT SHOULDER   | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair  | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT   | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair  | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair  | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, IMPINGEMENT SYNDROME OF RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; with rotator cuff repair | IMPINGEMENT SYNDROME OF LEFT SHOULDER, SPRAIN LT ROTATOR CUFF CAPSULE SUBSEQUENT ENC NTR  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER, SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | IMPINGEMENT SYNDROME OF RIGHT SHOULDER, SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM  | SURGERY-ORTHOPEDIC  | 2                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | OTHER INSTABILITY LEFT SHOULDER, STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, BURSITIS OF LEFT SHOULDER, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | PAIN IN LEFT SHOULDER, IMPINGEMENT SYNDROME OF LEFT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT, PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | PAIN IN LEFT SHOULDER, STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, STRAIN MUSC FASC TEND OTH PART BICPS LA INIT ENC  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | PAIN IN RIGHT SHOULDER, COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | PAIN IN RIGHT SHOULDER, UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | SPRAIN RT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | SPRAIN RT ROTATOR CUFF CAPSULE SUBSEQUENT ENC NTR   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRAIN MUSC & TEND ROTATOR CUFF LT SHLDR SUB ENC, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, BICIPITAL TENDINITIS LEFT SHOULDER   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRAIN OTH M&T SHLDR UP ARM LEVL LT ARM INIT ENC  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRAIN OTH M&T SHLDR UP ARM LVL UNS ARM INIT ENC, SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                | Diagnosis Code Description   | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRN MUSC FASC TEND LNG HD BICPS RT ARM INIT ENC, INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC   | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, BICIPITAL TENDINITIS RIGHT SHOULDER, IMPINGEMENT SYNDROME OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | UNS INJ MUSC TEND ROTAT CUFF RT SHLDR INIT ENC   | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, BICIPITAL TENDINITIS LEFT SHOULDER, PRIMARY OSTEOARTHRITIS LEFT SHOULDER   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER, SUPERIOR GLENOID LABRUM LESION LT SHOULDER SUB              | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | SURGERY-ORTHOPEDIC | 3                  |                  |                 |  |                          |                        |                      |                 |
| Arthroscopy, shoulder, surgical; with rotator cuff repair | UNS ROT CUFF TEAR/RUPT UNS SHOULDER NOT TRAUMAT  | SURGERY-ORTHOPEDIC |                    | 3                | 3               |  |                          |                        |                      |                 |
| Arthrotomy with meniscus repair, knee                     | LOOSE BODY IN KNEE LEFT KNEE, UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC, OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| ASA-BUTALB-CAFFEINE-CODEINE 30-50-325 CAPSULE             |  | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| ASA-BUTALB-CAFFEINE-CODEINE 30-50-325 CAPSULE             |  | PCP/Pediatrician   | 1                  |                  |                 |  |                          |                        |                      |                 |
| AS-AORT GRF F/AORTIC DSJ                                  | NONRHEUMATIC AORTIC (VALVE) STENOSIS   | Surgery, Thoracic  | 1                  |                  |                 |  |                          |                        |                      |                 |
| ASMANEX 220MCG 120 AER POW BA                             |  | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| ASMANEX 220MCG(30) AER POW BA                             |  | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| ASMANEX 220MCG(60) AER POW BA                             |  | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| ASMANEX HFA 200 MCG HFA AER AD                            |  | Allergy/Immunology | 1                  |                  |                 |  |                          |                        |                      |                 |
| ASMANEX HFA 200 MCG HFA AER AD                            |  | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| ASMANEX HFA 50 MCG HFA AER AD                             |  | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| ASSAY IGA/IGD/IGG/IGM EACH                                | ANAPHYLACTIC REACTION DUE TO PEANUTS, SUBSEQUENT ENCOUNTER   | Pediatrics         |                    | 1                | 1               |  |                          |                        |                      |                 |
| ASSAY OF IGE  | ANAPHYLACTIC REACTION DUE TO PEANUTS, SUBSEQUENT ENCOUNTER   | Pediatrics         |                    | 1                | 1               |  |                          |                        |                      |                 |



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|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| ATOMOXETINE HCL 40 MG CAPSULE                |   | Other               | 2                  |                  |                 |  |                          |                        |                      |                 |
| AUBAGIO 14 MG TABLET                         |   | Other               | 2                  |                  |                 |  |                          |                        |                      |                 |
| AUD REHAB PRE-LING HEAR LOSS                 | SENSORINEURAL HEARING LOSS, BILATERAL                       | Speech Therapy      | 1                  |                  |                 |  |                          |                        |                      |                 |
| AUSTEDO 9 MG TABLET                          |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Autologous chondrocyte implantation, knee    | OTHER DERANGEMENTS OF PATELLA RIGHT KNEE                    | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| AUVI-Q 0.1MG/.1ML AUTO INJCT                 |   | Allergy/Immunology  | 2                  |                  |                 |  |                          |                        |                      |                 |
| AUVI-Q 0.1MG/.1ML AUTO INJCT                 |   | Other               | 6                  |                  |                 |  |                          |                        |                      |                 |
| AVONEX 30MCG/.5ML SYRINGEKIT                 |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| AVONEX PEN 30MCG/.5ML PEN IJ KIT             |   | Neurology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| AYVAKIT 300 MG TABLET                        |   | Hematology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| AYVAKIT 300 MG TABLET                        |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| AZELEX 20 % CREAM(GM)                        |   | Dermatology         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| AZITHROMYCIN 250 MG TABLET                   |   | Pulmonology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| BAFIERTAM 95 MG CAPSULE DR                   |   | Neurology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| BAQSIMI 3 MG SPRAY                           |   | Endocrinology       |                    | 1                | 1               |  |                          |                        |                      |                 |
| BASAGLAR KWIKPEN U-100 100/ML (3) INSULN PEN |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| BASAGLAR KWIKPEN U-100 100/ML (3) INSULN PEN |   | PCP/Pediatrician    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BAXDELA 450 MG TABLET                        |   | Infectious Disease  | 1                  |                  |                 |  |                          |                        |                      |                 |
| BELATACEPT INJECTION                         | KIDNEY TRANSPLANT STATUS                                    | Hospital            | 1                  |                  |                 |  |                          |                        |                      |                 |
| BELIMUMAB INJECTION                          | OTH ORGAN OR SYSTEM INVOLV IN SYSTEMIC LUPUS ERYTHEMATOSUS  | Rheumatology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BELIMUMAB INJECTION                          | SYSTEMIC LUPUS ERYTHEMATOSUS, UNSPECIFIED                   | Rheumatology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BELSOMRA 10 MG TABLET                        |   | Other               |                    | 2                | 2               |  |                          |                        |                      |                 |
| BELSOMRA 15 MG TABLET                        |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| BELSOMRA 20 MG TABLET                        |   | Other               | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| BELSOMRA 5 MG TABLET                         |   | Psychiatry          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Benign Indications                           | Benign neoplasm of cranial nerves                           | RADIATION ONCOLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| BENLYSTA 200 MG/ML AUTO INJCT                |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| BENLYSTA 200 MG/ML AUTO INJCT                |   | PCP/Pediatrician    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BENLYSTA 200 MG/ML AUTO INJCT                |   | Rheumatology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | CENTRAL RETINAL VEIN OCCLUSION, RIGHT EYE, W RTNL NEOVAS    | Ophthalmology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | DIAB WITH PROLIF DIABETIC RTNOP WITH MACULAR EDEMA, R EYE   | Ophthalmology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | EXDTVE AGE-REL MCLR DEGN, LEFT EYE, WITH ACTV CHRDL NEOVAS  | Ophthalmology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | EXDTVE AGE-REL MCLR DEGN, RIGHT EYE, WITH ACTV CHRDL NEOVAS | Ophthalmology       | 3                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | OTHER GENERAL SYMPTOMS AND SIGNS                            | Ophthalmology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | RETINAL EDEMA   | Ophthalmology       | 2                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | RETINAL NEOVASCULARIZATION, UNSPECIFIED, LEFT EYE           | Ophthalmology       | 2                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | TRIB RTNL VEIN OCCLUSION, LEFT EYE, W RTNL NEOVAS           | Ophthalmology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION                        | TRIB RTNL VEIN OCCLUSION, LEFT EYE, WITH MACULAR EDEMA      | Ophthalmology       | 2                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| BEVACIZUMAB INJECTION   | TRIBUTARY (BRANCH) RETINAL VEIN OCCLUSION, LEFT EYE, STABLE  | Ophthalmology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 1 DIAB W PROLIF DIAB RTNOP WITH TRCTN DTCH N-MCLA, BI   | Ophthalmology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 1 DIAB WITH MOD NONP RTNOP WITH MACULAR EDEMA, R EYE    | Ophthalmology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 1 DIAB WITH MODERATE NONP RTNOP WITH MACULAR EDEMA, BI  | Ophthalmology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 1 DIAB WITH PROLIF DIAB RTNOP WITHOUT MCLR EDEMA, R EYE | Ophthalmology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 2 DIAB WITH MODERATE NONP RTNOP WITH MACULAR EDEMA, BI  | Ophthalmology         | 3                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITH MACULAR EDEMA, BI    | Ophthalmology         | 5                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITH MACULAR EDEMA, L EYE | Ophthalmology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITHOUT MACULAR EDEMA, BI | Ophthalmology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| BEVACIZUMAB INJECTION   | TYPE 2 DIAB WITH SEVERE NONP RTNOP WITH MACULAR EDEMA, BI    | Ophthalmology         | 3                  |                  |                 |  |                          |                        |                      |                 |
| Bi-Level Positive Airway Pressure device - a home based healthcare device that provides treatment for breathing disorders | Central sleep apnea in conditions classified elsewhere       | Rheumatology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Bi-Level Positive Airway Pressure device - a home based healthcare device that provides treatment for breathing disorders | Disorders of diaphragm                                       | Pulmonology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Bi-Level Positive Airway Pressure device - a home based healthcare device that provides treatment for breathing disorders | Obstructive sleep apnea (adult) (pediatric)                  | Internal Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Bi-Level Positive Airway Pressure device - a home based healthcare device that provides treatment for breathing disorders | Obstructive sleep apnea (adult) (pediatric)                  | Neurology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| BILIARY ENDOSCOPY THRU SKIN   | OTHER SPECIFIED DISEASES OF BILIARY TRACT                    | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| BIOPSY OF PROSTATE  | ELEVATED PROSTATE SPECIFIC ANTIGEN [PSA]                     | Urology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| Biopsy, soft tissue of thigh or knee area;deep (subfascial or intramuscular)  | OTH MENISCUS DERANG POST HORN LAT MENISC LT KNEE             | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| BIOPSY/REMOVAL LYMPH NODES  | INTRADUCTAL CARCINOMA IN SITU OF RIGHT BREAST                | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| BIOPSY/REMOVAL LYMPH NODES  | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic      | 1                  |                  |                 |  |                          |                        |                      |                 |
| BL DONOR SEARCH MANAGEMENT  | ACUTE LYMPHOBLASTIC LEUKEMIA NOT HAVING ACHIEVED REMISSION   | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| BLEOMYCIN SULFATE INJECTION   | PLANTAR WART   | Dermatology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| BLEOMYCIN SULFATE INJECTION   | VIRAL WART, UNSPECIFIED                                      | Dermatology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| BLOOD/LYMPH SYSTEM PROCEDURE  | LYMPHEDEMA, NOT ELSEWHERE CLASSIFIED                         | Surgery, Plastic      |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| BONE MARROW ASPIR BONE GRFG   | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| BONE MARROW ASPIR BONE GRFG   | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |

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|------------------------------|--|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| BONE SURGERY USING COMPUTER  | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP                              | ORTHOPEDIC SURGERY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| BONE SURGERY USING COMPUTER  | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE                               | ORTHOPEDIC SURGERY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| BONE/SKIN GRAFT MICROVASC    | MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED                                  | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| BOTOX                        | Chronic migraine without aura, intractable, without status migrainosus     | Psychiatry                      |                    |                  |                 |  |                          |                        | 1                    |                 |
| BOTOX                        | Chronic migraine without aura, not intractable, without status migrainosus | Pediatrics                      |                    |                  |                 |  |                          | 1                      |                      |                 |
| BOTOX                        | Primary focal hyperhidrosis, axilla  | Dermatology                     |                    |                  |                 |  |                          |                        | 1                    |                 |
| BOTOX 100 UNIT VIAL          |  | Dermatology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| BOTOX 100 UNIT VIAL          |  | Neurology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| BOTOX 100 UNIT VIAL          |  | Other                           | 3                  |                  |                 |  |                          |                        |                      |                 |
| BOTOX 200 UNIT VIAL          |  | Dermatology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| BOTOX 200 UNIT VIAL          |  | Neurology                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| BRAF GENE                    | ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION                                  | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRAF GENE                    | BURKITT LYMPHOMA, LYMPH NODES OF AXILLA AND UPPER LIMB                     | Hematology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRAF GENE                    | GASTROINTESTINAL STROMAL TUMOR, UNSPECIFIED SITE                           | Hematology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRAF GENE                    | INTRAHEPATIC BILE DUCT CARCINOMA   | Hematology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRAF GENE                    | MALIGNANT MELANOMA OF LEFT LOWER LIMB, INCLUDING HIP                       | Internal Medicine               | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRAF GENE                    | MALIGNANT MELANOMA OF LEFT UPPER LIMB, INCLUDING SHOULDER                  | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRAF GENE                    | MALIGNANT MELANOMA OF SKIN, UNSPECIFIED                                    | Oncology                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRAF GENE                    | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                                  | Internal Medicine               |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRAF GENE                    | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX                     | Hematology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRAF GENE                    | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG                   | Hematology                      |                    | 2                | 1               | 1                                      |                          |                        |                      |                 |
| BRAF GENE                    | SOLITARY PULMONARY NODULE  | Surgery, Thoracic               |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRAIN BIOPSY W/CT/MR GUIDE   | DISORDER OF BRAIN, UNSPECIFIED   | Surgery, Neurological           | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1 GENE FULL DUP/DEL ALYS | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY                     | Oncology                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1 GENE FULL SEQ ALYS     | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY                     | Oncology                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF CARRIER OF GENETIC DISEASE                               | Gynecologic Oncology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF CARRIER OF GENETIC DISEASE                               | Hematology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                             | Family Medicine                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                             | Gastroenterology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                             | Genetics                        | 3                  | 2                | 2               |  |                          |                        |                      |                 |

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| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST               | Hematology            | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST               | Obstetrics/Gynecology | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST               | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST               | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF DIGESTIVE ORGANS     | Family Medicine       |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OVARY                | Family Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OVARY                | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OVARY                | Radiology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | FAMILY HISTORY OF MALIGNANT NEOPLASM OF PROSTATE             | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF CENTRAL PORTION OF LEFT FEMALE BREAST  | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX       | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF OVRLP SITES OF LEFT FEMALE BREAST      | Clinical Genetics     | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF PROSTATE                               | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF PROSTATE                               | Urology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Genetics              | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, General      |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST | Genetics              | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Emergency Medicine    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Family Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Pediatrics            | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN               | Genetics              | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Family Medicine       |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA1&2 GEN FULL SEQ DUP/DEL | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Genetics              |                    | 1                | 1               |  |                          |                        |                      |                 |

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|------------------------------|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| BRCA2 GENE FULL DUP/DEL ALYS | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY              | Oncology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA2 GENE FULL SEQ ALYS     | FAMILY HISTORY OF MALIGNANT NEOPLASM OF PROSTATE                    | Genetics            | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRCA2 GENE FULL SEQ ALYS     | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY              | Oncology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRCA2 GENE KNOWN FAMIL VRNT  | FAMILY HISTORY OF MALIGNANT NEOPLASM OF PROSTATE                    | Genetics            | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREAST "STACKED" DIEP/GAP    | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                    | Surgery, Plastic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Intraductal carcinoma in situ of left breast                        | RADIATION ONCOLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Intraductal carcinoma in situ of right breast                       | THORASTIC RADIOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Malignant neoplasm of central portion of left female breast         | RADIATION ONCOLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Malignant neoplasm of connective and soft tissue of thorax          | Radiation Oncology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Malignant neoplasm of lower-inner quadrant of left female breast    | RADIATION ONCOLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Malignant neoplasm of unspecified site of right female breast       | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Malignant neoplasm of unspecified site of right female breast       | RADIATION ONCOLOGY  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Breast Cancer                | Malignant neoplasm of unspecified site of unspecified female breast | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Malignant neoplasm of upper-inner quadrant of left female breast    | RADIATION ONCOLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Breast Cancer                | Malignant neoplasm of upper-outer quadrant of right female breast   | RADIATION ONCOLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREAST DIEP OR SIEA FLAP     | ACQUIRED ABSENCE OF BILATERAL BREASTS AND NIPPLES                   | Surgery, Plastic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREAST DIEP OR SIEA FLAP     | ESTROGEN RECEPTOR POSITIVE STATUS [ER+]                             | Surgery, Plastic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREAST DIEP OR SIEA FLAP     | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                    | Surgery, Plastic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREAST RECONSTRUCTION        | GENDER IDENTITY DISORDER, UNSPECIFIED                               | Surgery, Plastic    | 2                  |                  |                 |  |                          |                        |                      |                 |
| BREAST RECONSTRUCTION        | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST        | Surgery, Plastic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREAST RECONSTRUCTION        | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                    | Surgery, Plastic    | 2                  |                  |                 |  |                          |                        |                      |                 |
| BREAST REDUCTION             | HYPERTROPHY OF BREAST   | Surgery, Plastic    | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| BREAST REDUCTION             | OTHER DORSALGIA   | Surgery, Plastic    |                    | 1                | 1               |  |                          |                        |                      |                 |
| BREAST REDUCTION             | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                    | Anesthesiology      | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREAST REDUCTION             | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                    | Surgery, Plastic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREAST SURGERY PROCEDURE     | OTH ABN AND INCONCLUSIVE FINDINGS ON DX IMAGING OF BREAST           | Internal Medicine   |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| BRENTUXIMAB VEDOTIN INJ                              | NODULAR SCLEROSIS HODGKIN LYMPHOMA, INTRATHORAC LYMPH NODES  | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREO ELLIPTA   | ASTHMA   | Family Medicine              |                    |                  |                 |  |                          | 1                      |                      |                 |
| BREO ELLIPTA 100-25MCG BLST W/DEV                    |  | Internal Medicine            |                    | 1                | 1               |  |                          |                        |                      |                 |
| BREO ELLIPTA 100-25MCG BLST W/DEV                    |  | Other                        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| BREO ELLIPTA 200-25 MCG BLST W/DEV                   |  | Other                        |                    | 7                | 7               |  |                          |                        |                      |                 |
| BREO ELLIPTA 200-25 MCG BLST W/DEV                   |  | Pulmonology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| BREZTRI AEROSPHERE 160-9-4.8 HFA AER AD              |  | Allergy/Immunology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| BRIVIACT 100 MG TABLET                               |  | Neurology                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRIVIACT 100 MG TABLET                               |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRST RCNSTJ FREE FLAP                                | ACQUIRED ABSENCE OF BILATERAL BREASTS AND NIPPLES            | Surgery, Plastic             | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRST RCNSTJ FREE FLAP                                | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic             | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRST RCNSTJ LATSMS DRSI FLAP                         | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Anesthesiology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| BRYHALI 0.01 % LOTION                                |  | Other                        | 3                  |                  |                 |  |                          |                        |                      |                 |
| BUDESONIDE   | CROHN'S DISEASE, UNSPECIFIED, WITH UNSPECIFIED COMPLICATIONS | Gastroenterology             |                    |                  |                 |  |                          |                        | 1                    |                 |
| BUDESONIDE   | Ulcerative (chronic) pancolitis without complications        | Gastroenterology             |                    |                  |                 |  |                          | 1                      |                      |                 |
| BUDESONIDE ER  | ulcerative colitis (UC)                                      | Gastroenterology             |                    |                  |                 |  |                          |                        | 1                    |                 |
| BUDESONIDE ER 9 MG TABDR - ER                        |  | Gastroenterology             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| BUDESONIDE ER 9 MG TABDR - ER                        |  | Other                        | 1                  | 9                | 8               | 1                                      |                          |                        |                      |                 |
| BUDESONIDE-FORMOTEROL FUMARATE 160-4.5MCG HFA AER AD |  | Other                        |                    | 4                | 4               |  |                          |                        |                      |                 |
| BUDESONIDE-FORMOTEROL FUMARATE 160-4.5MCG HFA AER AD |  | PCP/Pediatrician             |                    | 1                | 1               |  |                          |                        |                      |                 |
| BUDESONIDE-FORMOTEROL FUMARATE 160-4.5MCG HFA AER AD |  | Pulmonology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| BUDESONIDE-FORMOTEROL FUMARATE 80-4.5 MCG HFA AER AD |  | Other                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| BUPROPION HCL SR 150 MG TAB SR 12H                   |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BUTALB-ACETAMINOPH-CAFF-CODEIN 50-325-30 CAPSULE     |  | Neurology                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| BUTALB-ACETAMINOPH-CAFF-CODEIN 50-325-30 CAPSULE     |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BYDUREON BCISE 2MG/0.85ML AUTO INJECT                |  | Endocrinology And Metabolism | 1                  |                  |                 |  |                          |                        |                      |                 |
| BYDUREON BCISE 2MG/0.85ML AUTO INJECT                |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BYNFEZIA 2500MCG/ML PEN INJCTR                       |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| BYSTOLIC   | hypertension   | Cardiovascular Disease       |                    |                  |                 |  |                          | 1                      |                      |                 |
| BYSTOLIC 10 MG TABLET                                |  | Cardiology                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| BYSTOLIC 10 MG TABLET                                |  | Other                        | 2                  | 4                | 4               |  |                          |                        |                      |                 |
| BYSTOLIC 10 MG TABLET                                |  | PCP/Pediatrician             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| BYSTOLIC 2.5 MG TABLET                               |  | Other                        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| BYSTOLIC 20 MG TABLET                                |  | Other                        | 2                  |                  |                 |  |                          |                        |                      |                 |

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| BYSTOLIC 5 MG TABLET   |  | Other                   | 5                  | 8                | 8               |  |                          |                        |                      |                 |
| CABG ARTERIAL SINGLE   | ABDOMINAL AORTIC ANEURYSM, WITHOUT RUPTURE                   | Cardiovascular Disease  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CABG ARTERIAL SINGLE   | ATHSCL HEART DISEASE OF NATIVE COR ART W UNSP ANG PCTRS      | Surgery, Thoracic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CABG ARTERIAL SINGLE   | ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS | Surgery, Thoracic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CABG ARTERY-VEIN THREE   | ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS | Surgery, Thoracic       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CABG VEIN FOUR   | ATHSCL HEART DISEASE OF NATIVE COR ART W UNSP ANG PCTRS      | Surgery, Cardiovascular | 1                  |                  |                 |  |                          |                        |                      |                 |
| CABG VEIN FOUR   | ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS | Surgery, Cardiovascular | 1                  |                  |                 |  |                          |                        |                      |                 |
| CABG VEIN SINGLE   | NONRHEUMATIC AORTIC (VALVE) INSUFFICIENCY                    | Surgery, Cardiovascular | 1                  |                  |                 |  |                          |                        |                      |                 |
| CABOMETYX 60 MG TABLET   |  | Oncology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CALQUENCE 100 MG CAPSULE   |  | Other                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CAMBIA 50 MG POWD PACK   |  | Other                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CAPECITABINE 500 MG TABLET   |  | Oncology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CAPECITABINE 500 MG TABLET   |  | Oncology/Radiation      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Capsulorrhaphy, anterior, any type; with coracoid process transfer   | RECURRENT DISLOCATION RIGHT SHOULDER                         | SURGERY- ORTHOPEDIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CARBOPLATIN INJECTION  | MALIGNANT NEOPLASM OF ENDOMETRIUM                            | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CARBOPLATIN INJECTION  | MALIGNANT NEOPLASM OF ENDOMETRIUM                            | Gynecologic Oncology    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CARBOPLATIN INJECTION  | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Oncology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac blood pool imaging, gated equilibrium, SPECT, at rest, wall motion study plus ejection fraction, with or w/o quantitat processing              | MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST             | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection | MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST             | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac Catheterization and Associated Procedures  | Abnormal result of other cardiovascular function study       | Other                   |                    |                  |                 |  |                          |                        |                      | 1               |
| Cardiac magnetic resonance imaging for velocity flow mapping (List separately in addition to code for primary procedure)                               | ANGINA PECTORIS UNSPECIFIED                                  | CARDIOVASCULAR DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac magnetic resonance imaging for velocity flow mapping (List separately in addition to code for primary procedure)                               | CONGENITAL INSUFFICIENCY OF AORTIC VALVE                     | CARDIOVASCULAR DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac magnetic resonance imaging for velocity flow mapping (List separately in addition to code for primary procedure)                               | VENTRICULAR TACHYCARDIA, OTHER CARDIOMYOPATHIES              | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast material;   | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST                | CARDIOLOGIST            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences;  |  | PEDIATRIC RADIOLOGY     |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ABNORMAL ELECTROCARDIOGRAM, PRECORDIAL PAIN, SHORTNESS OF BREATH, CARDIOMEGALY   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, ABNORMAL RESULT CV FUNCTION STUDY UNS  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, OTH SPECIFIED CONGENITAL MALFORMATIONS OF HEART  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, VENTRICULAR PREMATURE DEPOLARIZATION   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ACUTE CHRON SYSTOLIC HEART FAILURE   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | AORTIC ECTASIA UNSPECIFIED SITE, NONRHEUMATIC AORTIC VALVE INSUFFICIENCY   | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ST ELEVATION MYOCARDIAL INFARCTION UNSITE   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ATTN-DEFICIT HYPERACTIVITY D/O INATTENTIVE TYPE, MAJOR DEPRESSIVE DISORDER SINGLE EPISODE MILD, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM, FAMILY HISTORY OF OTHER SPECIFIED CONDITIONS | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | BRADYCARDIA UNSPECIFIED, ATRIOVENTRICULAR BLOCK SECOND DEGREE  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | CHRONIC SYSTOLIC CONGESTIVE HEART FAILURE, CARDIOMYOPATHY UNSPECIFIED  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | CONGENITAL INSUFFICIENCY OF AORTIC VALVE   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | ESSENTIAL PRIMARY HYPERTENSION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | FAMILY HISTORY OF SUDDEN CARDIAC DEATH   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | HYPOTENSION UNSPECIFIED  | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |



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| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | OTH SPECIFIED CONGENITAL MALFORMATIONS OF HEART  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | OTHER CARDIOMYOPATHIES   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | OTHER CARDIOMYOPATHIES   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | OTHER HYPERTROPHIC CARDIOMYOPATHY  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | OTHER HYPERTROPHIC CARDIOMYOPATHY  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | OTHER HYPERTROPHIC CARDIOMYOPATHY, MONOCLONAL GAMMOPATHY   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | PALPITATIONS   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | PALPITATIONS, VENTRICULAR TACHYCARDIA, PERSONAL HISTORY OTH DISEASES CIRCULATORY SYSTEM  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | PAROXYSMAL ATRIAL FIBRILLATION   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | PECTUS EXCAVATUM   | SURGERY-PEDIATRIC      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | SYNCOPE AND COLLAPSE, ABNORMAL ELECTROCARDIOGRAM, OTHER SPECIFIED ABNORMALITIES OF PLASMA PROTEINS, PALPITATIONS, OTHER CHEST PAIN, OTHER ACUTE MYOCARDITIS, DISEASE OF PERICARDIUM UNSPECIFIED, MULTI-SYSTEM DEGEN AUTONOMIC NERVOUS SYSTEM, ENCOUNTER FOR PR | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | SYNCOPE AND COLLAPSE, PRECORDIAL PAIN, DISEASE OF PERICARDIUM UNSPECIFIED  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | UNSPECIFIED ATRIAL FIBRILLATION  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | UNSPECIFIED CONVULSIONS, SYSTEMIC SCLEROSIS UNSPECIFIED  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; | VENTRICULAR TACHYCARDIA, OTHER CARDIOMYOPATHIES  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; with stress imaging | ABNORMAL ELECTROCARDIOGRAM, CHEST PAIN UNSPECIFIED, PERSONAL HISTORY OF OTHER DRUG THERAPY | CARDIOVASCULAR DISEASE                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; with stress imaging | ANGINA PECTORIS UNSPECIFIED  | CARDIOVASCULAR DISEASE                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; with stress imaging | CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH  | CARDIOVASCULAR DISEASE                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; with stress imaging | COVID-19   | INTERNAL MEDICINE                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Cardiac MRI for morphology and function without contrast, followed by contrast and further sequences; with stress imaging | HEART DISEASE UNSPECIFIED  | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CARDIAC REHAB   | PRESENCE OF AORTOCORONARY BYPASS GRAFT   | Cardiology, Interventional             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CARDIAC REHAB/MONITOR   | PRESENCE OF AORTOCORONARY BYPASS GRAFT   | Cardiology, Interventional             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CARDIAC REHAB/MONITOR   | PRESENCE OF CORONARY ANGIOPLASTY IMPLANT AND GRAFT   | Cardiovascular Disease                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| CASTING/STRAPPING PROCEDURE   | FLAT FOOT [PES PLANUS] (ACQUIRED), UNSPECIFIED FOOT  | Podiatry                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CASTING/STRAPPING PROCEDURE   | OTHER ACQUIRED DEFORMITIES OF FOOT   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CASTING/STRAPPING PROCEDURE   | OTHER ACQUIRED DEFORMITIES OF LEFT FOOT  | Podiatry                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CASTING/STRAPPING PROCEDURE   | PLANTAR FASCIAL FIBROMATOSIS   | Podiatry                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CELEBREX 200 MG CAPSULE   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CEQUA 0.09 % DROPERETTE   |  | Ophthalmology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CEQUA 0.09 % DROPERETTE   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CETROTIDE 0.25 MG KIT   |  | Endocrinology                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| CETROTIDE 0.25 MG KIT   |  | Obstetrics/Gynecology                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| CETROTIDE 0.25 MG KIT   |  | Other                                  | 14                 |                  |                 |  |                          |                        |                      |                 |
| CETROTIDE 0.25 MG KIT   |  | Reproductive Endocrinology/Infertility | 4                  |                  |                 |  |                          |                        |                      |                 |
| CHEMO IV INFUSION 1 HR  | MALIGNANT NEOPLASM OF CONNECTIVE AND SOFT TISSUE, UNSP                                     | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE   | CHRONIC MIGRAINE W/O AURA, INTRACTABLE, W STATUS MIGRAINOSUS                               | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE   | CHRONIC MIGRAINE W/O AURA, INTRACTABLE, W/O STAT MIGR                                      | Neurology                              | 11                 | 2                | 2               |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE   | CHRONIC MIGRAINE W/O AURA, INTRACTABLE, W/O STAT MIGR                                      | Psychiatry                             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE   | CHRONIC MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STAT MIGR                                  | Neurology                              | 7                  | 3                | 3               |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE   | CHRONIC MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STAT MIGR                                  | Pain Management                        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| CHEMODENERV MUSC MIGRAINE  | CHRONIC MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STAT MIGR                 | Physician Assistant            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE  | MIGRAINE W/O AURA, INTRACTABLE, WITHOUT STATUS MIGRAINOSUS                | Neurology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE  | MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STATUS MIGRAINOSUS                | Neurology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE  | MIGRAINE WITH AURA, INTRACTABLE, WITHOUT STATUS MIGRAINOSUS               | Neurology                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE  | MIGRAINE, UNSP, INTRACTABLE, WITHOUT STATUS MIGRAINOSUS                   | Neurology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE  | MIGRAINE, UNSP, NOT INTRACTABLE, WITHOUT STATUS MIGRAINOSUS               | Neurology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE  | OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBAR REGION                     | Neurology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CHEMODENERV MUSC MIGRAINE  | SPASMODIC TORTICOLLIS   | Neurology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Acute myeloblastic leukemia, not having achieved remission                | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Burkitt lymphoma, unspecified site  | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Chronic lymphocytic leukemia of B-cell type not having achieved remission | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Chronic lymphocytic leukemia of B-cell type not having achieved remission | ONCOLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Intrahepatic bile duct carcinoma  | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Intrahepatic bile duct carcinoma  | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Intrahepatic bile duct carcinoma  | PHYSICAL THERAPY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant melanoma of left lower limb, including hip                      | MEDICAL ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of axillary tail of right female breast                | ONCOLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of base of tongue                                      | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of central portion of left female breast               | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of central portion of left female breast               | OUTPATIENT REHAB FACILITY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of central portion of right female breast              | INTERNAL MEDICINE              | 3                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of cortex of right adrenal gland                       | INTERNAL MEDICINE              | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of descending colon                                    | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of esophagus, unspecified                              | HEMATOLOGY                     |                    |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of esophagus, unspecified                              | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of esophagus, unspecified                              | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of head, face and neck                                 | HOSPITALIST - INTERNAL MEDICIN | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty             | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|--------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CHEMOTHERAPY               | Malignant neoplasm of head, face and neck                              | ONCOLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of larynx, unspecified                              | OUTPATIENT REHAB FACILITY      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of left kidney, except renal pelvis                 | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of left ovary                                       | ONCOLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of lower-inner quadrant of left female breast       | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of nipple and areola, left female breast            | HEMATOLOGY<br>ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of nipple and areola, right female breast           | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of overlapping sites of left female breast          | HEMATOLOGY<br>ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of overlapping sites of left female breast          | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of overlapping sites of nasopharynx                 | ONCOLOGY                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of overlapping sites of right female breast         | Internal Medicine              | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of prostate   | INTERNAL MEDICINE              | 3                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of prostate   | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of prostate   | UROLOGICAL SURGERY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of right ovary                                      | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of trigone of bladder                               | HEMATOLOGY<br>ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of trigone of bladder                               | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified ovary                                | GYNECOLOGICAL<br>ONCOLOGY      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified ovary                                | HEMATOLOGY<br>ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified part of left bronchus or lung        | Oncology/Radiation             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified part of unspecified bronchus or lung | DIAGNOSTIC RADIOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified part of unspecified bronchus or lung | HEMATOLOGY AND ONCOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified part of unspecified bronchus or lung | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified site of left female breast           | HEMATOLOGY<br>ONCOLOGY         | 3                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified site of left female breast           | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified site of right female breast          | HOSPITALIST - INTERNAL MEDICIN | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY               | Malignant neoplasm of unspecified site of unspecified female breast    | HEMATOLOGY<br>ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description             | Diagnosis Code Description   | Provider Specialty                     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CHEMOTHERAPY                           | Malignant neoplasm of unspecified site of unspecified female breast                | INTERNAL MEDICINE                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Malignant neoplasm of unspecified site of unspecified female breast                | ONCOLOGY                               | 6                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Malignant neoplasm of upper lobe, right bronchus or lung                           | ONCOLOGY                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Malignant neoplasm of upper-inner quadrant of left female breast                   | ONCOLOGY                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Malignant neoplasm of upper-inner quadrant of right female breast                  | INTERNAL MEDICINE                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Malignant neoplasm of upper-outer quadrant of left female breast                   | HEMATOLOGY                             | 3                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Malignant neoplasm of upper-outer quadrant of left female breast                   | ONCOLOGY                               | 3                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Malignant neoplasm of upper-outer quadrant of right female breast                  | HEMATOLOGY                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Malignant neoplasm of upper-outer quadrant of right female breast                  | ONCOLOGY                               | 3                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Multiple myeloma in relapse  | ONCOLOGY                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Multiple myeloma in remission  | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Myeloid sarcoma, not having achieved remission                                     | HEMATOLOGY                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Other malignant neuroendocrine tumors  | HEMATOLOGY<br>ONCOLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY                           | Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHEMOTHERAPY DRUG                      | MANTLE CELL LYMPHOMA, UNSPECIFIED SITE   | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHLORZOXAZONE 750 MG TABLET            |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CHORIONIC GONADOTROPIN 10000 UNIT VIAL |  | Endocrinology                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHORIONIC GONADOTROPIN 10000 UNIT VIAL |  | Obstetrics/Gynecology                  | 6                  |                  |                 |  |                          |                        |                      |                 |
| CHORIONIC GONADOTROPIN 10000 UNIT VIAL |  | Other                                  | 12                 |                  |                 |  |                          |                        |                      |                 |
| CHORIONIC GONADOTROPIN 10000 UNIT VIAL |  | Reproductive Endocrinology/Infertility | 2                  |                  |                 |  |                          |                        |                      |                 |
| CHORIONIC GONADOTROPIN/1000U           | FEMALE INFERTILITY OF OTHER ORIGIN   | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHORIONIC GONADOTROPIN/1000U           | FEMALE INFERTILITY, UNSPECIFIED  | Anesthesiology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CHORIONIC GONADOTROPIN/1000U           | FEMALE INFERTILITY, UNSPECIFIED  | Obstetrics/Gynecology                  | 7                  |                  |                 |  |                          |                        |                      |                 |
| CHORIONIC GONADOTROPIN/1000U           | FEMALE INFERTILITY, UNSPECIFIED  | Reproductive Endocrinology/Infertility | 10                 |                  |                 |  |                          |                        |                      |                 |
| CIMZIA 400MG/2ML SYRINGEKIT            |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CIMZIA 400MG/2ML SYRINGEKIT            |  | Rheumatology                           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CIRCUM 28 DAYS OR OLDER                | BALANITIS  | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CIRCUM 28 DAYS OR OLDER                | OTHER DISORDERS OF PREPUCE   | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CIRCUM 28 DAYS OR OLDER                | PHIMOSIS   | Pediatric Urology                      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CIRCUM 28 DAYS OR OLDER                | PHIMOSIS   | Urology                                | 7                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CITALOPRAM HBR 40 MG TABLET      |  | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CITALOPRAM HBR 40 MG TABLET      |  | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| C-LAMINOPLASTY W/GRAFT/PLATE     | SPINAL STENOSIS, CERVICAL REGION                           | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CLARAVIS 30 MG CAPSULE           |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| CLARAVIS 40 MG CAPSULE           |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Claviclectomy; partial           | FRACTURE NASAL BONES INITIAL ENCOUNTER CLOSED FX           | OTOLARYNGOLOGIST (ENT)                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| CLIMARA PRO 45-15/24H PATCH TDWK |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CLOBAZAM 20 MG TABLET            |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CLODERM 0.1 % CREAM(GM)          |  | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| COCH IMP EXT PROC/CONTR RPLC     | SENSORINEURAL HEARING LOSS, BILATERAL                      | Pediatric Otolaryngology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| COCHLEAR DEVICE                  | SENSORINEURAL HEARING LOSS, BILATERAL                      | Pediatric Otolaryngology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| COCHLEAR DEVICE                  | SNSRNRL HEAR LOSS, UNI, L EAR, WITH RSTRCD HEAR CNTRA SIDE | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| COLGN CROSS-LINK CRN MED SEP     | KERATOCONUS, UNSTABLE, LEFT EYE                            | Ophthalmology                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| COLGN CROSS-LINK CRN MED SEP     | KERATOCONUS, UNSTABLE, RIGHT EYE                           | Ophthalmology                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| COLLAGENASE, CLOST HIST INJ      | INDURATION PENIS PLASTICA                                  | Urology                                | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| COLONOSCOPY W/RESECTION          | POLYP OF COLON   | Gastroenterology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMBIPATCH .05-.14/24 PATCH TDSW |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| COMPLETE CBC W/AUTO DIFF WBC     | ANAPHYLACTIC REACTION DUE TO PEANUTS, SUBSEQUENT ENCOUNTER | Pediatrics                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | LONGSTANDING PERSISTENT ATRIAL FIBRILLATION                | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | LONGSTANDING PERSISTENT ATRIAL FIBRILLATION                | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | OTHER PERSISTENT ATRIAL FIBRILLATION                       | Cardiac Electrophysiology              | 5                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | OTHER PERSISTENT ATRIAL FIBRILLATION                       | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | PAROXYSMAL ATRIAL FIBRILLATION                             | Cardiac Electrophysiology              | 4                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | PAROXYSMAL ATRIAL FIBRILLATION                             | Cardiovascular Disease                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | PAROXYSMAL ATRIAL FIBRILLATION                             | Pediatric Cardiology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | UNSPECIFIED ATRIAL FIBRILLATION                            | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | UNSPECIFIED ATRIAL FIBRILLATION                            | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL ABLTJ ATR FIB     | UNSPECIFIED ATRIAL FLUTTER                                 | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL TX SVT            | LEFT VENTRICULAR FAILURE, UNSPECIFIED                      | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL TX SVT            | PRE-EXCITATION SYNDROME                                    | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRE EP EVAL TX SVT            | SUPRAVENTRICULAR TACHYCARDIA                               | Cardiac Electrophysiology              | 3                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| COMPRES EP EVAL TX SVT  | SUPRAVENTRICULAR TACHYCARDIA   | Cardiovascular Disease    | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRES EP EVAL TX SVT  | SUPRAVENTRICULAR TACHYCARDIA   | Pediatrics                | 1                  |                  |                 |  |                          |                        |                      |                 |
| COMPRES EP EVAL TX SVT  | TYPICAL ATRIAL FLUTTER   | Cardiac Electrophysiology | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| COMPRES EP EVAL TX SVT  | UNSPECIFIED ATRIAL FLUTTER   | Cardiovascular Disease    | 2                  |                  |                 |  |                          |                        |                      |                 |
| COMPRES EP EVAL TX VT   | VENTRICULAR TACHYCARDIA  | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) |  | HEMATOLOGY AND ONCOLOGY   | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS  | SLEEP MEDICINE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | CYST OF PANCREAS, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED  | PEDIATRICS                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | DYSPHAGIA UNSPECIFIED  | PULMONARY DISEASES        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED  | ONCOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | ENCOUNTER GEN ADULT MED EXAM W/O ABNORMAL FIND, MALIG NEOPLASM UPPER-INNER QUAD LT FEMALE BREAST, TOBACCO USE                    | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | ENCOUNTER GEN ADULT MED EXAM W/O ABNORMAL FIND, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED                                    | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | ENCOUNTER GEN ADULT MED EXAM W/O ABNORMAL FIND, PERSONAL HISTORY OF NICOTINE DEPENDENCE  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | FAMILY PRACTICE           | 6                  | 4                | 4               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | INTERNAL MEDICINE         | 7                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | PULMONARY DISEASES        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | FEVER UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN, TOBACCO USE   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | HYPERLIPIDEMIA UNSPECIFIED, CHEST PAIN UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | MALIG NEOPLASM UPPER-OUTER QUAD UNS FEMALE BRST  | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | MUCOPURULENT CHRONIC BRONCHITIS, NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES IN REMISSION  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | FAMILY PRACTICE    | 7                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | INTERNAL MEDICINE  | 5                  | 3                | 3               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | PULMONARY DISEASES | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | Rheumatology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS  | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, NICOTINE DEPENDENCE CIGARETTES W/UNS INDUCED D/O  | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED     | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, TOBACCO USE                                       | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE CIGARETTES W/UNS INDUCED D/O  | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE OTH TOBACCO PRODUCT UNCOMP  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE OTH TOBACCO PRODUCT UNCOMP  | PULMONARY DISEASES | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE OTH TOBACCO PRODUCT UNCOMP, PERSONAL HISTORY OF NICOTINE DEPENDENCE         | INTERNAL MEDICINE  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE UNS W/UNS NIC-INDUCED D/O, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | Family Medicine    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | FAMILY PRACTICE    | 7                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | INTERNAL MEDICINE  | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST  | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | INTERNAL MEDICINE  | 2                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, PERSONAL HISTORY OF NICOTINE DEPENDENCE, TOBACCO ABUSE COUNSELING                                     | PULMONARY DISEASES | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | FAMILY PRACTICE    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, DYSPNEA UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | PERSONAL HISTORY OF NICOTINE DEPENDENCE  | FAMILY PRACTICE    | 10                 | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | PERSONAL HISTORY OF NICOTINE DEPENDENCE  | GERIATRICS         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | PERSONAL HISTORY OF NICOTINE DEPENDENCE  | INTERNAL MEDICINE  | 5                  | 5                | 5               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | PERSONAL HISTORY OF NICOTINE DEPENDENCE  | PULMONARY DISEASES | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | PERSONAL HISTORY OF NICOTINE DEPENDENCE  | SURGERY-GENERAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | PERSONAL HISTORY OF NICOTINE DEPENDENCE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS  | FAMILY PRACTICE    | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | PERSONAL HISTORY OF NICOTINE DEPENDENCE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS  | HEMATOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | PERSONAL HISTORY OF NICOTINE DEPENDENCE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS  | PULMONARY DISEASES | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | POLYCYTHEMIA VERA  | HEMATOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | SNORING, SHORTNESS OF BREATH, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS, OBESITY UNSPECIFIED, TYPE 2 DIABETES MELLITUS W/UNS COMPLICATIONS           | PULMONARY DISEASES |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | SOLITARY PULMONARY NODULE  | FAMILY PRACTICE    |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | SOLITARY PULMONARY NODULE  | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | SOLITARY PULMONARY NODULE  | PULMONARY DISEASES |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | SOLITARY PULMONARY NODULE, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | SPLENOMEGALY NOT ELSEWHERE CLASSIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PERSONAL HISTORY OF NICOTINE DEPENDENCE | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | TOBACCO USE   | FAMILY PRACTICE     | 6                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | TOBACCO USE   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | TOBACCO USE   | SLEEP MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | TOBACCO USE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | NURSE PRACTITIONER  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s) | TOBACCO USE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            |   | EMERGENCY MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | , Enterocolitis due to Clostridium difficile, recurrent   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | , Other partial intestinal obstruction  | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS  | SURGERY-GENERAL     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS, GASTRO-ESOPH REFLUX DISEASE WITHOUT ESOPHAGITIS   | GASTROENTEROLOGY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS, LEFT LOWER QUADRANT PAIN  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS, LEFT UPPER QUADRANT PAIN  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS, LEFT UPPER QUADRANT PAIN, NAUSEA, DIVERTICULOSIS PART UNS W/O PERF/ABSC W/O BLEED                 | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS, UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL DISTENSION GASEOUS, UPPER ABDOMINAL PAIN UNSPECIFIED, LEFT LOWER QUADRANT PAIN, PSEUDOCYST OF PANCREAS                | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABDOMINAL TENDERNESS UNSPECIFIED SITE   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s)                            | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, DYSPNEA UNSPECIFIED, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG            | HEMATOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORM FIND ON DX IMAG OTH PARTS DIGESTIVE TRACT   | Gastroenterology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT   | GASTROENTEROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT, HEPATOMEGALY NOT ELSEWHERE CLASSIFIED  | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL LEVELS OF OTHER SERUM ENZYMES, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, ENC F/U EXAM AFTR CMPL TX OTH THAN MALIG NEOPLSM | ONCOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | Abnormal radiologic findings on diagnostic imaging of unspecified kidney   | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL WEIGHT LOSS   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL WEIGHT LOSS, CONSTIPATION UNSPECIFIED   | Rheumatology       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL WEIGHT LOSS, COUGH  | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL WEIGHT LOSS, EARLY SATIETY, NAUSEA WITH VOMITING UNSPECIFIED, GENERALIZED ABDOMINAL PAIN, CHANGE IN BOWEL HABIT   | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL WEIGHT LOSS, EPIGASTRIC PAIN  | GASTROENTEROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ABNORMAL WEIGHT LOSS, NAUSEA WITH VOMITING UNSPECIFIED   | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ACUTE ABDOMEN, PELVIC AND PERINEAL PAIN  | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ACUTE CYSTITIS WITH HEMATURIA  | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ACUTE EMBO THROMB UNS DEEP VEINS RT LOWER EXTREM   | ONCOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ACUTE EMBOLISM & THROMBOSIS UNS VEINS UNS UP EXT, MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG, ESSENTIAL PRIMARY HYPERTENSION, TYPE 2 DIABETES MELLITUS W/UNS COMPLICATIONS             | HEMATOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ADULT FAILURE TO THRIVE  | RHEUMATOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ALCOHOLIC CIRRHOSIS OF LIVER WITHOUT ASCITES   | GASTROENTEROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ANAPLASTIC LCL ALK-POSITIVE NODES MULTIPLE SITES   | ONCOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ANEMIA UNSPECIFIED   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ANEMIA UNSPECIFIED, MALIGNANT NEOPLASM OF CECUM  | HEMATOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty   | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | ARTERITIS UNSPECIFIED   | RHEUMATOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | BARIATRIC SURGERY STATUS  | INTERNAL MEDICINE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED  | ONCOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | BENIGN NEOPLASM OF DESCENDING COLON   | GASTROENTEROLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | BILAT INGUINAL HERNIA W/O OBST/GANGREN NOT RECUR  | SURGERY-GENERAL      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | BURKITT LYMPHOMA LYMPH NODES AXILLA & UPPER LIMB  | ONCOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | BURKITT LYMPHOMA UNSPECIFIED SITE   | ONCOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | CHANGE IN BOWEL HABIT   | FAMILY PRACTICE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | CHANGE IN BOWEL HABIT, GASTRO-ESOPH REFLUX DISEASE WITHOUT ESOPHAGITIS, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS, PERSONAL HISTORY OTH INFECTIOUS & PARASITIC DZ, PERSONAL HISTORY OF COLONIC POLYPS | GASTROENTEROLOGY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | CHRONIC FATIGUE UNSPECIFIED, NON-HODGKIN LYMPHOMA UNS INTRATHORACIC NODES   | FAMILY PRACTICE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | Chronic idiopathic constipation   | GASTROENTEROLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS  | INTERNAL MEDICINE    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS, SMALL CELL B-CELL LYMPHOMA UNSPECIFIED SITE   | HEMATOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | COLOSTOMY STATUS  | SURGERY-COLON/RECTAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | COLOSTOMY STATUS, ILEOSTOMY STATUS,   | SURGERY-COLON/RECTAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | CROHNS DISEASE UNS WITHOUT COMPLICATIONS  | GASTROENTEROLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | CUTANEOUS ABSCESS UNSPECIFIED   | SURGERY-GENERAL      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | CYST OF SPLEEN  | Rheumatology         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIARRHEA UNSPECIFIED  | INTERNAL MEDICINE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIARRHEA UNSPECIFIED, GENERALIZED ABDOMINAL PAIN, NONINFECTIVE GASTROENTERITIS & COLITIS UNS  | FAMILY PRACTICE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIARRHEA UNSPECIFIED, LOWER ABDOMINAL PAIN UNSPECIFIED  | FAMILY PRACTICE      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIARRHEA UNSPECIFIED, OTH SPEC SX & SIGNS INVOLV THE DIGESTV SYS & ABD  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIARRHEA UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIARRHEA UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN, MELENA  | Podiatry                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DISEASE OF INTESTINE UNSPECIFIED  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DISEASE OF SALIVARY GLAND UNSPECIFIED, MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DISORDER THE SKIN & SUBCUTANEOUS TISSUE UNS, PERSONAL HISTORY MALIGNANT NEOPLASM OF THYROID, PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULITIS LG INTEST W/O PERF/ABSC W/O BLEED  | SURGERY-GENERAL         | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULITIS LG INTEST W/PERF & ABSC W/O BLEED  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED   | GASTROENTEROLOGY        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED   | Internal Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED   | Rheumatology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULOSIS LG INTEST W/O PERF/ABSC W/O BLEED  | GASTROENTEROLOGY        | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | DIVERTICULOSIS PART UNS W/O PERF/ABSC W/O BLEED   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ELEVATED CANCER ANTIGEN 125 CA 125  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ELEVATED C-REACTIVE PROTEIN CRP, UNSPECIFIED ABDOMINAL PAIN, DERMATOPOLYMYOSITIS UNS ORGAN INVOLVEMENT UNS                                  | RHEUMATOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION, ILEOSTOMY STATUS,  | SURGERY-COLON/RECTAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ENLARGED LYMPH NODES UNSPECIFIED, SOLITARY PULMONARY NODULE, FOLLICULAR LYMPHOMA UNSPEC UNSPEC SITE   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN   | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN  | GASTROENTEROLOGY        | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN  | INTERNAL MEDICINE       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN, CONSTIPATION UNSPECIFIED  | CARDIOLOGIST            |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN, DIFFUSE LARGE B-CELL LYMPHOMA EXTRANOD SOLID ORG                            | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN, DYSPHAGIA UNSPECIFIED   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN, LEFT LOWER QUADRANT PAIN  | Cardiovascular Disease  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | EPIGASTRIC PAIN, NAUSEA WITH VOMITING UNSPECIFIED, UPPER ABDOMINAL PAIN UNSPECIFIED, Unknown | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | FEVER UNSPECIFIED  | CARDIOVASCULAR DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | FEVER UNSPECIFIED  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | FEVER UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN, TOBACCO USE         | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | FOLLICULAR DISORDER UNSPECIFIED, FOLLICULAR LYMPHOMA UNSPEC LYMPH NODES MX SITES             | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | FOLLICULAR LYMPHOMA GRADE I INTRA-ABDOM NODES  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | FOLLICULAR LYMPHOMA GRADE I UNSPECIFIED SITE   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | FOLLICULAR LYMPHOMA GRADE II EXTRANOD SOLID ORGN   | HEMATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | FOLLICULAR LYMPHOMA UNS NODES ING RGN & LW LIMB  | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | Gastrointestinal stromal tumor of small intestine  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | Gastrointestinal stromal tumor of stomach  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | Gastrointestinal stromal tumor of stomach  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GEN INTRA-ABD & PELVIC SWELLING MASS & LUMP  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GENERALIZED ABDOMINAL PAIN   | FAMILY PRACTICE         | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GENERALIZED ABDOMINAL PAIN   | GASTROENTEROLOGY        | 5                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GENERALIZED ABDOMINAL PAIN   | GENERAL SURGERY         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GENERALIZED ABDOMINAL PAIN   | INTERNAL MEDICINE       |                    | 5                | 5               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GENERALIZED ABDOMINAL PAIN, OTHER SPECIFIED DISEASES OF INTESTINE                            | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | GENERALIZED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN, HEMORRHAGE OF ANUS AND RECTUM   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GENERALIZED ENLARGED LYMPH NODES  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GENERALIZED HYPERHIDROSIS, LOWER ABDOMINAL PAIN UNSPECIFIED, NAUSEA, MELENA   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | GROSS HEMATURIA   | INTERNAL MEDICINE       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HEMATURIA UNSPECIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HEMATURIA UNSPECIFIED   | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HEMATURIA UNSPECIFIED   | SURGERY- UROLOGICAL     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HEMATURIA UNSPECIFIED, OTHER PROTEINURIA, CHRONIC KIDNEY DISEASE STAGE 2 MILD   | NEPHROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HEMATURIA UNSPECIFIED, UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR  | NURSE PRACTITIONER      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HEMOPERITONEUM  | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED, PELVIC AND PERINEAL PAIN, URGENCY OF URINATION, ESSENTIAL PRIMARY HYPERTENSION, FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HIRSUTISM   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | HODGKIN LYMPHOMA UNSPECIFIED UNSPECIFIED SITE   | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ILEOSTOMY STATUS  | SURGERY- COLON/RECTAL   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | INCISIONAL HERNIA WITHOUT OBSTRUCTION/GANGRENE  | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE  | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE  | INTERNAL MEDICINE       |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, COMPLETE OR UNS SPONT ABORTION W/O COMPLICATION,  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, RIGHT UPPER QUADRANT PAIN   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | INTRAHEPATIC BILE DUCT CARCINOMA  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | IRRITABLE BOWEL SYNDROME WITHOUT DIARRHEA  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT ABDOMINAL TENDERNESS   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN   | FAMILY PRACTICE         | 12                 | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN   | GASTROENTEROLOGY        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN   | INTERNAL MEDICINE       | 8                  | 4                | 4               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN   | Neurology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN   | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN   | Obstetrics/Gynecology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN   | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN, CHANGE IN BOWEL HABIT, CONSTIPATION UNSPECIFIED  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN, CONSTIPATION UNSPECIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN, CROHNS DISEASE UNS WITHOUT COMPLICATIONS, DIVERTICULOSIS LG INTEST W/O PERF/ABSC W/O BLEED | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN, DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN, IRRITABLE BOWEL SYNDROME WITHOUT DIARRHEA, HEMORRHAGE OF ANUS AND RECTUM                   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT LOWER QUADRANT PAIN, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM   | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT UPPER QUADRANT PAIN   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT UPPER QUADRANT PAIN   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT UPPER QUADRANT PAIN, LEFT LOWER QUADRANT PAIN   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT UPPER QUADRANT PAIN, LEFT LOWER QUADRANT PAIN, PERIUMBILICAL PAIN   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LEFT UPPER QUADRANT PAIN, PAIN IN UNSPECIFIED KNEE, PAIN IN UNSPECIFIED LOWER LEG                                    | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LIVER TRANSPLANT STATUS  | HEPATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LLQ ABDOMINAL SWELLING MASS & LUMP   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |



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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOCALIZED EDEMA   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOCALIZED EDEMA, MALIGNANT NEOPLASM OF PANCREATIC DUCT  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOCALIZED EDEMA, MALIGNANT NEOPLASM OF PANCREATIC DUCT, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP TRUNK  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOW BACK PAIN, ANORECTAL FISTULA  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOW BACK PAIN, PERFORATION OF INTESTINE NONTRAUMATIC, CUTANEOUS ABSCESS OF ABDOMINAL WALL         | INFECTIOUS DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOWER ABDOMINAL PAIN UNSPECIFIED  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOWER ABDOMINAL PAIN UNSPECIFIED  | GENERAL PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOWER ABDOMINAL PAIN UNSPECIFIED  | INTERNAL MEDICINE       | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOWER ABDOMINAL PAIN UNSPECIFIED, DYSURIA   | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | LOWER ABDOMINAL PAIN UNSPECIFIED, PERSONAL HISTORY OF NON-HODGKIN LYMPHOMAS                       | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIG NEOPLASM CENTRAL PORTION LT FEMALE BREAST   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIG NEOPLASM UPPER-INNER QUAD RT FEMALE BREAST  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIG NEOPLASM UPPER-INNER QUAD RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS               | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST  | ONCOLOGY                | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST, OTHER OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FX  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT CARCINOID TUMOR OF THE ASCENDING COLON   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT CARCINOID TUMOR OF THE ASCENDING COLON, MALIGNANT NEOPLASM OF OVERLAPPING SITES OF COLON                         | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | HEMATOLOGY AND ONCOLOGY | 3                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG   | ONCOLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG                              | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG, OTHER LONG TERM CURRENT DRUG THERAPY                                       | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF AMPULLA OF VATER   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF AMPULLA OF VATER   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ANAL CANAL   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF APPENDIX   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF APPENDIX, NEOPLASM OF UNCERTAIN BEHAVIOR OF APPENDIX, ENCOUNTER OTHER SPECIFIED SPECIAL EXAMINATIONS | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED  | HEMATOLOGY              |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED  | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF CECUM  | HEMATOLOGY              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF COLON UNSPECIFIED  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF COLON UNSPECIFIED  | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF COLON UNSPECIFIED, HEMORRHAGE OF ANUS AND RECTUM   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF DESCENDING COLON   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF DESCENDING COLON   | ONCOLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF DESCENDING COLON, IRON DEFICIENCY ANEMIA UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD | ONCOLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | GYNECOLOGY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | GYNECOLOGY<br>ONCOLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | HEMATOLOGY AND<br>ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | OBSTETRICS &<br>GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | ONCOLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | RADIATION<br>ONCOLOGY      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED  | GASTROENTEROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED  | SURGERY-GENERAL            |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF HEAD FACE AND NECK   | HEMATOLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF LATERAL WALL OF BLADDER  | INTERNAL MEDICINE          |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF LEFT MAIN BRONCHUS   | FAMILY PRACTICE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF LEFT OVARY   | GYNECOLOGY<br>ONCOLOGY     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF LEFT OVARY   | HEMATOLOGY AND<br>ONCOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF LEFT OVARY   | ONCOLOGY                   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF VULVA   | ONCOLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED   | GENERAL PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED   | HEMATOLOGY AND<br>ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED   | NURSE<br>PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED   | ONCOLOGY                   | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PANCREATIC DUCT  | INTERNAL MEDICINE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PROSTATE   | HEMATOLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PROSTATE   | INTERNAL MEDICINE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PROSTATE   | ONCOLOGY                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF PROSTATE   | UROLOGY                   | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF RECTOSIGMOID JUNCTION  | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM   | Cardiac Electrophysiology | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM   | HEMATOLOGY                | 4                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM   | SURGERY-COLON/RECTAL      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM   | SURGERY-GENERAL           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM, SECONDARY MALIGNANT NEOPLASM LIVER & INTRAHEPATIC BD   | RADIOLOGY - DIAGNOSTIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF RIGHT OVARY  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF SIGMOID COLON  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF SIGMOID COLON  | HEMATOLOGY AND ONCOLOGY   | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF SIGMOID COLON, SECONDARY MALIGNANT NEOPLASM OF LEFT LUNG, SECONDARY MALIGNANT NEOPLASM OF RIGHT LUNG | INTERNAL MEDICINE         | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED  | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF THYROID GLAND  | HEMATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF UNSPECIFIED OVARY  | GYNECOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF UTERUS PART UNSPECIFIED  | GYNECOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OF VULVA UNSPECIFIED  | NURSE PRACTITIONER        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST   | SURGERY-PEDIATRIC         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS  | UROLOGY                   | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX   | HEMATOLOGY AND ONCOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER  | ONCOLOGY                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER  | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS   | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | Internal Medicine       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | ONCOLOGY                | 3                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, SECONDARY MALIGNANT NEOPLASM OF SKIN, ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | HEMATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | HEMATOLOGY AND ONCOLOGY | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | ONCOLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS TESTIS UNS DESC/UNDESCEND   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UNS TESTIS UNS DESC/UNDESCEND   | UROLOGY                 | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES   | OTOLARYNGOLOGIST (ENT)  | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; with contrast material(s) | MERKEL CELL CARCINOMA UNSPECIFIED  | ONCOLOGY            | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MERKEL CELL CARCINOMA UNSPECIFIED PART OF FACE   | ONCOLOGY            | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | Microscopic colitis, unspecified   | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | MYELOID SARCOMA NOT HAVING ACHIEVED REMISSION  | HEMATOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | NAUSEA WITH VOMITING UNSPECIFIED, FISTULA OF STOMACH AND DUODENUM  | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | NAUSEA WITH VOMITING UNSPECIFIED, GENERALIZED ABDOMINAL PAIN   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | NAUSEA, LEFT LOWER QUADRANT PAIN, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS  | Internal Medicine   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | NEOPLASM OF UNCERTAIN BEHAVIOR OF APPENDIX   | NURSE PRACTITIONER  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | NODULAR SCLEROSIS CLASS HL NODES HEAD FACE NECK  | ONCOLOGY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | NONFAMILIAL HYPOGAMMAGLOBULINEMIA  | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | NON-HODGKIN LYMPHOMA UNS UNSPECIFIED SITE  | ONCOLOGY            |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | NONINFECTIVE GASTROENTERITIS & COLITIS UNS   | GASTROENTEROLOGY    | 3                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL  | ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP  | SURGERY-GENERAL     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTH SPEC SX & SIGNS INVLV THE DIGESTV SYS & ABD  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTH TYPES NON-HODGKIN LYMPHOMA INTRA-ABD NODES   | HEMATOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER ABNORMAL TUMOR MARKERS   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER AMNESIA, DIZZINESS AND GIDDINESS, SARCOIDOSIS UNSPECIFIED, BRACHIAL PLEXUS DISORDERS, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER BENIGN NEUROENDOCRINE TUMORS   | SURGERY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER BENIGN NEUROENDOCRINE TUMORS, MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG   | ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER DISEASES OF SPLEEN   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER DISEASES OF STOMACH AND DUODENUM   | Gastroenterology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER DISEASES OF STOMACH AND DUODENUM   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER FECAL ABNORMALITIES, LEFT LOWER QUADRANT PAIN  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | Other microscopic hematuria  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, MALIGNANT NEOPLASM OF RECTUM, PERSONAL HX OTH MAL NEO RECTUM RS JUNC & ANUS      | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER SPECIFIED DISEASES OF ANUS AND RECTUM  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER SPECIFIED DISEASES OF INTESTINE  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER SPECIFIED DISEASES OF INTESTINE, BENIGN NEOPLASM OF CECUM  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER SPECIFIED DISORDERS OF BLADDER   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER SPECIFIED DISORDERS OF BONE OTHER SITE   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER, ACUTE CYSTITIS WITHOUT HEMATURIA, MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | PELVIC AND PERINEAL PAIN   | FAMILY PRACTICE         | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | PELVIC AND PERINEAL PAIN   | GENERAL SURGERY         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | PELVIC AND PERINEAL PAIN   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | PELVIC AND PERINEAL PAIN, LEFT LOWER QUADRANT PAIN, OTHER CONSTIPATION   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | PERITONEAL ABSCESS   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | PERIUMBILICAL PAIN   | GASTROENTEROLOGY        | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | PERIUMBILICAL PAIN   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | PERIUMBILICAL PAIN, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; with contrast material(s) | PERSONAL HX OTH MALIG NEOPLASM LARGE INTESTINE                                       | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | REBOUND ABDOMINAL TENDERNESS UNSPECIFIED SITE, MALE ERECTILE DYSFUNCTION UNSPECIFIED | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RHEUMATIC MITRAL VALVE DISEASE UNSPECIFIED   | SURGERY-CARDIOVASCULAR  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT ABDOMINAL TENDERNESS, CHANGE IN BOWEL HABIT                     | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | FAMILY PRACTICE         | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | INTERNAL MEDICINE       | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT LOWER QUADRANT PAIN, UNSPECIFIED ACUTE APPENDICITIS                            | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT UPPER QUADRANT PAIN  | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT UPPER QUADRANT PAIN  | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT UPPER QUADRANT PAIN  | GASTROENTEROLOGY        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT UPPER QUADRANT PAIN  | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RIGHT UPPER QUADRANT PAIN, OTHER CHRONIC PAIN  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | RT LOWER QUADRANT ABDOMINAL SWELLING MASS & LUMP                                     | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY & UNS MALIG NEOPLASM LYMPH NODE UNS  | HEMATOLOGY AND ONCOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD                                     | RADIOLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |



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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, ENC F/U EXAM AFTR CMPL TX OTH THAN MALIG NEOPLSM | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                           | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OF ENDOMETRIUM   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OF PROSTATE  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY                      | HEMATOLOGY              |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                              | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BRAIN, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF UNSPECIFIED SITE, MALIGNANT NEOPLASM OF VULVA UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES, MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SECONDARY MALIGNANT NEOPLASM UNSPECIFIED OVARY, MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SOLITARY PULMONARY NODULE, ANEMIA UNSPECIFIED, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | SOLITARY PULMONARY NODULE, OTH TYPES NON-HODGKIN LYMPHOMA INTRA-ABD NODES   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | TOBACCO USE   | INTERNAL MEDICINE       |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | ULCERATIVE CHRONIC PANCOLITIS W/RECTAL BLEEDING   | GASTROENTEROLOGY        | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | UMBILICAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE  | Pediatrics                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR   | SURGERY-COLON/RECTAL       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | EMERGENCY MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | FAMILY PRACTICE            | 4                  | 5                | 5               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | GASTROENTEROLOGY           | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | GENERAL PRACTICE           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | INTERNAL MEDICINE          | 9                  | 4                | 4               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | PEDIATRIC GASTROENTEROLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | PEDIATRICS                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | PHYSICIAN ASSISTANT        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | RADIOLOGY - DIAGNOSTIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN  | URGENT CARE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, CHANGE IN BOWEL HABIT, FAMILY HISTORY OTHER DISEASES DIGESTIVE SYSTEM, FAMILY HISTORY OF COLONIC POLYPS | GASTROENTEROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, DIVERTICULITIS SM INTEST W/PERF & ABCS W/O BLEED  | INFECTIOUS DISEASES        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, NAUSEA  | GASTROENTEROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, OTHER CHRONIC PAIN  | INTERNAL MEDICINE          | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, OTHER CHRONIC PAIN  | SURGERY-GENERAL            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN  | GASTROENTEROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN  | OBSTETRICS & GYNECOLOGY    |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, RIGHT LOWER QUADRANT PAIN   | FAMILY PRACTICE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN, UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR   | FAMILY PRACTICE            |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED ACUTE APPENDICITIS  | GENERAL PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UNSPECIFIED HYDRONEPHROSIS  | FAMILY PRACTICE            |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; with contrast material(s) | UPPER ABDOMINAL PAIN UNSPECIFIED  | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UPPER ABDOMINAL PAIN UNSPECIFIED  | INTERNAL MEDICINE       | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UPPER ABDOMINAL PAIN UNSPECIFIED, LOWER ABDOMINAL PAIN UNSPECIFIED, Unknown   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | UPPER ABDOMINAL PAIN UNSPECIFIED, Unknown,  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE  | PHYSICIAN ASSISTANT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; with contrast material(s) | VOMITING UNSPECIFIED, DIVERTICULITIS SM INTEST W/PERF & ABSC W/BLEED  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE   | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE   | RADIOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | ABNORMALITY OF PLASMA PROTEIN UNSPECIFIED, ABNORMAL RESULTS OF KIDNEY FUNCTION STUDIES  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | BARIATRIC SURGERY STATUS  | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | BLADDER DISORDER UNSPECIFIED, MALIGNANT NEOPLASM OF PROSTATE  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | BLADDER DISORDER UNSPECIFIED, MALIGNANT NEOPLASM OF PROSTATE, PERSONAL HISTORY OF IRRADIATION, ACQUIRED ABSENCE OF OTHER GENITAL ORGANS | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CALCULUS OF KIDNEY  | FAMILY PRACTICE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CALCULUS OF KIDNEY  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CALCULUS OF KIDNEY  | PHYSICIAN ASSISTANT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CALCULUS OF KIDNEY  | SURGERY- UROLOGICAL     | 3                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CALCULUS OF KIDNEY  | UROLOGY                 | 31                 | 5                | 5               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CALCULUS OF KIDNEY, URINARY TRACT INFECTION SITE NOT SPECIFIED  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CALCULUS OF URETER  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CALCULUS OF URETER  | UROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | CYST OF KIDNEY ACQUIRED   | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | DIARRHEA UNSPECIFIED, MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS, Unknown   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material | DIVERTICULITIS LG INTEST W/O PERF/ABSC W/O BLEED   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | DYSURIA, PERSONAL HISTORY OF URINARY CALCULI   | FAMILY PRACTICE    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | FREQUENCY OF MICTURITION   | UROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | FREQUENCY OF MICTURITION, DYSURIA, URGENCY OF URINATION  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | GROSS HEMATURIA  | FAMILY PRACTICE    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | GROSS HEMATURIA  | UROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | GROSS HEMATURIA, NOCTURIA, URINARY TRACT INFECTION SITE NOT SPECIFIED  | UROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | HEMANGIOMA OF INTRA-ABDOMINAL STRUCTURES, CYST OF KIDNEY ACQUIRED, OTHER SPECIFIED DISEASES OF LIVER   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | HEMATURIA UNSPECIFIED  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | HEMATURIA UNSPECIFIED  | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | HEMATURIA UNSPECIFIED, LEFT LOWER QUADRANT PAIN  | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | HYPERLIPIDEMIA UNSPECIFIED, OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY, VITAMIN D DEFICIENCY UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ANEMIA UNSPECIFIED, NONTOXIC SINGLE THYROID NODULE, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATION | NURSE PRACTITIONER |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | INCISIONAL HERNIA WITHOUT OBSTRUCTION/GANGRENE   | ENDOCRINOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | INCISIONAL HERNIA WITHOUT OBSTRUCTION/GANGRENE   | GENERAL SURGERY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | IRRITABLE BOWEL SYNDROME WITHOUT DIARRHEA  | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | LEFT LOWER QUADRANT PAIN   | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | LEFT LOWER QUADRANT PAIN   | INTERNAL MEDICINE  |                    | 4                | 4               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | LEFT LOWER QUADRANT PAIN   | SURGERY-GENERAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | LEFT LOWER QUADRANT PAIN, RIGHT UPPER QUADRANT PAIN  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | LEFT UPPER QUADRANT PAIN, UNSPECIFIED ABDOMINAL PAIN   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material | LOCALIZED ENLARGED LYMPH NODES, BENIGN ESSENTIAL MICROSCOPIC HEMATURIA, UNSPECIFIED ABDOMINAL PAIN                    | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | LOWER ABDOMINAL PAIN UNSPECIFIED  | FAMILY PRACTICE           |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | MALIGNANT NEOPLASM CORTEX OF RIGHT ADRENAL GLAND  | Cardiac Electrophysiology |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | MALIGNANT NEOPLASM OF ASCENDING COLON   | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED  | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | MALIGNANT NEOPLASM OF PROSTATE  | HEMATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX  | HEMATOLOGY AND ONCOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS  | HEMATOLOGY AND ONCOLOGY   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | MALIGNANT NEOPLASM UNS TESTIS UNS DESC/UNDESCEND  | UROLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | Other microscopic hematuria   | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | OTHER OSSIFICATION OF MUSCLE UNSPECIFIED SITE, UNSPECIFIED ABDOMINAL PAIN, OTHER INTRAOP POSTPROC COMP D/O MSK SYSTEM | Surgery, Vascular         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | OTHER SPECIFIED DISORDERS OF PERITONEUM   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | PAIN IN THORACIC SPINE  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | PELVIC AND PERINEAL PAIN  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | PERIUMBILICAL PAIN  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | PERSONAL HISTORY OF URINARY CALCULI   | UROLOGY                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | POLYCYSTIC KIDNEY ADULT TYPE  | NEPHROLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | RIGHT LOWER QUADRANT PAIN   | INTERNAL MEDICINE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | RIGHT LOWER QUADRANT PAIN   | Pediatrics                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | RIGHT LOWER QUADRANT PAIN   | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | RIGHT UPPER QUADRANT PAIN   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description                                      | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material | SITUS INVERSUS, UMBILICAL HERNIA W/OBSTRUCTION WITHOUT GANGRENE | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | SPONTANEOUS ECCHYMOSES  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR                 | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR                 | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR, Unknown        | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNS ABDOMINAL HERNIA W/O OBSTRUCTION OR GANGRENE                | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | FAMILY PRACTICE         | 15                 | 6                | 6               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | GASTROENTEROLOGY        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | INTERNAL MEDICINE       | 5                  | 3                | 3               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | Neurology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | NURSE PRACTITIONER      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | PHYSICIAN ASSISTANT     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | RADIOLOGY - DIAGNOSTIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | Surgery, Vascular       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN                                      | UROLOGY                 | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, CALCULUS OF KIDNEY, Unknown         | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, CALCULUS OF URETER                  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, CALCULUS OF URETER                  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, CALCULUS OF URETER, Unknown         | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, GROSS HEMATURIA                     | NEPHROLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED               | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED               | FAMILY PRACTICE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED               | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED               | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED, ANGIONEUROTIC EDEMA INITIAL ENCOUNTER, PERSONAL HISTORY OF URINARY CALCULI   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED ABDOMINAL PAIN, LEFT LOWER QUADRANT PAIN, Unknown   | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED ABDOMINAL PAIN, PERSONAL HISTORY OF URINARY CALCULI   | FAMILY PRACTICE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED ABDOMINAL PAIN, RIGHT UPPER QUADRANT PAIN, POLYCYSTIC OVARIAN SYNDROME  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED ABDOMINAL PAIN, Unknown   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED ABDOMINAL PAIN, Unknown   | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED HYDRONEPHROSIS  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED HYDRONEPHROSIS  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED HYDRONEPHROSIS, CALCULUS OF KIDNEY  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED RENAL COLIC   | UROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UNSPECIFIED RENAL COLIC, PERSONAL HISTORY OF URINARY CALCULI  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | UPPER ABDOMINAL PAIN UNSPECIFIED, PAIN IN THORACIC SPINE  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material  | URINARY TRACT INFECTION SITE NOT SPECIFIED  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ABDOMINAL DISTENSION GASEOUS  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ABDOMINAL DISTENSION GASEOUS, RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN   | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ABDOMINAL DISTENSION GASEOUS, UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED                                | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ABNORMAL WEIGHT LOSS  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ABNORMAL WEIGHT LOSS, EPIGASTRIC PAIN, ABDOMINAL DISTENSION GASEOUS, OTHER FECAL ABNORMALITIES                       | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ABNORMAL WEIGHT LOSS, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, ENCOUNTER SCREENING MALIGNANT NEOPLASM OF COLON | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ACUTE ABDOMEN, PELVIC AND PERINEAL PAIN  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ACUTE CYSTITIS WITHOUT HEMATURIA   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | Acute pancreatitis without necrosis or infection, unspecified  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ALCOHOLIC CIRRHOSIS OF LIVER WITHOUT ASCITES   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | Asymptomatic microscopic hematuria   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | BENIGN NEOPLASM OF RIGHT KIDNEY  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | BENIGN NEOPLASM OF UNSPECIFIED KIDNEY  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | BILAT INGUINAL HERNIA W/O OBST/GANGREN NOT RECUR   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | CALCULUS OF KIDNEY   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | CHRONIC HEPATITIS UNSPECIFIED  | PHYSICIAN ASSISTANT     |                    | 1                | 1               |  |                          |                        |                      |                 |



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|---|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | COLOSTOMY STATUS, ILEOSTOMY STATUS,  | SURGERY-COLON/RECTAL    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | CONGENITAL RENAL CYST UNSPECIFIED  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | CYST OF KIDNEY ACQUIRED  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | CYST OF KIDNEY ACQUIRED  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | CYST OF KIDNEY ACQUIRED  | UROLOGY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | CYSTIC DISEASE OF LIVER  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | DIARRHEA UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN, PORTAL VEIN THROMBOSIS, UNSPECIFIED CIRRHOSIS OF LIVER | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | DISORDER OF ADRENAL GLAND UNSPECIFIED  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED, ABSCESS OF LIVER  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | DIVERTICULOSIS LG INTEST W/O PERF/ABSC W/O BLEED   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ELEVATED C-REACTIVE PROTEIN CRP, DERMATOPOLYMYOSITIS UNS ORGAN INVOLVEMENT UNS                           | RHEUMATOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ENDOMETRIOSIS UNSPECIFIED, LEIOMYOMA OF UTERUS UNSPECIFIED  | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ENLARGED PROSTATE W/O LOWER URINARY TRACT SX  | UROLOGY            | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | EPIGASTRIC PAIN   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | EPIGASTRIC PAIN   | GASTROENTEROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | EPIGASTRIC PAIN, NAUSEA WITH VOMITING UNSPECIFIED, UPPER ABDOMINAL PAIN UNSPECIFIED, Unknown                      | NURSE PRACTITIONER |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | EPIGASTRIC PAIN, OTH SPEC SX & SIGNS INVLV THE DIGESTV SYS & ABD, BENIGN NEOPLASM CNCTV & OTH SOFT TISSUE ABDOMEN | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ERUCTATION, ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, DIVERTICULOSIS LG INTEST W/O PERF/ABSC W/O BLEED    | GASTROENTEROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | ESSENTIAL PRIMARY HYPERTENSION  | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | FOLLICULAR LYMPHOMA GRADE I INTRA-ABDOM NODES   | ONCOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GENERALIZED ABDOMINAL PAIN  | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GENERALIZED ABDOMINAL PAIN  | GASTROENTEROLOGY   |                    | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GENERALIZED ABDOMINAL PAIN  | NURSE PRACTITIONER |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GENERALIZED ABDOMINAL PAIN, GROSS HEMATURIA   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GENERALIZED ABDOMINAL PAIN, GROSS HEMATURIA   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GENETIC SUSCEPTIBILITY OTHER MALIGNANT NEOPLASM, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST | UROLOGY             |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GROSS HEMATURIA   | FAMILY PRACTICE     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GROSS HEMATURIA   | INTERNAL MEDICINE   | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GROSS HEMATURIA   | PCP/Pediatrician    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GROSS HEMATURIA   | SURGERY- UROLOGICAL |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GROSS HEMATURIA   | UROLOGY             | 12                 | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GROSS HEMATURIA, CALCULUS OF KIDNEY   | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GROSS HEMATURIA, PERSONAL HISTORY OF URINARY TRACT INFECTIONS                                     | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | GROSS HEMATURIA, Unknown  | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | HEMATURIA UNSPECIFIED   | FAMILY PRACTICE     | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty         | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | HEMATURIA UNSPECIFIED  | INTERNAL MEDICINE          | 4                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | HEMATURIA UNSPECIFIED  | SURGERY- UROLOGICAL        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | HEMATURIA UNSPECIFIED  | UROLOGY                    | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | HEMATURIA UNSPECIFIED, UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR         | NURSE PRACTITIONER         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | HYDRONEPHROSIS W/RENAL & URETRL CALCULOUS OBST                                 | UROLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE                               | OBSTETRICS & GYNECOLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, CHRONIC SALPINGITIS, Unknown | REPRODUCTIVE ENDOCRINOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LEFT LOWER QUADRANT PAIN   | CARDIOLOGIST               |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LEFT LOWER QUADRANT PAIN   | FAMILY PRACTICE            | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LEFT LOWER QUADRANT PAIN, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM     | GENERAL SURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LEFT UPPER QUADRANT PAIN   | GASTROENTEROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LEFT UPPER QUADRANT PAIN, UNSPECIFIED ABDOMINAL PAIN                           | ANESTHESIOLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LEIOMYOMA OF UTERUS UNSPECIFIED   | GYNECOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LOCALIZED EDEMA, MALIGNANT NEOPLASM OF PANCREATIC DUCT, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LOCALIZED SWELLING MASS AND LUMP TRUNK  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LOW BACK PAIN   | CARDIOVASCULAR DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | LOWER ABDOMINAL PAIN UNSPECIFIED  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM LT TESTIS UNS DESC/UNDESCEND   | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF ANAL CANAL  | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF ANTERIOR WALL OF BLADDER  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF ENDOMETRIUM  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF ENDOMETRIUM  | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD  | ONCOLOGY                | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF LATERAL WALL OF BLADDER  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED   | Oncology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF PANCREATIC DUCT  | Oncology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF PROSTATE   | UROLOGY                 |                    | 4                | 4               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF RECTUM, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD   | RADIOLOGY - DIAGNOSTIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM OF UNSPECIFIED OVARY  | GYNECOLOGY ONCOLOGY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST  | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | HEMATOLOGY AND ONCOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES         | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | NAUSEA WITH VOMITING UNSPECIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | NEOPLASM OF UNCERTAIN BEHAVIOR OTHER SPEC SITES  | Anesthesiology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | NON-HODGKIN LYMPHOMA UNS EXTRANODL & SOLID ORGAN   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | NON-HODGKIN LYMPHOMA UNS UNSPECIFIED SITE  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | NONINFECTIVE GASTROENTERITIS & COLITIS UNS   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTH CONGEN MALFORMATION PANCREAS PANCREATIC DUCT, OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTH SPEC SX & SIGNS INVLV THE DIGESTV SYS & ABD, URINARY TRACT INFECTION SITE NOT SPECIFIED      | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER CHRONIC CYSTITIS WITH HEMATURIA  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER CHRONIC PANCREATITIS   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER DISEASES OF SPLEEN   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | Other microscopic hematuria   | INTERNAL MEDICINE   | 3                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | Other microscopic hematuria   | PHYSICIAN ASSISTANT | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | Other microscopic hematuria   | UROLOGY             | 9                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, MALIGNANT NEOPLASM OF RECTUM, PERSONAL HX OTH MAL NEO RECTUM RS JUNC & ANUS | SURGERY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER OBSTRUCTIVE DEFECTS RENAL PELVIS & URETER   | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY, HEMATURIA UNSPECIFIED   | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | Other specified diseases of pancreas  | SURGERY-GENERAL     |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND  | Family Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER SPECIFIED DISORDERS OF BLADDER  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER  | UROLOGY             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER, BLADDER DISORDER UNSPECIFIED  | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | PELVIC AND PERINEAL PAIN, POLYCYSTIC OVARIAN SYNDROME                             | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | PERSONAL HISTORY MALIGNANT NEOPLASM OF BLADDER                                    | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | PRIMARY RESPIRATORY TUBERCULOSIS  | HEPATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | RIGHT LOWER QUADRANT ABDOMINAL TENDERNESS, CHANGE IN BOWEL HABIT                  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | RIGHT LOWER QUADRANT PAIN   | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN                                     | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | RIGHT UPPER QUADRANT PAIN   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | RIGHT UPPER QUADRANT PAIN, RIGHT LOWER QUADRANT PAIN, CYST OF KIDNEY ACQUIRED     | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | SCLEROSING MESENTERITIS   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD                                  | RADIOLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | SOLITARY PULMONARY NODULE, COUGH, UNSPECIFIED ABNORMAL FINDINGS IN URINE, Unknown | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | SPONTANEOUS ECCHYMOSES  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN   | FAMILY PRACTICE         | 1                  | 6                | 6               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN   | INTERNAL MEDICINE       | 3                  | 6                | 6               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN   | PHYSICIAN ASSISTANT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN, MALIGNANT NEOPLASM OF PROSTATE   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN   | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN, MELENA, HEMORRHAGE OF ANUS AND RECTUM, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN, RIGHT UPPER QUADRANT PAIN, POLYCYSTIC OVARIAN SYNDROME   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED ABDOMINAL PAIN, Unknown  | UROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions | UNSPECIFIED HYDRONEPHROSIS   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions                          | UNSPECIFIED HYDRONEPHROSIS                       | INTERNAL MEDICINE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions                          | UNSPECIFIED HYDRONEPHROSIS                       | UROLOGY                      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions                          | UPPER ABDOMINAL PAIN UNSPECIFIED                 | GASTROENTEROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions                          | URINARY TRACT INFECTION SITE NOT SPECIFIED       | NURSE PRACTITIONER           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions                          | URINARY TRACT INFECTION SITE NOT SPECIFIED       | UROLOGY                      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Computed tomography; abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions                          | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE   | FAMILY PRACTICE              |                    | 1                | 1               |  |                          |                        |                      |                 |
| Computer aided detection, including computer algorithm analysis of breast mri image data for lesion detection/characterization, pharmacokinetic analysis, with further physician review for interpretation | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST   | SURGEON - BREAST             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CONCERTA 36 MG TAB ER 24   |  | PCP/Pediatrician             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CONSTRUCT BOWEL BLADDER  | MALIGNANT NEOPLASM OF BLADDER, UNSPECIFIED       | Urology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE (CPAP)  | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)      | Respiratory Therapy          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CONTOUR NEXT TEST STRIP STRIP  |  | Endocrinology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CONTOUR NEXT TEST STRIP STRIP  |  | Endocrinology And Metabolism | 1                  |                  |                 |  |                          |                        |                      |                 |
| CONTOUR NEXT TEST STRIP STRIP  |  | Other                        | 3                  | 4                | 4               |  |                          |                        |                      |                 |
| CONTOUR NEXT TEST STRIP STRIP  |  | PCP/Pediatrician             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CONTOUR TEST STRIP STRIP   |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CONTRAVE 8 MG-90 MG TABLET ER  |  | Other                        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CONTRAVE 8 MG-90 MG TABLET ER  |  | PCP/Pediatrician             | 2                  |                  |                 |  |                          |                        |                      |                 |
| Conversion of previous hip surgery to total hip arthroplasty, with or without autograft or allograft   | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT HIP      | SURGERY- ORTHOPEDIC          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Coracoacromial ligament release, with or without acromioplasty   | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT | HAND SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CORDRAN 4MCG/SQ CM MED. TAPE   |  | Other                        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CORE BUILDUP, INCLUDING ANY PINS WHEN REQUIRED   | CRACKED TOOTH                                    | Family Medicine              |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description                 | Diagnosis Code Description   | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CORLANOR 5 MG TABLET                       |  | Other               | 4                  |                  |                 |  |                          |                        |                      |                 |
| CORTICOTROPIN INJECTION                    | RHEUMATOID ARTHRITIS W/O RHEUMATOID FACTOR, MULTIPLE SITES                                     | Rheumatology        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CORTIFOAM 10 % FOAM/APPL                   |  | PCP/Pediatrician    |                    | 1                | 1               |  |                          |                        |                      |                 |
| COSENTYX                                   | Arthropathic psoriasis, unspecified  | Rheumatology        |                    |                  |                 |  |                          | 1                      |                      |                 |
| COSENTYX                                   | Other seborrheic keratosis   | Dermatology         |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX                                   | PLAQUE PSORIASIS   | Chiropractic        |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX                                   | PLAQUE PSORIASIS   | Dermatology         |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX                                   | Psoriasis vulgaris   | Dermatology         |                    |                  |                 |  |                          | 1                      | 1                    |                 |
| COSENTYX                                   | Psoriasis vulgaris   | Other               |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX                                   | Psoriasis vulgaris   | Physician Assistant |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX                                   | Psoriatic arthritis (PsA)  | Rheumatology        |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX (2 SYRINGES) 150 MG/ML SYRINGE    |  | Dermatology         | 3                  |                  |                 |  |                          |                        |                      |                 |
| COSENTYX (2 SYRINGES) 150 MG/ML SYRINGE    |  | Other               |                    | 4                | 4               |  |                          |                        |                      |                 |
| COSENTYX PEN                               | Psoriasis vulgaris   | Dermatology         |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX PEN                               | Psoriasis vulgaris   | Gastroenterology    |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX PEN                               | Psoriasis vulgaris   | Physician Assistant |                    |                  |                 |  |                          |                        | 1                    |                 |
| COSENTYX PEN (2 PENS) 150 MG/ML PEN INJCTR |  | Dermatology         | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| COSENTYX PEN (2 PENS) 150 MG/ML PEN INJCTR |  | Other               | 13                 | 15               | 15              |  |                          |                        |                      |                 |
| COSENTYX PEN (2 PENS) 150 MG/ML PEN INJCTR |  | PCP/Pediatrician    | 4                  |                  |                 |  |                          |                        |                      |                 |
| COSENTYX PEN (2 PENS) 150 MG/ML PEN INJCTR |  | Rheumatology        | 2                  |                  |                 |  |                          |                        |                      |                 |
| COSENTYX PEN 150 MG/ML PEN INJCTR          |  | Other               | 3                  |                  |                 |  |                          |                        |                      |                 |
| COSENTYX PEN 150 MG/ML PEN INJCTR          |  | PCP/Pediatrician    |                    | 1                | 1               |  |                          |                        |                      |                 |
| COSENTYX PEN 150 MG/ML PEN INJCTR          |  | Rheumatology        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| COSENTYX SYRINGE 150 MG/ML SYRINGE         |  | Rheumatology        | 2                  |                  |                 |  |                          |                        |                      |                 |
| COTEMPLA XR-ODT 25.9 MG TAB RAP BP         |  | Other               |                    | 2                | 2               |  |                          |                        |                      |                 |
| CPTR-ASST DIR MS PX                        | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT HIP   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| CREON 12K-38K-60 CAPSULE DR                |  | Other               | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| CREON 24-76-120K CAPSULE DR                |  | Other               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CREON 36K-114K CAPSULE DR                  |  | Gastroenterology    |                    | 2                | 2               |  |                          |                        |                      |                 |
| CREON 36K-114K CAPSULE DR                  |  | Other               | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| CRESEMBA 186 MG CAPSULE                    |  | Hematology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CRESEMBA 186 MG CAPSULE                    |  | Oncology/Radiation  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CRESEMBA 186 MG CAPSULE                    |  | Other               | 2                  |                  |                 |  |                          |                        |                      |                 |
| CRESTOR 20 MG TABLET                       |  | Internal Medicine   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CROWN - PORCELAIN/CERAMIC                  | CRACKED TOOTH  | Family Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s)      | ABDOMINAL DISTENSION GASEOUS, GASTRODUODENITIS UNSPECIFIED WITHOUT BLEEDING                    | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s)      | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, PERSONAL HISTORY OF URINARY TRACT INFECTIONS | UROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s)      | ABNORMAL WEIGHT LOSS, EPIGASTRIC PAIN  | GASTROENTEROLOGY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s)      | ABNORMAL WEIGHT LOSS, EPIGASTRIC PAIN, NAUSEA  | GASTROENTEROLOGY    |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description            | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---------------------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT ABDOMEN; with contrast material(s) | ABNORMAL WEIGHT LOSS, FUNCTIONAL DYSPEPSIA  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | ABNORMAL WEIGHT LOSS, UNSPECIFIED ABDOMINAL PAIN  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | Acute pancreatitis with uninfected necrosis, unspecified  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | ALCOHOLIC CIRRHOSIS OF LIVER WITHOUT ASCITES  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | EARLY SATIETY, NAUSEA, Unknown  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | EPIGASTRIC PAIN   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | EPIGASTRIC PAIN   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | EPIGASTRIC PAIN, DYSPHAGIA UNSPECIFIED  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED, GENERALIZED ABDOMINAL PAIN   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | HYPERGLYCEMIA UNSPECIFIED   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | LIVER DISEASE UNSPECIFIED   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG  | ONCOLOGY                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG, OTHER LONG TERM CURRENT DRUG THERAPY  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM OF AMPULLA OF VATER  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM OF SIGMOID COLON, SECONDARY MALIGNANT NEOPLASM OF LEFT LUNG, SECONDARY MALIGNANT NEOPLASM OF RIGHT LUNG                      | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM OVERLAP SITE LT BRONCH & LUNG  | ONCOLOGY                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST, ENCOUNTER SCREENING MALIGNANT NEOPLASM OF COLON | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---------------------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT ABDOMEN; with contrast material(s) | MALIGNANT NEOPLASM UPPER LOBE UNS BRONCHUS/LUNG  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | NAUSEA WITH VOMITING UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN                           | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | OTHER DISEASES OF SPLEEN   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | Other specified diseases of pancreas   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | RIGHT UPPER QUADRANT PAIN  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | RIGHT UPPER QUADRANT PAIN, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM, Unknown   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | RUQ ABDOMINAL SWELLING MASS & LUMP   | GENERAL PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD                                       | RADIOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | SPLENOMEGALY NOT ELSEWHERE CLASSIFIED, CYST OF SPLEEN                                  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | UNSPECIFIED ABDOMINAL PAIN   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | UPPER ABDOMINAL PAIN UNSPECIFIED   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; with contrast material(s) | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | ABDOMINAL DISTENSION GASEOUS, LEFT UPPER QUADRANT PAIN                                 | FAMILY PRACTICE         |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | CONN'S SYNDROME  | CARDIOLOGIST            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE                                       | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | OTH SPEC SX & SIGNS INVOLV THE DIGESTV SYS & ABD                                       | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | OTHER DISEASES OF SPLEEN   | RADIOLOGY - DIAGNOSTIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND   | ENDOCRINOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | RIGHT UPPER QUADRANT PAIN, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM, Unknown   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | UNSPECIFIED ABDOMINAL PAIN   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | UNSPECIFIED ABDOMINAL PAIN   | INTERNAL MEDICINE       |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | UPPER ABDOMINAL PAIN UNSPECIFIED   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | ABNORM FIND ON DX IMAG OTH PARTS DIGESTIVE TRACT  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | ABNORMAL WEIGHT LOSS, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS                              | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | AGE-RELATED OSTEOPOROSIS W/O CURRNT PATH FX   | SURGERY-NEUROLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | ANOREXIA, Unknown   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | BENIGN NEOPLASM OF PITUITARY GLAND  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | CYST OF KIDNEY ACQUIRED   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | CYST OF KIDNEY ACQUIRED   | UROLOGY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | CYST OF PANCREAS  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | DISEASE OF PANCREAS UNSPECIFIED   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | DISORDER OF ADRENAL GLAND UNSPECIFIED   | ENDOCRINOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | DISORDER OF ADRENAL GLAND UNSPECIFIED   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | EPIGASTRIC SWELLING MASS OR LUMP, CHRONIC FRONTAL SINUSITIS                                       | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | ESSENTIAL PRIMARY HYPERTENSION  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | GENETIC SUSCEPTIBILITY OTHER MALIGNANT NEOPLASM, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | HIRSUTISM   | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | INF INFLAM RXN OTH INTRL PROS DEVC GFT INIT ENC   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | LEFT UPPER QUADRANT PAIN  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | LIVER DISEASE UNSPECIFIED, FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED                         | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS  | UROLOGY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER BENIGN NEUROENDOCRINE TUMORS  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER DISEASES OF SPLEEN  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER FATIGUE, OTHER SPECIFIED DISORDERS OF ADRENAL GLAND, CYST OF KIDNEY ACQUIRED            | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISEASES OF LIVER   | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISEASES OF LIVER   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND  | ENDOCRINOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND  | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND  | SURGERY- UROLOGICAL     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER  | UROLOGY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISORDERS OF PERITONEUM   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | PORTAL HYPERTENSION, ALCOHOLIC CIRRHOSIS OF LIVER WITHOUT ASCITES                             | RADIOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | PORTAL VEIN THROMBOSIS, ACUTE EMBOLISM & THROMBOSIS OTHER SPEC VEINS, Unknown                 | GENERAL SURGERY         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | SPLENOMEGALY NOT ELSEWHERE CLASSIFIED, CYST OF SPLEEN   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | UNSPECIFIED ABDOMINAL PAIN  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | UNSPECIFIED ABDOMINAL PAIN  | RADIOLOGY - DIAGNOSTIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | UNSPECIFIED ABDOMINAL PAIN, PSEUDOCYST OF PANCREAS, OTHER CHRONIC PANCREATITIS                | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | UNSPECIFIED ABDOMINAL PAIN, Unknown   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT ABDOMEN; without contrast material, followed by contrast material(s) and further sections | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE  | PHYSICIAN ASSISTANT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Bone Mineral Density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)     | ENCOUNTER FOR SCREENING FOR OSTEOPOROSIS  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; with contrast material  | RADICULOPATHY CERVICAL REGION   | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |



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|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT Cervical Spine; with contrast material    | RADICULOPATHY CERVICAL REGION, POSTLAMINECTOMY SYNDROME NEC   | SURGERY-NEUROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; with contrast material    | SPONDYLOLISTHESIS LUMBAR REGION, SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION, UNSTABLE BURST FX 1ST LUMB VERT INIT ENC CLOS FX | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | , Spinal stenosis, lumbar region with neurogenic claudication   | SURGERY-NEUROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | ANESTHESIA OF SKIN  | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | CERVICALGIA   | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | CERVICALGIA   | SURGERY-NEUROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | CERVICALGIA   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | CERVICALGIA, ARTHRODESIS STATUS   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | CERVICALGIA, OTH NONDSPL FX 7TH CERV VERT INITIAL ENC CLOS FX   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | CERVICALGIA, UNS INJURY AT UNS LEVEL CERV SPINAL CORD SEQUELA   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | COMPRESSION OF BRAIN, SYRINGOMYELIA AND SYRINGOBULBIA   | SURGERY-NEUROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION  | PHYSICIAN ASSISTANT |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | PAIN IN THORACIC SPINE, CERVICALGIA   | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | PAIN IN THORACIC SPINE, CERVICALGIA   | SURGERY-NEUROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | PARESTHESIA OF SKIN   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | PARESTHESIA OF SKIN   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | RADICULOPATHY CERVICAL REGION, CERVICALGIA  | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | RADICULOPATHY CERVICAL REGION, CERVICALGIA  | SURGERY-NEUROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | RADICULOPATHY CERVICAL REGION, UNS DSPL FX 6TH CERV VERT INITIAL ENC CLOS FX  | ORTHOPEDIC SURGERY  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | RADICULOPATHY OCCIPITO-ATLANTO-AXIAL REGION, CERVICALGIA  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | RADICULOPATHY SITE UNSPECIFIED, PARESTHESIA OF SKIN   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | SPINAL STENOSIS CERVICAL REGION   | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | SPINAL STENOSIS CERVICAL REGION   | Rheumatology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | SPINAL STENOSIS CERVICAL REGION   | SURGERY-NEUROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | SPINAL STENOSIS CERVICAL REGION, ANKYLOSING HYPEROSTOSIS SITE UNSPECIFIED   | SURGERY-NEUROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|--------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT Cervical Spine; without contrast material  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN   | PAIN MANAGEMENT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material  | SYNCOPE AND COLLAPSE   | NEUROLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material, followed by contrast material(s) and further sections | DORSALGIA UNSPECIFIED, PAIN IN RIGHT SHOULDER  | PHYSICIAN ASSISTANT            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Cervical Spine; without contrast material, followed by contrast material(s) and further sections | RADICULOPATHY CERVICAL REGION  | FAMILY PRACTICE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  |  | Family Medicine                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  |  | FAMILY PRACTICE                | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  |  | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, DYSPNEA UNSPECIFIED, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | HEMATOLOGY                     |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST   | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ABNORMAL LEVELS OF OTHER SERUM ENZYMES, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, ENC F/U EXAM AFTR Cmpl TX OTH THAN MALIG NEOPLSM | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ABNORMAL RESULTS FUNCTION STUDIES OTH ORGN & SYS   | CARDIOLOGY & INTERNAL MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ABNORMAL RESULTS FUNCTION STUDIES OTH ORGN & SYS, MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG  | HEMATOLOGY                     | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ABNORMAL WEIGHT LOSS, CONSTIPATION UNSPECIFIED   | Rheumatology                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ABNORMAL WEIGHT LOSS, COUGH  | FAMILY PRACTICE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ABNORMAL WEIGHT LOSS, SHORTNESS OF BREATH  | HEMATOLOGY AND ONCOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ACUTE EMBO THROMB UNS DEEP VEINS RT LOWER EXTREM   | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ACUTE EMBOLISM & THROMBOSIS UNS VEINS UNS UP EXT, MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG, ESSENTIAL PRIMARY HYPERTENSION, TYPE 2 DIABETES MELLITUS W/UNS COMPLICATIONS             | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ADULT FAILURE TO THRIVE  | RHEUMATOLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ANAPLASTIC LCL ALK-POSITIVE NODES MULTIPLE SITES   | ONCOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ANEMIA UNSPECIFIED, MALIGNANT NEOPLASM OF CECUM  | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | ARTERITIS UNSPECIFIED  | RHEUMATOLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s)  | BENIGN CARCINOID TUMOR OF THE BRONCHUS AND LUNG  | FAMILY PRACTICE                |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | BENIGN LIPOMATOUS NEOPLASM SKIN & SUBQ TRUNK  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED  | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | BENIGN NEOPLASM OF LEFT ADRENAL GLAND   | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | BURKITT LYMPHOMA LYMPH NODES AXILLA & UPPER LIMB  | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | BURKITT LYMPHOMA UNSPECIFIED SITE   | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | CHEST PAIN UNSPECIFIED  | INTERNAL MED/GASTROENTEROLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | CHEST PAIN UNSPECIFIED, FIBROMYALGIA  | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | CHRONIC FATIGUE UNSPECIFIED, NON-HODGKIN LYMPHOMA UNS INTRATHORACIC NODES   | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS  | HEMATOLOGY AND ONCOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS, SMALL CELL B-CELL LYMPHOMA UNSPECIFIED SITE   | HEMATOLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS   | PULMONARY DISEASES            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS, PANLOBULAR EMPHYSEMA, COMP OTH ARTERY FOLLOWING PROC NEC INITIAL ENC                             | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | COMPRESSION OF VEIN   | CARDIOVASCULAR DISEASE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | COUGH   | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | COUGH   | INTERNAL MEDICINE             | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | COUGH, MALIGNANT NEOPLASM OF LEFT MAIN BRONCHUS   | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | COUGH, MALIGNANT NEOPLASM OF RECTUM   | HEMATOLOGY                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | COUGH, RHEUMATOID ARTHRITIS UNSPECIFIED   | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | COUGH, SHORTNESS OF BREATH  | NURSE PRACTITIONER            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | COVID-19  | PULMONARY DISEASES            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | CYSTIC FIBROSIS UNSPECIFIED   | PEDIATRIC PULMONOLOGIST       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | DISEASE OF SALIVARY GLAND UNSPECIFIED, MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                  | HEMATOLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | DISORDER THE SKIN & SUBCUTANEOUS TISSUE UNS, PERSONAL HISTORY MALIGNANT NEOPLASM OF THYROID, PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | DYSPNEA UNSPECIFIED   | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |

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| CT CHEST (thorax); with contrast material(s) | ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | ENLARGED LYMPH NODES UNSPECIFIED, SOLITARY PULMONARY NODULE, FOLLICULAR LYMPHOMA UNSPEC SITE | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | EPIGASTRIC PAIN, DIFFUSE LARGE B-CELL LYMPHOMA EXTRANOD SOLID ORG                            | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | FEVER UNSPECIFIED  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | FOLLICULAR DISORDER UNSPECIFIED, FOLLICULAR LYMPHOMA UNSPEC LYMPH NODES MX SITES             | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | FOLLICULAR LYMPHOMA GRADE I INTRA-ABDOM NODES  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | FOLLICULAR LYMPHOMA GRADE I UNSPECIFIED SITE   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | FOLLICULAR LYMPHOMA GRADE II EXTRANOD SOLID ORGN   | HEMATOLOGY              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | FOLLICULAR LYMPHOMA UNS NODES ING RGN & LW LIMB  | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | FRACTURE ONE RIB RIGHT INITIAL ENCINTR CLOSED FX   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | Gastrointestinal stromal tumor of small intestine  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | Gastrointestinal stromal tumor of stomach  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | GENERALIZED ENLARGED LYMPH NODES   | CARDIOVASCULAR DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | GENERALIZED ENLARGED LYMPH NODES   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | HEMOPTYSIS   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | HODGKIN LYMPHOMA UNSPECIFIED UNSPECIFIED SITE  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | INTRAHEPATIC BILE DUCT CARCINOMA   | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LIVER CELL CARCINOMA   | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED EDEMA, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY                                   | HEMATOLOGY AND ONCOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES, ADVERSE EFFECT OTH VIRAL VACCINES INITIAL ENCINTR            | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description                   | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES, BRONCHIECTASIS UNCOMPLICATED, SARCOIDOSIS UNSPECIFIED                                 | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED SWELLING MASS & LUMP RIGHT UPPER LIMB   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK   | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP TRUNK, MALIGNANT NEOPLASM OF HEAD OF PANCREAS, MALIGNANT NEOPLASM OF PANCREATIC DUCT | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIG NEOPLASM CENTRAL PORTION LT FEMALE BREAST   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST                      | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIG NEOPLASM UPPER-INNER QUAD RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                                   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST  | ONCOLOGY                | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST, OTHER OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FX                      | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT CARCINOID TUMOR OF THE ASCENDING COLON  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT CARCINOID TUMOR OF THE ASCENDING COLON, MALIGNANT NEOPLASM OF OVERLAPPING SITES OF COLON                    | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS   | HEMATOLOGY AND ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG  | ONCOLOGY                | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG                         | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM LOWER LOBE RT BRONCHUS/LUNG  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF AMPULLA OF VATER  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ANAL CANAL  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ANAL CANAL  | RADIATION ONCOLOGY      | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF APPENDIX, NEOPLASM OF UNCERTAIN BEHAVIOR OF APPENDIX, ENCOUNTER OTHER SPECIFIED SPECIAL EXAMINATIONS               | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED  | HEMATOLOGY              |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED  | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF CECUM  | HEMATOLOGY              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF COLON UNSPECIFIED  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF COLON UNSPECIFIED  | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF CORPUS UTERI UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF DESCENDING COLON   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF DESCENDING COLON   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF DESCENDING COLON, IRON DEFICIENCY ANEMIA UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD             | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | GYNECOLOGY              | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | GYNECOLOGY ONCOLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | HEMATOLOGY AND ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ENDOMETRIUM  | RADIATION ONCOLOGY      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED  | GASTROENTEROLOGY        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD  | ONCOLOGY                | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF HEAD FACE AND NECK   | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF HEAD FACE AND NECK   | ONCOLOGY                | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF HEAD FACE AND NECK   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED   | Gynecologic Oncology    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF LATERAL WALL OF BLADDER  | INTERNAL MEDICINE            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF LEFT OVARY   | GYNECOLOGY<br>ONCOLOGY       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF LEFT OVARY   | HEMATOLOGY AND<br>ONCOLOGY   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF LEFT OVARY   | ONCOLOGY                     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF VULVA   | ONCOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED   | HEMATOLOGY AND<br>ONCOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED   | Oncology                     | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF PANCREATIC DUCT  | Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF PROSTATE   | HEMATOLOGY                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF PROSTATE   | INTERNAL MEDICINE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF PROSTATE   | ONCOLOGY                     | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF PROSTATE   | UROLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM   | Cardiac<br>Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM   | HEMATOLOGY                   | 4                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM   | SURGERY-<br>COLON/RECTAL     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF RECTUM   | SURGERY-GENERAL              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF RIGHT OVARY  | INTERNAL MEDICINE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF SIGMOID COLON  | HEMATOLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF SIGMOID COLON  | HEMATOLOGY AND<br>ONCOLOGY   | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF SIGMOID COLON,<br>SECONDARY MALIGNANT NEOPLASM OF LEFT LUNG,<br>SECONDARY MALIGNANT NEOPLASM OF RIGHT LUNG | INTERNAL MEDICINE            | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED  | ONCOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF THYROID GLAND  | HEMATOLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED   | HEMATOLOGY AND<br>ONCOLOGY   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED   | INTERNAL MEDICINE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED, SEC<br>& UNS MALIG NEO LYMPH NODES HEAD FACE<br>& NECK                                 | HEMATOLOGY AND<br>ONCOLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF TONSILLAR FOSSA  | OTOLARYNGOLOGIST<br>(ENT)    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF UNSPECIFIED OVARY  | GYNECOLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF UNSPECIFIED OVARY  | GYNECOLOGY<br>ONCOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OF UTERUS PART UNSPECIFIED   | GYNECOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OVERLAP SITE LT BRONCH & LUNG  | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST  | SURGERY-PEDIATRIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS   | UROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS  | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG  | Oncology/Radiation      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG  | SURGERY-THORACIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST, ENCOUNTER SCREENING MALIGNANT NEOPLASM OF COLON | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG   | HEMATOLOGY AND ONCOLOGY | 4                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | Internal Medicine       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | ONCOLOGY                | 5                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST   | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |



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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, SECONDARY MALIGNANT NEOPLASM OF SKIN, ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST  | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY AND ONCOLOGY | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | ONCOLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UNS TESTIS UNS DESC/UNDESCEND  | UROLOGY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG  | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG  | HEMATOLOGY AND ONCOLOGY | 3                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM UPPER LOBE UNS BRONCHUS/LUNG   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES  | OTOLARYNGOLOGIST (ENT)  | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MERKEL CELL CARCINOMA UNSPECIFIED   | ONCOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MERKEL CELL CARCINOMA UNSPECIFIED PART OF FACE  | ONCOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MIXED HYPERLIPIDEMIA, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERIPHERAL VASCULAR DISEASE UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, TYPE 2 DIABETES MELLITUS WITH HYPERGLYCEMIA, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MYELOID SARCOMA NOT HAVING ACHIEVED REMISSION   | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | NEOPLASM OF UNCERTAIN BEHAVIOR OF APPENDIX  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | NEOPLASM OF UNCERTAIN BEHAVIOR OTHER SPEC SITES   | Anesthesiology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | NODULAR SCLEROSIS CLASS HL NODES HEAD FACE NECK   | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | NON-HODGKIN LYMPHOMA UNS UNSPECIFIED SITE   | ONCOLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | NONSPEC REACTION CELL MED IMMUN MEAS GAMA   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | NONSPEC REACTION CELL MED IMMUN MEAS GAMA  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTH TYPES NON-HODGKIN LYMPHOMA INTRA-ABD NODES   | HEMATOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER AMNESIA, DIZZINESS AND GIDDINESS, SARCOIDOSIS UNSPECIFIED, BRACHIAL PLEXUS DISORDERS, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER BENIGN NEUROENDOCRINE TUMORS   | RADIATION ONCOLOGY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER CHEST PAIN   | FAMILY PRACTICE     | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER CHEST PAIN, ESSENTIAL PRIMARY HYPERTENSION   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | Other diseases of mediastinum, not elsewhere classified  | THORACIC SURGERY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER DISEASES OF STOMACH AND DUODENUM   | Gastroenterology    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER DISEASES OF STOMACH AND DUODENUM   | ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | FAMILY PRACTICE     | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | INFECTIOUS DISEASES | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | INTERNAL MEDICINE   | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | Rheumatology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, MALIGNANT NEOPLASM OF RECTUM, PERSONAL HX OTH MAL NEO RECTUM RS JUNC & ANUS  | SURGERY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY, HEMATURIA UNSPECIFIED  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER SPECIFIED DISEASES OF INTESTINE  | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER SPECIFIED DISEASES OF INTESTINE, BENIGN NEOPLASM OF CECUM  | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | Other specified diseases of pancreas   | SURGERY-GENERAL     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER   | UROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | OTHER SPECIFIED JOINT DISORDERS LEFT SHOULDER, MALIGNANT NEOPLASM ANTERIOR 2/3 TONGUE PART UNS, SEC & UNS MALIG NEO LYMPH NODES HEAD FACE & NECK                                     | HEMATOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | PERSISTENT HYPERPLASIA OF THYMUS   | SURGERY-THORACIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | PERSONAL HX OTH MALIG NEOPLASM BRONCHUS & LUNG   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | PERSONAL HX OTH MALIG NEOPLASM LARGE INTESTINE   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | PLEURAL EFFUSION NOT ELSEWHERE CLASSIFIED   | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | PNEUMONIA DUE TO OTHER SPECIFIED BACTERIA   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | PYOTHORAX WITHOUT FISTULA   | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY & UNS MALIG NEOPLASM LYMPH NODE UNS   | HEMATOLOGY AND ONCOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, ENC F/U EXAM AFTR CMPL TX OTH THAN MALIG NEOPLSM | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                           | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OF ENDOMETRIUM   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OF PROSTATE  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY                      | HEMATOLOGY              |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                              | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OF BRAIN, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES, MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SECONDARY MALIGNANT NEOPLASM UNSPECIFIED OVARY, MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SHORTNESS OF BREATH   | CARDIOVASCULAR DISEASE  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SHORTNESS OF BREATH   | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); with contrast material(s) | SHORTNESS OF BREATH  | PULMONARY DISEASES                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SHORTNESS OF BREATH, PERSONAL HISTORY OTHER  | ONCOLOGY                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | MALIGNANT NEOPLASM KIDNEY,   |  |                    |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | FAMILY PRACTICE                        | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | HEMATOLOGY                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | HEMATOLOGY AND ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | INTERNAL MEDICINE                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | ONCOLOGY                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | PULMONARY DISEASES                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | SLEEP MEDICINE                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE  | SURGERY-THORACIC                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE, ANEMIA UNSPECIFIED, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST | HEMATOLOGY                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST                      | HEMATOLOGY                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG                      | HEMATOLOGY AND ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED                       | NURSE PRACTITIONER                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE, OTH TYPES NON-HODGKIN LYMPHOMA INTRA-ABD NODES                      | ONCOLOGY                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | SOLITARY PULMONARY NODULE, UNSPECIFIED ASTHMA UNCOMPLICATED, Unknown                           | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | TACHYCARDIA UNSPECIFIED, CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH                           | FAMILY PRACTICE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | TOBACCO USE  | INTERNAL MEDICINE                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); with contrast material(s) | UPPER ABDOMINAL PAIN UNSPECIFIED, Unknown,   | ONCOLOGY                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material |  | FAMILY PRACTICE                        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material |  | INTERNAL MEDICINE                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material |  | PULMONARY DISEASES                     | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material |  | Pulmonology                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | ABNORMAL RESULTS OF PULMONARY FUNCTION STUDIES   | PULMONARY DISEASES                     |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); without contrast material | ABNORMALITY OF PLASMA PROTEIN UNSPECIFIED, ABNORMAL RESULTS OF KIDNEY FUNCTION STUDIES                   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | ACUTE BRONCHIOLITIS UNSPECIFIED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | ATELECTASIS  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | BRONCHIECTASIS UNCOMPLICATED   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | CENTRIOBULAR EMPHYSEMA   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | CHEST PAIN ON BREATHING, LOCALIZED SWELLING MASS AND LUMP TRUNK  | SLEEP MEDICINE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | CHEST PAIN UNSPECIFIED   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | CHEST PAIN UNSPECIFIED   | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | CHEST PAIN UNSPECIFIED, DYSPNEA UNSPECIFIED, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED               | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | Chronic eosinophilic pneumonia   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS  | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | CHRONIC VIRAL HEPATITIS B WITHOUT DELTA-AGENT, LIVER CELL CARCINOMA                                      | HEPATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | COCCIDIOIDOMYCOSIS UNSPECIFIED   | INFECTIOUS DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | COUGH  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | COUGH  | INTERNAL MEDICINE       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | COUGH  | NURSE PRACTITIONER      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | COUGH  | PCP/Pediatrician        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | COUGH, PERSONAL HISTORY OF NICOTINE DEPENDENCE   | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | COUGH, SHORTNESS OF BREATH   | NURSE PRACTITIONER      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | CYSTIC FIBROSIS UNSPECIFIED  | PEDIATRIC PULMONOLOGIST | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | DIAPHRAGMATIC HERNIA W/O OBSTRUCTION OR GANGRENE   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | DIARRHEA UNSPECIFIED, MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS, Unknown                          | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | DORSALGIA UNSPECIFIED, MODERATE PERSISTENT ASTHMA UNCOMPLICATED, PERSONAL HISTORY OF NICOTINE DEPENDENCE | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | DYSPHAGIA UNSPECIFIED  | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | DYSPNEA UNSPECIFIED  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |

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| CT CHEST (thorax); without contrast material | DYSPNEA UNSPECIFIED   | PHYSICIAN ASSISTANT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | DYSPNEA UNSPECIFIED   | PULMONARY DISEASES      | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | DYSPNEA UNSPECIFIED, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS  | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | EMPHYSEMA UNSPECIFIED   | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | ENCOUNTER GEN ADULT MEDICAL EXAM W/ABNORMAL FIND  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | GENERALIZED ENLARGED LYMPH NODES, UNSPECIFIED ASTHMA UNCOMPLICATED, PNEUMONIA UNSPECIFIED ORGANISM  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | GRAFT-VERSUS-HOST DISEASE UNSPECIFIED   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | HEMOPTYSIS, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, Unknown   | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | HISTOPLASMOSIS UNSPECIFIED  | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | INTERSTITIAL PULMONARY DISEASE UNSPECIFIED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | INTERSTITIAL PULMONARY DISEASE UNSPECIFIED, , Unknown   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | LOCALIZED ENLARGED LYMPH NODES  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | LOCALIZED ENLARGED LYMPH NODES  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | LOCALIZED ENLARGED LYMPH NODES, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | LOCALIZED ENLARGED LYMPH NODES, SOLITARY PULMONARY NODULE, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PULMONARY FIBROSIS UNSPECIFIED | CRITICAL CARE MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | LOCALIZED ENLARGED LYMPH NODES, SOLITARY PULMONARY NODULE, PULMONARY FIBROSIS UNSPECIFIED, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED    | CRITICAL CARE MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | LOCALIZED SWELLING MASS AND LUMP NECK   | ALLERGY & IMMUNOLOGY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIG NEOPLASM LOWER-INNER QUAD RT FEMALE BREAST  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIG NEOPLASM NIPPLE & AREOLA LT FEMALE BREAST   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT CARCINOID TUMOR OF THE STOMACH  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                   | Diagnosis Code Description  | Provider Specialty              | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS   | PEDIATRIC HEMATOLOGY - ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS   | SURGERY, ORAL & MAXILLOFACIAL   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS   | HEMATOLOGY                      |                    | 3                | 3               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS   | ONCOLOGY                        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM CORTEX OF RIGHT ADRENAL GLAND  | Cardiac Electrophysiology       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG  | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM LOWER LOBE RT BRONCHUS/LUNG  | RADIATION ONCOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS  | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM OF ASCENDING COLON   | HEMATOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED  | NURSE PRACTITIONER              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM OF PROSTATE  | HEMATOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM OF RIBS STERNUM AND CLAVICLE   | THORACIC SURGERY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM OVERLAP SITE LT BRONCH & LUNG  | ONCOLOGY                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX  | HEMATOLOGY AND ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS  | HEMATOLOGY AND ONCOLOGY         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG   | RADIATION ONCOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | Rheumatology                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM UNS TESTIS UNS DESC/UNDESCEND  | UROLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG  | SURGERY-THORACIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED  | INTERNAL MEDICINE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | MILD PERSISTENT ASTHMA UNCOMPLICATED  | PULMONARY DISEASES              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | NICOTINE DEPENDENCE OTH TOBACCO PRODUCT UNCOMP  | PULMONARY DISEASES              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | NICOTINE DEPENDENCE UNS W/UNS NIC-INDUCED D/O, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | FAMILY PRACTICE                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description                   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); without contrast material | OBSTRUCTIVE SLEEP APNEA ADULT PEDIATRIC, Unknown  | PULMONARY DISEASES     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTH SPEC ABNORMAL IMMUNOLOGICAL FIND IN SERUM, RAYNAUDS SYNDROME WITHOUT GANGRENE                         | RHEUMATOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTH SPEC SX & SIGNS INVLV THE DIGESTV SYS & ABD   | GASTROENTEROLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER BENIGN NEUROENDOCRINE TUMORS, MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG                        | ONCOLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER CHEST PAIN  | FAMILY PRACTICE        | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER CHEST PAIN, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PRESENCE OF AORTOCORONARY BYPASS GRAFT | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER CHEST PAIN, DYSPNEA UNSPECIFIED, SHORTNESS OF BREATH  | Surgery, Thoracic      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER CHEST PAIN, ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER CHEST PAIN, PAIN IN RIGHT ARM   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | Other diseases of mediastinum, not elsewhere classified   | THORACIC SURGERY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER DISORDERS OF LUNG   | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER DISORDERS OF LUNG   | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER DISORDERS OF LUNG   | PULMONARY DISEASES     | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER DISORDERS OF LUNG   | SLEEP MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER DISORDERS OF LUNG   | SURGERY-THORACIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | CRITICAL CARE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | FAMILY PRACTICE        | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | GENERAL PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | INTERNAL MEDICINE      | 6                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | ONCOLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | PULMONARY DISEASES     | 7                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, BRONCHIECTASIS UNCOMPLICATED                            | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description                   | Diagnosis Code Description   | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERSONAL HISTORY OF NICOTINE DEPENDENCE          | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERSONAL HISTORY OF OTHER SPECIFIED CONDITIONS   | PULMONARY DISEASES      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER PNEUMONIA UNSPECIFIED ORGANISM   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER SPECIFIED DISORDERS ARTERIES & ARTERIOLES  | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | OTHER SPECIFIED RESPIRATORY DISORDERS  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PECTUS EXCAVATUM   | SURGERY-PEDIATRIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PERSONAL HISTORY OF NICOTINE DEPENDENCE  | FAMILY PRACTICE         | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PERSONAL HISTORY OF NICOTINE DEPENDENCE  | INTERNAL MEDICINE       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PLEURAL EFFUSION NOT ELSEWHERE CLASSIFIED  | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PLEURODYNIA  | PAIN MANAGEMENT         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | Pneumonia due to coronavirus disease 2019  | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PNEUMONIA UNSPECIFIED ORGANISM   | INTERNAL MEDICINE       |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PNEUMONIA UNSPECIFIED ORGANISM   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PNEUMONITIS D/T INHALATION OTH SOLIDS & LIQUIDS  | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | POLYCYTHEMIA VERA  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PULMONARY BLASTOMYCOSIS UNSPECIFIED  | PULMONARY DISEASES      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PULMONARY FIBROSIS UNSPECIFIED   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PULMONARY FIBROSIS UNSPECIFIED   | Surgery, Thoracic       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | PULMONARY MYCOBACTERIAL INFECTION  | PEDIATRIC PULMONOLOGIST | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | RHEUMATOID ARTHRITIS UNSPECIFIED   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SARCOIDOSIS OF LUNG  | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); without contrast material | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SEVERE PERSISTENT ASTHMA UNCOMPLICATED   | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SHORTNESS OF BREATH  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SHORTNESS OF BREATH  | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SHORTNESS OF BREATH  | RADIOLOGY - DIAGNOSTIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SHORTNESS OF BREATH, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SHORTNESS OF BREATH, CONTACT&EXPOSURE OTH HAZARDOUS NONMEDICINAL CHEM  | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SHORTNESS OF BREATH, OTH PULMONARY EMBOLISM W/O ACUTE COR PULMONALE  | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SIMPLE CHRONIC BRONCHITIS  | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SNORING, SHORTNESS OF BREATH, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS, OBESITY UNSPECIFIED, TYPE 2 DIABETES MELLITUS W/UNS COMPLICATIONS | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | FAMILY PRACTICE         | 12                 | 4                | 4               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | GERIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | INTERNAL MEDICINE       | 18                 | 4                | 4               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | PULMONARY DISEASES      | 9                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | Rheumatology            | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | SLEEP MEDICINE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | SURGERY-HEAD AND NECK   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | SURGERY-THORACIC        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | SURGERY-VASCULAR        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE  | THORACIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material | SOLITARY PULMONARY NODULE, COUGH, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED  | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, COUGH, UNSPECIFIED ABNORMAL FINDINGS IN URINE, Unknown  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, CYST OF PANCREAS, NEOPLASM OF UNS BEHAVIOR DIGESTIVE SYSTEM                                     | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM LONG BONES LEFT LOWER LIMB   | PEDIATRICS             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM OF PROSTATE  | FAMILY PRACTICE        | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | INTERNAL MEDICINE      | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, SHORTNESS OF BREATH, ATELECTASIS, TOBACCO USE | PULMONARY DISEASES     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | SOLITARY PULMONARY NODULE, PLEURAL EFFUSION NOT ELSEWHERE CLASSIFIED   | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | TOBACCO USE  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material  | UNS OPN WND RT FRONT WALL THOR NO PEN TH CAV INT   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections |  | FAMILY PRACTICE        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | ABNORMAL ELECTROCARDIOGRAM, THORACIC AORTIC ECTASIA  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | ABNORMAL WEIGHT LOSS, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, ENCOUNTER SCREENING MALIGNANT NEOPLASM OF COLON       | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS, PANLOBULAR EMPHYSEMA, COMP OTH ARTERY FOLLOWING PROC NEC INITIAL ENC            | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | COUGH  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | DYSPHAGIA UNSPECIFIED, CONGENITAL MALFORMATION OF HEART UNSPECIFIED  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | ENCOUNTER GEN ADULT MED EXAM W/O ABNORMAL FIND, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED                              | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | FRACTURE ONE RIB RIGHT INITIAL ENCNTD CLOSED FX   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | LOCALIZED SWELLING MASS AND LUMP TRUNK  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | LOCALIZED SWELLING MASS AND LUMP TRUNK  | SPORTS MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | LOCALIZED SWELLING MASS AND LUMP TRUNK  | SURGERY- PLASTIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM OF ANAL CANAL  | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST   | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | NON-HODGKIN LYMPHOMA UNS UNSPECIFIED SITE   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | NONRHEUMATIC AORTIC VALVE DISORDER UNSPECIFIED  | SURGERY-VASCULAR        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | OTHER DISORDERS OF LUNG, ALLERGY UNSPECIFIED INITIAL ENCOUNTER,   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | FAMILY PRACTICE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, MALIGNANT NEOPLASM OF RECTUM, PERSONAL HX OTH MAL NEO RECTUM RS JUNC & ANUS                 | SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | SOLITARY PULMONARY NODULE   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT CHEST (thorax); without contrast material, followed by contrast material(s) and further sections | SOLITARY PULMONARY NODULE   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; with contrast material(s)   |   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; with contrast material(s)   | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC, DISORDER THE SKIN & SUBCUTANEOUS TISSUE UNS, BENIGN LIPOMATOUS NEO SKIN SUBQ HEAD FACE NECK | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; with contrast material(s)   | OTHER SEIZURES  | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; with contrast material(s)   | SYNCOPE AND COLLAPSE  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material   |   | FAMILY PRACTICE         | 6                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description                  | Diagnosis Code Description  | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT HEAD or Brain; without contrast material |   | INTERNAL MEDICINE  | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material |   | NURSE PRACTITIONER | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material |   | PAIN MANAGEMENT    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material |   | PEDIATRICS         | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | ACUTE POST-TRAUMATIC HEADACHE NOT INTRACTABLE   | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | ACUTE SINUSITIS UNSPECIFIED, NEOPLASM OF UNS BEHAVIOR BONE SOFT TISSUE & SKIN             | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | ACUTE SINUSITIS UNSPECIFIED, Unknown  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | ADVERSE EFFECT OTH VIRAL VACCINES INITIAL ENCNT   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | ALTERED MENTAL STATUS UNSPECIFIED   | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | BELLS Palsy   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | BENIGN NEOPLASM OF PITUITARY GLAND  | RADIATION ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | BENIGN NEOPLASM UNSPECIFIED SITE  | PLASTIC SURGERY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | CEREBRAL INFARCTION UNSPECIFIED   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | CHRONIC TENSION-TYPE HEADACHE NOT INTRACTABLE   | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | COMPRESSION OF BRAIN  | SURGERY-NEUROLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | CONCUSSION WITHOUT LOC INITIAL ENCOUNTER  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | CONCUSSION WITHOUT LOC SUBSEQUENT ENCOUNTER, UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | CONTUSION LT EYELID & PERIOcular AREA INIT ENC  | Rheumatology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | DISORIENTATION UNSPECIFIED  | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | DIZZINESS AND GIDDINESS   | EMERGENCY MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | DIZZINESS AND GIDDINESS   | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | DIZZINESS AND GIDDINESS   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | DIZZINESS AND GIDDINESS   | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | DIZZINESS AND GIDDINESS   | NURSE PRACTITIONER |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | DIZZINESS AND GIDDINESS, PRIMARY EXERTIONAL HEADACHE                                      | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | ENCEPHALOPATHY UNSPECIFIED  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | EPISODIC TENSION-TYPE HEADACHE NOT INTRACTABLE  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                  | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT HEAD or Brain; without contrast material | ESSENTIAL PRIMARY HYPERTENSION, VASCULAR DEMENTIA WITHOUT BEHAVIORAL DISTURBANCE, SEQUELAE OF OTH & SPEC INFECTIOUS & PARASITIC DZ | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | FACIAL WEAKNESS, PARESTHESIA OF SKIN   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | FACIAL WEAKNESS, Unknown   | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | FRACTURE NASAL BONES INITIAL ENCOUNTER CLOSED FX   | OTOLARYNGOLOGIST (ENT) |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | LOCALIZED SWELLING MASS AND LUMP HEAD  | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | NAUSEA WITH VOMITING UNSPECIFIED, CAR OCCUPANT INJURED UNS TRAFFIC ACC INIT ENC  | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | NEW DAILY PERSISTENT HEADACHE  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | NONTRAUMATIC INTRACEREBRAL HEMORRHAGE UNS, QUADRIPLÉGIA UNSPECIFIED, NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN                     | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | NONTRAUMATIC INTRACRANIAL HEMORRHAGE UNSPECIFIED   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | NONTRAUMATIC SUBDURAL HEMORRHAGE UNSPECIFIED   | Family Medicine        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS  | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | OTHER AMNESIA, ALTERED MENTAL STATUS UNSPECIFIED, UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER, HEMICRANIA CONTINUA                | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | OTHER CHRONIC PAIN   | FAMILY PRACTICE        | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | OTHER HALLUCINATIONS   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | OTHER REACTION TO SPINAL AND LUMBAR PUNCTURE   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | OTHER VISUAL DISTURBANCES  | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | PAIN IN UNSPECIFIED ELBOW  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | PARESTHESIA OF SKIN  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | PERSON INJURED UNS MOTOR-VEH ACC TRAF SEQUELA  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | PERSONAL HISTORY OTH DISEASES CIRCULATORY SYSTEM   | Naturopath             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | PERSONAL HX TIA & CEREB INFARCT NO RESID DEFICIT   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | PRETERM NEWBORN GESTATIONAL AGE 35 CMPL WEEKS  | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | REPEATED FALLS   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | SENSORINEURAL HEARING LOSS BILATERAL   | OTOLARYNGOLOGIST (ENT) |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | SOMNOLENCE, UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material | SYNCOPE AND COLLAPSE   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT HEAD or Brain; without contrast material  | SYNCOPE AND COLLAPSE  | INTERNAL MEDICINE      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, TENSION-TYPE HEADACHE UNS NOT INTRACTABLE  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER, TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | UNS FRACTURE OCCIPUT INITIAL ENC CLOS FRACTURE  | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | UNSPECIFIED CONVULSIONS   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | UNSPECIFIED FALL INITIAL ENCOUNTER  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER  | PCP/Pediatrician       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | UNSPECIFIED INJURY OF HEAD SUBSEQUENT ENCOUNTER   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material  | VASCULAR HEADACHE NOT ELSEWHERE CLASSIFIED  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections |   | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | ABDOMINAL DISTENSION GASEOUS, NAUSEA WITH VOMITING UNSPECIFIED  | GASTROENTEROLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | ACUTE SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT) |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM OF BONES OF SKULL AND FACE   | DIABETES & METABOLISM  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, Unknown  | HEMATOLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG  | HEMATOLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | NONTRAUMATIC INTRACEREBRAL HEMORRHAGE UNS, QUADRIPLEGIA UNSPECIFIED, NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN                              | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | OTHER ABNORMALITIES OF GAIT AND MOBILITY, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, POLYNEUROPATHY UNSPECIFIED                       | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | OTHER HEADACHE SYNDROME   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISORDERS CHOROID   | OPHTHALMOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections   | PERSONAL HISTORY OTHER MALIGNANT NEOPLASM SKIN, Unknown   | DERMATOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections   | Pulsatile tinnitus, right ear   | OTOLARYNGOLOGIST (ENT) |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections   | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER, TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections   | UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT HEAD or Brain; without contrast material, followed by contrast material(s) and further sections   | UNSPECIFIED VISUAL DISTURBANCE  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material, followed by contrast material(s) and further sections | PAIN IN RIGHT THIGH   | SURGERY-GENERAL        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material, followed by contrast material(s) and further sections | UNSPECIFIED OPEN WOUND UNS LOWER LEG INITIAL ENC  | INFECTIOUS DISEASES    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; with contrast material(s)  | CUTANEOUS ABSCESS OF LEFT LOWER LIMB  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; with contrast material(s)  | GANGRENE NOT ELSEWHERE CLASSIFIED   | EMERGENCY MEDICINE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; with contrast material(s)  | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED  | SURGERY-GENERAL        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; with contrast material(s)  | OTHER SPECIFIED SOFT TISSUE DISORDERS   | INFECTIOUS DISEASES    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; with contrast material(s)  | PAIN IN RIGHT THIGH   | SURGERY-GENERAL        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | BENIGN NEOPLASM CNCTV & OTHER SOFT TISSUE UNS   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | DISORDER OF BONE UNSPECIFIED  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | DISPL BICONDYLAR FX LT TIBIA INIT ENC CLOS FX   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | DISPL TRIMALLEOL FX RT LOW LEG SUBS CLOS FX RTN   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | DISPLACED FX 5TH METATARSAL LT FT SUBSQ FX RTN  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE  | PODIATRY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | GOUT UNSPECIFIED  | RHEUMATOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | LOOSE BODY IN KNEE LEFT KNEE  | NURSE PRACTITIONER     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | NDSPL OBLIQUE FX SHAFT LT FIBULA INIT CLOS FX   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | NONDISPLACED FX NECK RT TALUS INIT ENC CLOSE FX   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | NONDSPLC FX CUBOID BN LT FOOT INIT ENC CLOS FX  | PODIATRY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material  | OSTEOPHYTE RIGHT FOOT   | SURGERY-PODIATRIST     | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description                    | Diagnosis Code Description                      | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT Lower Extremity; without contrast material | OTH FX UPPER & LOWER RT FIBULA INIT ENC CLOS FX | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP   | ORTHOPEDIC SURGERY  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | OTHER SPECIFIED CONGENITAL DEFORMITIES OF FEET  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | OTHER SPECIFIED CONGENITAL DEFORMITIES OF FEET  | PODIATRY            |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP       | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN LEFT ANKLE                              | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN LEFT FOOT                               | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN LEFT FOOT                               | RHEUMATOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN LEFT HIP                                | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN LEFT LOWER LEG                          | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN RIGHT ANKLE                             | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN RIGHT HIP                               | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN RIGHT KNEE                              | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN RIGHT KNEE                              | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | PAIN IN UNSPECIFIED HIP                         | FAMILY PRACTICE     |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | POST-TRAUMATIC OSTEOARTHRITIS LEFT ANKLE & FOOT | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | SPRAIN UNS CRUCIATE LIGAMENT UNS KNEE INIT ENC  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | STAPHYLOCOCCAL ARTHRITIS LEFT ANKLE AND FOOT    | INFECTIOUS DISEASES | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNEQUAL LIMB LENGTH ACQUIRED UNS TIBIA & FIBULA | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT HIP      | SURGERY-ORTHOPEDIC  | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE     | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE     | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE     | SURGERY-ORTHOPEDIC  | 3                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT HIP     | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE    | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE    | SURGERY-ORTHOPEDIC  | 3                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description                    | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT Lower Extremity; without contrast material | UNS FRACTURE RT TALUS INITIAL ENC CLOS FRACTURE   | PODIATRY                           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNS FRACTURE SHAFT RT TIBIA INIT ENC CLOS FX  | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNS FRACTURE UNS TALUS INITIAL ENC CLOS FRACTURE  | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lower Extremity; without contrast material | UNSPECIFIED MONONEUROPATHY UNS LOWER LIMB   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; with contrast material       | RADICULOPATHY LUMBAR REGION   | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; with contrast material       | SPONDYLOLISTHESIS LUMBAR REGION, SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION, UNSTABLE BURST FX 1ST LUMB VERT INIT ENC CLOS FX | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; with contrast material       | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    |   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    |   | Surgery, Neurological              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | , Spinal stenosis, lumbar region with neurogenic claudication   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | , Spinal stenosis, lumbar region with neurogenic claudication   | SURGERY- NEUROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | , Spinal stenosis, lumbar region with neurogenic claudication   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | , Spinal stenosis, lumbar region without neurogenic claud   | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | , Spinal stenosis, lumbar region without neurogenic claud   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | ARTHRODESIS STATUS  | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | ARTHRODESIS STATUS  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | ARTHRODESIS STATUS  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | DORSALGIA UNSPECIFIED, PAIN IN RIGHT SHOULDER   | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | LOW BACK PAIN   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | LOW BACK PAIN   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | LOW BACK PAIN, ANORECTAL FISTULA  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material    | LOW BACK PAIN, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT Lumbar Spine; without contrast material  | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | OTH HYPERTROPHIC OSTEOARTHROPATHY MULTIPLE SITES   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | ANESTHESIOLOGY      |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | PAIN IN UNSPECIFIED HIP  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | RADICULOPATHY LUMBAR REGION  | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | RADICULOPATHY LUMBAR REGION  | ORTHOPEDIC SURGERY  | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | RADICULOPATHY LUMBAR REGION  | PAIN MANAGEMENT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | RADICULOPATHY LUMBAR REGION  | SURGERY- ORTHOPEDIC | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | RADICULOPATHY LUMBAR REGION, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN                                | ANESTHESIOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | RADICULOPATHY LUMBOSACRAL REGION, ANKYLOSING HYPEROSTOSIS SITE UNSPECIFIED                                   | SURGERY- NEUROLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | SCIATICA RIGHT SIDE  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | SPINAL STENOSIS CERVICAL REGION, DEFORMING DORSOPATHY UNSPECIFIED, OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | SPINAL STENOSIS LUMBOSACRAL REGION   | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | SPONDYLOLISTHESIS LUMBAR REGION  | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material  | SPONDYLOLISTHESIS LUMBAR REGION  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Lumbar Spine; without contrast material, followed by contrast material(s) and further sections | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION   | PAIN MANAGEMENT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT MAXILLOFACIAL W/O DYE  | UNSPECIFIED TMJ JOINT DISORDER, UNSPECIFIED SIDE   | Dentistry           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | ACUTE EMBOLISM & THROMBOSIS DEEP VEINS LT UP EXT   | ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | ANAPLASTIC LCL ALK-POSITIVE NODES MULTIPLE SITES   | ONCOLOGY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | ANESTHESIA OF SKIN, MALIGNANT NEOPLASM OF HEAD FACE AND NECK   | ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | BURKITT LYMPHOMA LYMPH NODES AXILLA & UPPER LIMB   | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | BURKITT LYMPHOMA UNSPECIFIED SITE  | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | CERVICALGIA, MALIGNANT MELANOMA OF SKIN UNSPECIFIED  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | CHILLS WITHOUT FEVER, JAW PAIN, LOCALIZED ENLARGED LYMPH NODES   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | CHRONIC LYMPHOCYTOID LEUKEMIA B-CELL TYPE NO REMISS, SMALL CELL B-CELL LYMPHOMA UNSPECIFIED SITE             | HEMATOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT NECK Soft Tissue; with contrast material(s) | CONGENITAL MALFORMATIONS OTHER ENDOCRINE GLANDS, LOCALIZED SWELLING MASS AND LUMP NECK, Unknown                            | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | DISEASE OF SALIVARY GLAND UNSPECIFIED  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | DISEASE OF SALIVARY GLAND UNSPECIFIED, MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | DYSPHAGIA OROPHARYNGEAL PHASE, ACUTE PHARYNGITIS DUE TO OTHER SPEC ORGANISMS   | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | DYSPHAGIA PHARYNGOESOPHAGEAL PHASE   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | DYSPHAGIA UNSPECIFIED, LOCALIZED SWELLING MASS AND LUMP NECK   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | DYSPHONIA  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | DYSPNEA UNSPECIFIED  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | ENLARGED LYMPH NODES UNSPECIFIED   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | ENLARGED LYMPH NODES UNSPECIFIED, SOLITARY PULMONARY NODULE, FOLLICULAR LYMPHOMA UNSPEC UNSPEC SITE                        | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | FOLLICULAR LYMPHOMA GRADE I UNSPECIFIED SITE   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | GENERALIZED ENLARGED LYMPH NODES   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | GENERALIZED ENLARGED LYMPH NODES   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | HODGKIN LYMPHOMA UNSPECIFIED UNSPECIFIED SITE  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | HYPERTROPHY OF TONSILS   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | ILLNESS UNSPECIFIED  | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | FAMILY PRACTICE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | GASTROENTEROLOGY        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | OTOLARYNGOLOGIST (ENT)  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES   | Rheumatology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED ENLARGED LYMPH NODES, FAMILY HISTORY OF LEUKEMIA   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP HEAD  | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP HEAD  | OTOLARYNGOLOGIST (ENT)        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK  | FAMILY PRACTICE               | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK  | INTERNAL MEDICINE             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK  | OTOLARYNGOLOGIST (ENT)        | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK  | RHEUMATOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK  | SURGERY-GENERAL               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK  | Urology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK, NEOPLASM UNCERTAIN BEHAVIOR SUBMAND SALIV GLANDS  | OTOLARYNGOLOGIST (ENT)        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | LOCALIZED SWELLING MASS AND LUMP NECK, PAIN IN RIGHT SHOULDER  | SPORTS MEDICINE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS  | SURGERY, ORAL & MAXILLOFACIAL | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF HEAD FACE AND NECK   | HEMATOLOGY                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF HEAD FACE AND NECK   | ONCOLOGY                      | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED   | Gynecologic Oncology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED   | RADIATION ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF MOUTH UNSPECIFIED  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF NASOPHARYNX UNSPECIFIED  | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF THYROID GLAND  | HEMATOLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED   | HEMATOLOGY AND ONCOLOGY       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED, SEC & UNS MALIG NEO LYMPH NODES HEAD FACE & NECK   | HEMATOLOGY AND ONCOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF TONSILLAR FOSSA  | OTOLARYNGOLOGIST (ENT)        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OF TONSILLAR PILLAR   | ONCOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX   | HEMATOLOGY AND ONCOLOGY       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT NEOPLASM OVERLAPPING SITES OROPHARYNX  | Surgery, General              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES, SEC & UNS MALIG NEO LYMPH NODES HEAD FACE & NECK | RADIATION ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MERKEL CELL CARCINOMA UNSPECIFIED  | ONCOLOGY                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MERKEL CELL CARCINOMA UNSPECIFIED PART OF FACE   | ONCOLOGY                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s) | MYELOID SARCOMA NOT HAVING ACHIEVED REMISSION  | HEMATOLOGY                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT NECK Soft Tissue; with contrast material(s)  | NODULAR SCLEROSIS CLASS HL NODES HEAD FACE NECK  | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | NONSPEC REACTION CELL MED IMMUN MEAS GAMA  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | NONSPEC REACTION CELL MED IMMUN MEAS GAMA  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS, LOCALIZED SWELLING MASS AND LUMP NECK   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | OTHER SPECIFIED JOINT DISORDERS LEFT SHOULDER, MALIGNANT NEOPLASM ANTERIOR 2/3 TONGUE PART UNS, SEC & UNS MALIG NEO LYMPH NODES HEAD FACE & NECK | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | OTHER SPECIFIED RESPIRATORY DISORDERS  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | PAIN IN THROAT   | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | PAPILLOMAVIRUS CAUSE OF DZ CLASSIFIED ELSEWHERE, MALIGNANT NEOPLASM OF HEAD FACE AND NECK  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | POSTNASAL DRIP   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | PRIMARY HYPERPARATHYROIDISM  | SURGERY-HEAD AND NECK   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | SECONDARY & UNS MALIG NEOPLASM LYMPH NODE UNS  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | SIALOADENITIS UNSPECIFIED, OTHER DISEASES OF SALIVARY GLANDS   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | SQUAMOUS CELL CARCINOMA SKIN OTHER PARTS OF FACE   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; with contrast material(s)  | THYROTOXICOSIS W/TMNG NO THYROTOXIC CRISIS/STORM   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections | ENLARGED LYMPH NODES UNSPECIFIED, LOCALIZED SWELLING MASS AND LUMP NECK  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections | HYPERPARATHYROIDISM UNSPECIFIED  | Surgery, Plastic        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections | LOCALIZED ENLARGED LYMPH NODES   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections   | LOCALIZED SWELLING MASS AND LUMP NECK   | FAMILY PRACTICE         |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections   | LOCALIZED SWELLING MASS AND LUMP NECK   | INTERNAL MEDICINE       |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections   | NEOPLASM OF UNCERTAIN BEHAVIOR OTHER SPEC SITES   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections   | OTHER SPECIFIED DISEASES OF JAWS  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections   | PAIN IN THROAT  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections   | PERSONAL HISTORY OTHER MALIGNANT NEOPLASM SKIN, Unknown   | DERMATOLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections   | PRIMARY HYPERTHYROIDISM   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast followed by contrast material(s) and further sections   | PRIMARY HYPERTHYROIDISM   | SURGERY-THORACIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | ACUTE TRACHEITIS WITHOUT OBSTRUCTION  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | CERVICALGIA   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | DYSPHAGIA UNSPECIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | GENERALIZED ENLARGED LYMPH NODES  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | HYPERTROPHY OF NASAL TURBINATES   | OTOLARYNGOLOGIST (ENT)  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | LOCALIZED SWELLING MASS AND LUMP NECK   | ALLERGY & IMMUNOLOGY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | LOCALIZED SWELLING MASS AND LUMP NECK   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | LOCALIZED SWELLING MASS AND LUMP NECK   | INTERNAL MEDICINE       |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | LOCALIZED SWELLING MASS AND LUMP NECK   | PLASTIC SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | LOCALIZED SWELLING MASS AND LUMP NECK   | RHEUMATOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | LOCALIZED SWELLING MASS AND LUMP NECK, NEOPLASM UNCERTAIN BEHAVIOR SUBMAND SALIV GLANDS                                 | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | OTHER NONSPECIFIC LYMPHADENITIS   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT NECK Soft Tissue; without contrast material  | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX, Unknown                         | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; with contrast material(s) | Mixed conductive and sensorineural hearing loss, unilateral, left ear with restricted hearing on the contralateral side | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; with contrast material(s) | UNSPECIFIED DISORDER OF EAR UNSPECIFIED EAR   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material | ACUTE MASTOIDITIS W/O COMPLICATIONS LEFT EAR  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material | CHRONIC PANSINUSITIS  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | CONDUCTIVE HEARING LOSS BILATERAL   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | CONTUSION LT EYELID & PERIOcular AREA INIT ENC  | Rheumatology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | DIZZINESS AND GIDDINESS, OTHER SPECIFIED DISEASES INNER EAR UNS EAR   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | MALIGNANT NEOPLASM OF OROPHARYNX UNSPECIFIED  | SURGERY, ORAL & MAXILLOFACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | Mixed conductive and sensorineural hearing loss, unilateral, left ear with restricted hearing on the contralateral side | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | OTHER DISORDERS VESTIBULAR FUNCTION UNS EAR   | OTOLARYNGOLOGIST (ENT)        |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | PERSONAL HISTORY OTH DISEASES NS & SENSE ORGANS   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | SENSORINEURAL HEARING LOSS BILATERAL  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | SENSORINEURAL HEARING LOSS BILATERAL, UNS PERFORATION OF TYMPANIC MEMBRANE LT EAR                                       | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | UNSPECIFIED CHOLESTEATOMA LEFT EAR  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | UNSPECIFIED EXOPHTHALMOS  | OPHTHALMOLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material  | UNSPECIFIED INJURY OF LEFT EYE AND ORBIT INITIAL  | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material, followed by contrast material(s) and further sections | CHOROIDAL DEGENERATION UNSPECIFIED RIGHT EYE  | INTERNAL MEDICINE             |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material, followed by contrast material(s) and further sections | CONCUSSION W/LOC 30 MIN/LESS INITIAL ENCOUNTER, TINNITUS BILATERAL, Unknown   | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material, followed by contrast material(s) and further sections | DIZZINESS AND GIDDINESS, OTALGIA BILATERAL, TINNITUS BILATERAL  | FAMILY PRACTICE               |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT Orbit, Sella, or Posterior Fossa or Outer, Middle, or Inner Ear; without contrast material, followed by contrast material(s) and further sections | OTHER SPECIFIED DISORDERS CHOROID   | OPHTHALMOLOGY                 |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT PELVIS; with contrast material(s)   | MALIGNANT NEOPLASM OF RECTUM  | Cardiac Electrophysiology     |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT PELVIS; with contrast material(s)   | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP   | FAMILY PRACTICE               |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT PELVIS; with contrast material(s)   | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP   | SURGERY-GENERAL               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; with contrast material(s)   | OTHER SPECIFIED SOFT TISSUE DISORDERS   | SURGERY-VASCULAR              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; with contrast material(s)   | RIGHT LOWER QUADRANT PAIN   | SURGERY                       |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT PELVIS; with contrast material(s)   | RIGHT LOWER QUADRANT PAIN   | SURGERY-GENERAL               |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| CT PELVIS; with contrast material(s)   | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR   | FAMILY PRACTICE               |                    |                  | 1               | 1                                      |                          |                        |                      |                 |



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|---|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT PELVIS; without contrast material  | BILATERAL PRIMARY OSTEOARTHRITIS OF HIP   | SURGERY-<br>ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | BLADDER DISORDER UNSPECIFIED, MALIGNANT NEOPLASM OF PROSTATE, PERSONAL HISTORY OF IRRADIATION, ACQUIRED ABSENCE OF OTHER GENITAL ORGANS | UROLOGY                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | CALCULUS OF URETER  | UROLOGY                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | DISORDER OF BONE UNSPECIFIED  | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | Other microscopic hematuria   | INTERNAL MEDICINE                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | RADICULOPATHY LUMBAR REGION   | PHYSICAL MEDICINE & REHABILITATION     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | SACROCOCCYGEAL DISORDERS NEC  | FAMILY PRACTICE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | SPONDYLOLISTHESIS LUMBAR REGION, FUSION OF SPINE THORACIC REGION  | NEUROSURGERY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR   | UROLOGY                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material  | UNS ABDDOMINAL HERNIA W/OBSTRUCTION W/O GANGRENE  | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material, followed by contrast material(s) and further sections | PELVIC AND PERINEAL PAIN  | OBSTETRICS & GYNECOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material, followed by contrast material(s) and further sections | PELVIC AND PERINEAL PAIN, HYDROCELE UNSPECIFIED   | UROLOGY                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT PELVIS; without contrast material, followed by contrast material(s) and further sections | UNSPECIFIED INJURY BLADDER SUBSEQUENT ENCOUNTER   | NURSE PRACTITIONER                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SCAN FOR LOCALIZATION  | CHRONIC PANSINUSITIS  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SCAN FOR LOCALIZATION  | OTHER SPECIFIED DISEASES OF JAWS  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SCAN FOR THERAPY GUIDE   | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST  | Radiation Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; with contrast material(s)                                     | DISORDER THE SKIN & SUBCUTANEOUS TISSUE UNS   | OTOLARYNGOLOGIST (ENT)                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; with contrast material(s)                                     | MALIGNANT NEOPLASM OF PROSTATE  | ONCOLOGY                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; with contrast material(s)                                     | MALIGNANT NEOPLASM OF TONGUE UNSPECIFIED  | RADIATION ONCOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; with contrast material(s)                                     | OTHER HEADACHE SYNDROME   | INTERNAL MEDICINE                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; with contrast material(s)                                     | OTHER LESIONS OF ORAL MUCOSA  | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; with contrast material(s)                                     | OTHER SPECIFIED DISORDERS OF MUSCLE, HYPERTROPHY OF SALIVARY GLAND  | SURGERY, ORAL & MAXILLOFACIAL          | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material                                     | ACUTE MASTOIDITIS W/O COMPLICATIONS LEFT EAR  | OTOLARYNGOLOGIST (ENT)                 |                    | 1                | 1               |  |                          |                        |                      |                 |

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| CT SINUS, Maxillofacial Area; without contrast material | ACUTE PANSINUSITIS UNSPECIFIED  | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ACUTE RECURRENT MAXILLARY SINUSITIS   | GENERAL PRACTICE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ACUTE RECURRENT MAXILLARY SINUSITIS   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ACUTE RECURRENT SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ACUTE SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ACUTE SINUSITIS UNSPECIFIED, Unknown  | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ACUTE SPHENOIDAL SINUSITIS UNSPECIFIED  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ALLERGIC RHINITIS DUE TO POLLEN   | ALLERGY & IMMUNOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ALLERGIC RHINITIS DUE TO POLLEN   | PHYSICIAN ASSISTANT           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ALLERGIC RHINITIS UNSPECIFIED, CHRONIC SINUSITIS UNSPECIFIED                                  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ANOSMIA   | NURSE PRACTITIONER            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ANOSMIA, NASAL POLYP UNSPECIFIED  | OTOLARYNGOLOGIST (ENT)        | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | BENIGN NEOPLASM MID EAR NASAL CAV ACCESS SINUSES, CYST AND MUOCOCELE OF NOSE AND NASAL SINUS, | SURGERY, ORAL & MAXILLOFACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | BENIGN NEOPLASM OF LOWER JAW BONE   | OTOLARYNGOLOGIST (ENT)        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC ETHMOIDAL SINUSITIS   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC ETHMOIDAL SINUSITIS   | PLASTIC SURGERY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC FRONTAL SINUSITIS   | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC FRONTAL SINUSITIS   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC MAXILLARY SINUSITIS   | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC MAXILLARY SINUSITIS   | OTOLARYNGOLOGIST (ENT)        | 14                 | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC MAXILLARY SINUSITIS, CHRONIC ETHMOIDAL SINUSITIS                                      | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC MAXILLARY SINUSITIS, CHRONIC ETHMOIDAL SINUSITIS, CHRONIC RHINITIS                    | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC MAXILLARY SINUSITIS, POLYP OF NASAL CAVITY  | OTOLOGIST                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC PANSINUSITIS  | OTOLARYNGOLOGIST (ENT)        | 14                 |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                              | Diagnosis Code Description   | Provider Specialty                       | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC PANSINUSITIS, ACUTE SINUSITIS UNSPECIFIED  | OTOLARYNGOLOGIST (ENT)                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC RHINITIS   | FAMILY PRACTICE                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC RHINITIS   | OTOLARYNGOLOGIST (ENT)                   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC SINUSITIS UNSPECIFIED  | ALLERGY                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC SINUSITIS UNSPECIFIED  | ALLERGY & IMMUNOLOGY                     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC SINUSITIS UNSPECIFIED  | FAMILY PRACTICE                          | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC SINUSITIS UNSPECIFIED  | INTERNAL MEDICINE                        | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC SINUSITIS UNSPECIFIED  | OTOLARYNGOLOGIST (ENT)                   | 18                 | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC SINUSITIS UNSPECIFIED  | PULMONARY DISEASES                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC SINUSITIS UNSPECIFIED  | Surgery, General                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CHRONIC SPHENOIDAL SINUSITIS, MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS, ATYPICAL FACIAL PAIN                                      | OTOLARYNGOLOGIST (ENT)                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CLEFT HARD & SOFT PALATE W/UNILATERAL CLEFT LIP  | DENTIST-GENERAL                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | CYST AND MUOCOCELE OF NOSE AND NASAL SINUS   | OTOLARYNGOLOGIST (ENT)                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | DEVIATED NASAL SEPTUM  | OTOLARYNGOLOGIST (ENT)                   | 3                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | DEVIATED NASAL SEPTUM  | SLEEP MEDICINE                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | DEVIATED NASAL SEPTUM  | SURGERY-PLASTIC OTOLARYNGOLOGICAL FACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | DEVIATED NASAL SEPTUM, CHRONIC SINUSITIS UNSPECIFIED   | INTERNAL MEDICINE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES, CHRONIC SINUSITIS UNSPECIFIED, OTH ALLERGY STATUS OTH THAN RX&BIOLOGICAL SUBSTNC | Surgery, General                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES, CHRONIC SINUSITIS UNSPECIFIED, POLYP OF NASAL CAVITY                             | FAMILY PRACTICE                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES, Unknown  | INTERNAL MEDICINE                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | DIZZINESS AND GIDDINESS  | NURSE PRACTITIONER                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED  | INTERNAL MEDICINE                        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                              | Diagnosis Code Description   | Provider Specialty            | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT SINUS, Maxillofacial Area; without contrast material | EPIGASTRIC SWELLING MASS OR LUMP, CHRONIC FRONTAL SINUSITIS  | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | FRACTURE NASAL BONES INITIAL ENCOUNTER CLOSED FX   | OTOLARYNGOLOGIST (ENT)        | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | HYPERTROPHY OF NASAL TURBINATES  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | LOCALIZED SWELLING MASS AND LUMP HEAD  | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | LOCALIZED SWELLING MASS AND LUMP HEAD  | SURGERY, ORAL & MAXILLOFACIAL |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | MALIGNANT NEOPLASM LOWER LOBE RT BRONCHUS/LUNG   | PULMONARY DISEASES            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | MALIGNANT NEOPLASM OF OROPHARYNX UNSPECIFIED   | SURGERY, ORAL & MAXILLOFACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION   | ALLERGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION   | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION   | OTOLARYNGOLOGIST (ENT)        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION   | SLEEP MEDICINE                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION, ALLERGIC RHINITIS UNSPECIFIED, ACUTE RECURRENT MAXILLARY SINUSITIS, ATYPICAL FACIAL PAIN | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION, CHRONIC PANSINUSITIS, DEVIATED NASAL SEPTUM  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION, CHRONIC SINUSITIS UNSPECIFIED, Unknown   | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION, DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES, POLYP OF NASAL CAVITY            | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION, DEVIATED NASAL SEPTUM, OBSTRUCTIVE SLEEP APNEA ADULT PEDIATRIC                           | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL CONGESTION, OTHER CHRONIC SINUSITIS  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL POLYP UNSPECIFIED  | NURSE PRACTITIONER            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL POLYP UNSPECIFIED  | OTOLARYNGOLOGIST (ENT)        | 2                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL POLYP UNSPECIFIED, CHRONIC PANSINUSITIS  | OTOLARYNGOLOGIST (ENT)        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL POLYP UNSPECIFIED, CHRONIC RHINITIS  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL POLYP UNSPECIFIED, CHRONIC SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material | NASAL POLYP UNSPECIFIED, OTHER CHRONIC SINUSITIS   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty            | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT SINUS, Maxillofacial Area; without contrast material  | NON-HODGKIN LYMPHOMA UNS UNSPECIFIED SITE   | ONCOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | OCULAR PAIN BILATERAL   | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | OTHER CHRONIC SINUSITIS   | OTOLARYNGOLOGIST (ENT)        | 18                 | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | OTHER POLYP OF SINUS  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | OTHER SPECIFIED DISEASES OF JAWS  | SURGERY, ORAL & MAXILLOFACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | OTHER SPECIFIED DISORDERS NOSE AND NASAL SINUSES  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | OTHER SPECIFIED DISORDERS NOSE AND NASAL SINUSES  | OTOLARYNGOLOGIST (ENT)        | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | OTHER SPECIFIED DISORDERS NOSE AND NASAL SINUSES  | PHYSICIAN ASSISTANT           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | OTHER SPECIFIED DISORDERS NOSE AND NASAL SINUSES, CHRONIC MAXILLARY SINUSITIS           | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | POLYP OF NASAL CAVITY   | OTOLARYNGOLOGIST (ENT)        | 4                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | POSTNASAL DRIP  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | POSTNASAL DRIP, MOUTH BREATHING, DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES | OTOLARYNGOLOGIST (ENT)        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | POSTNASAL DRIP, NASAL CONGESTION, OTHER CHRONIC POSTPROCEDURAL PAIN, Unknown            | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | POSTNASAL DRIP, NASAL CONGESTION, Unknown   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | POSTNASAL DRIP, OTHER SPECIFIED DISORDERS NOSE AND NASAL SINUSES                        | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | UNSPECIFIED ASTHMA UNCOMPLICATED, CHRONIC SINUSITIS UNSPECIFIED                         | PULMONARY DISEASES            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | UNSPECIFIED INJURY OF FACE INITIAL ENCOUNTER  | DERMATOLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material  | UNSPECIFIED INJURY OF FACE INITIAL ENCOUNTER  | EMERGENCY MEDICINE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material, followed by contrast material(s) and further sections | ACUTE SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material, followed by contrast material(s) and further sections | ANESTHESIA OF SKIN, MALIGNANT NEOPLASM OF HEAD FACE AND NECK                            | ONCOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material, followed by contrast material(s) and further sections | BENIGN NEOPLASM OF LOWER JAW BONE   | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT SINUS, Maxillofacial Area; without contrast material, followed by contrast material(s) and further sections | NASAL CONGESTION  | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT SINUS, Maxillofacial Area; without contrast material, followed by contrast material(s) and further sections | OTHER GENERAL SYMPTOMS AND SIGNS, MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED                                   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Thoracic Spine; without contrast material   | ANKYLOSING HYPEROSTOSIS SITE UNSPECIFIED   | SURGERY-NEUROLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Thoracic Spine; without contrast material   | ARTHRODESIS STATUS   | ORTHOPEDIC SURGERY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Thoracic Spine; without contrast material   | OTH HYPERTROPHIC OSTEOARTHROPATHY MULTIPLE SITES   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Thoracic Spine; without contrast material   | PAIN IN THORACIC SPINE, CERVICALGIA  | NEUROSURGERY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Thoracic Spine; without contrast material   | PAIN IN THORACIC SPINE, OTHER CHRONIC PAIN   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Thoracic Spine; without contrast material   | SPINAL STENOSIS CERVICAL REGION, DEFORMING DORSOPATHY UNSPECIFIED, OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT THORAX DX C-  | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | Surgery, Thoracic      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT THORAX DX C-  | PERSONAL HISTORY OF HODGKIN LYMPHOMA   | Pulmonary Disease      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT THORAX DX C+  | HEART TRANSPLANT STATUS  | Hematology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT THORAX LUNG CANCER SCR C-   | NEOPLASM OF UNCERTAIN BEHAVIOR OF PHARYNX  | Family Medicine        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; with contrast material(s)  | MALIGNANT MELANOMA LEFT UP LIMB INCL SHOULDER  | SURGERY-GENERAL        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | BENNETTS FX RT HAND INITIAL ENC CLOS FRACTURE  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | COLLES FX LT RADIUS INITIAL ENC CLOS FRACTURE  | SURGERY-ORTHOPEDIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | DISPLACED FX HEAD LT RADIUS INIT CLOS FRACTURE   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | DSPL FX NCK RT RADIUS INITIAL ENC CLOS FRACTURE  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | DSPL FX SHFT 4TH MC BN RT HND SUB ENC FX NONUN   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | DSPLCD FX GLND CAV SCAP RT SHOULDER INIT CLO FX  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | DSPLCD FX SHAFT LT CLAV INIT ENC CLOS FRACTURE   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | FX OTH PART SCAPULA RT SHOULDER INIT CLOS FX   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | GOUT UNSPECIFIED   | RHEUMATOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | LOCALIZED SWELLING MASS & LUMP RIGHT UPPER LIMB  | GENERAL SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | OTH IA FX LOW LT RADIUS INITIAL ENC CLOS FX  | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | OTH IA FX LOW LT RADIUS INITIAL ENC CLOS FX  | SURGERY-HAND           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | OTH IA FX LOW LT RADIUS INITIAL ENC CLOS FX  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | OTH IA FX LOWER RT RADIUS INITIAL ENC CLOS FX  | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | OTH NONDSPLC FX LOWER LT HUM INITIAL ENC CLOS FX   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CT Upper Extremity; without contrast material  | OTHER CHEST PAIN, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PRESENCE OF AORTOCORONARY BYPASS GRAFT | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | OTHER INSTABILITY RIGHT SHOULDER  | SURGERY-VASCULAR       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | Pain in joints of left hand   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | PAIN IN LEFT SHOULDER   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | PAIN IN LEFT WRIST, UNS FX LOWER LT RADIUS INITIAL ENC CLOS FRACTURE                                      | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | PAIN IN RIGHT ELBOW   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | PATHOLOGICAL FX LT FINGER INITIAL ENC FRACTURE  | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | RECURRENT DISLOCATION UNSPECIFIED SHOULDER  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | SPRAIN SC JOINT LIGAMENT INITIAL ENCOUNTER  | SURGERY-ORTHOPEDIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | UNS FX LOWER LT RADIUS INITIAL ENC CLOS FRACTURE  | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | UNS FX UPPER END RT HUMERUS SUBSQT FX RTN HLNQ, Unknown   | SURGERY-ORTHOPEDIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT Upper Extremity; without contrast material  | UNSPECIFIED DISLOC RT ULNOHUMERAL JOINT INITIAL   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT, HEART, coronary arteries and bypass grafts (when present), with contrast, including 3D image post processing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed) | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, VENTRICULAR PREMATURE DEPOLARIZATION                    | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT, HEART, coronary arteries and bypass grafts (when present), with contrast, including 3D image post processing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed) | CHEST PAIN UNSPECIFIED  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT, HEART, with contrast material, for evaluation of cardiac structure and morphology (including 3D image post processing, assessment of cardiac function, and evaluation of venous structures, if performed)  |   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT, HEART, with contrast material, for evaluation of cardiac structure and morphology (including 3D image post processing, assessment of cardiac function, and evaluation of venous structures, if performed)  |   | CARDIOVASCULAR DISEASE |                    | 1                |                 |  |                          |                        |                      |                 |

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| CT, HEART, with contrast material, for evaluation of cardiac structure and morphology (including 3D image post processing, assessment of cardiac function, and evaluation of venous structures, if performed)  | PAROXYSMAL ATRIAL FIBRILLATION   | CARDIOLOGIST           | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, with contrast material, for evaluation of cardiac structure and morphology (including 3D image post processing, assessment of cardiac function, and evaluation of venous structures, if performed)  | PAROXYSMAL ATRIAL FIBRILLATION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT, HEART, with contrast material, for evaluation of cardiac structure and morphology (including 3D image post processing, assessment of cardiac function, and evaluation of venous structures, if performed)  | THORACIC AORTIC ECTASIA  | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, with contrast material, for evaluation of cardiac structure and morphology (including 3D image post processing, assessment of cardiac function, and evaluation of venous structures, if performed)  | UNSPECIFIED ATRIAL FIBRILLATION  | THERAPIST-OCCUPATIONAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT, HEART, with contrast, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image post processing, assessment of cardiac LV function, RV structure and function and evaluation of venous structures, | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, with contrast, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image post processing, assessment of cardiac LV function, RV structure and function and evaluation of venous structures, | FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | Surgery, Neurological  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   |  | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   |  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   | AORTIC ECTASIA UNSPECIFIED SITE  | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   | BODY MASS INDEX BMI 45.0-49.9 ADULT  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   | CARDIAC MURMUR UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   | ENCOUNTER GEN ADULT MED EXAM W/O ABNORMAL FIND   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   | ENCOUNTER SCREENING FOR CARDIOVASCULAR DISORDERS   | FAMILY PRACTICE        |                    | 5                | 5               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   | ENCOUNTER SCREENING FOR CARDIOVASCULAR DISORDERS   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium   | ESSENTIAL PRIMARY HYPERTENSION, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM                             | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |



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| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM, Unknown   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | HYPERLIPIDEMIA UNSPECIFIED  | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | HYPERLIPIDEMIA UNSPECIFIED  | FAMILY PRACTICE        |                    | 3                | 3               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | HYPERLIPIDEMIA UNSPECIFIED  | INTERNAL MEDICINE      |                    | 3                | 3               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | HYPERLIPIDEMIA UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION  | INTERNAL MEDICINE      |                    | 2                | 2               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | HYPERTENSIVE HEART DISEASE WITHOUT HEART FAILURE  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | LOWER ABDOMINAL PAIN UNSPECIFIED  | GASTROENTEROLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | MIXED HYPERLIPIDEMIA  | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | MIXED HYPERLIPIDEMIA  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | MIXED HYPERLIPIDEMIA, ESSENTIAL PRIMARY HYPERTENSION  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM, Unknown | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | OBESITY UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | OTHER SPECIFIED PERSONAL RISK FACTORS NEC, PROC & TX NOT CARRIED OUT PATIENTS OTH REASON            | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | Pure hypercholesterolemia, unspecified  | INTERNAL MEDICINE      | 1                  | 4                | 3               | 1                                      |                          |                        |                      |                 |
| CT, HEART, without contrast with quantitative evaluation of coronary calcium       | TYPE 2 DIABETES MELLITUS WITH HYPERGLYCEMIA, ESSENTIAL PRIMARY HYPERTENSION, Unknown                | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE   | SURGERY-VASCULAR       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE, PRESENCE OF OTHER VASCULAR IMPLANTS AND GRAFTS           | SURGERY-VASCULAR       | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM, ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE, ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | ALCOHOLIC HEPATITIS WITHOUT ASCITES  | INTERNAL MEDICINE       |                    | 2                | 2               |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | ANEURYSM OF OTHER SPECIFIED ARTERIES   | SURGERY-VASCULAR        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | ARTERIAL FIBROMUSCULAR DYSPLASIA   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION, MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | PLASTIC SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | EPIGASTRIC PAIN  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | NONRHEUMATIC AORTIC VALVE STENOSIS   | CARDIOLOGIST            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | NONRHEUMATIC MITRAL VALVE STENOSIS, NONRHEUMATIC AORTIC VALVE STENOSIS   | Neurology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | Other specified postprocedural states  | CARDIOLOGIST            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | PLACENTA PERCRETA THIRD TRIMESTER  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | RHEUMATIC MITRAL VALVE DISEASE UNSPECIFIED   | SURGERY-CARDIOVASCULAR  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE   | CARDIOLOGIST            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMEN and PELVIS, with contrast, including non-contrast images, if performed  | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | SURGERY-THORACIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE  | SURGERY-VASCULAR        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ALCOHOLIC HEPATITIS WITHOUT ASCITES  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMEN, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ATHEROSCLEROSIS OF RENAL ARTERY  | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMEN, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION, PSEUDARTHROSIS AFTER FUSION OR ARTHRODESIS, PERITONEAL ADHESIONS POSTPROC POSTINFECTION, ARTHRODESIS STATUS   | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ABNORMAL ELECTROCARDIOGRAM, OTHER GENERAL SYMPTOMS AND SIGNS, PERIPHERAL VASCULAR DISEASE UNSPECIFIED  | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ATHEROSCLER NATIVE ART EXT INTERMIT CLAUD BILAT  | SURGERY-VASCULAR       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ATHEROSCLER NATIVE ART EXTREM REST PAIN LT LEG   | SURGERY-VASCULAR       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | MALIGNANT NEOPLASM OF MOUTH UNSPECIFIED  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | MIXED HYPERLIPIDEMIA, PERIPHERAL VASCULAR DISEASE UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOVASCULAR         |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | MIXED HYPERLIPIDEMIA, PERIPHERAL VASCULAR DISEASE UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | PERIPHERAL VASCULAR DISEASE UNSPECIFIED  | CARDIOLOGIST           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ECTASIA  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA ABDOMINAL AORTA and bilateral iliofemoral lower extremity runoff, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | VENOUS INSUFFICIENCY CHRONIC PERIPHERAL  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing  |  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing  | ABNORMAL BLOOD-GAS LEVEL, DYSPNEA UNSPECIFIED, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS   | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing  | ABNORMAL COAGULATION PROFILE, Unknown  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing  | ABNORMAL ELECTROCARDIOGRAM, THORACIC AORTIC ECTASIA  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM, ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE, ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, THORACIC AORTIC ECTASIA, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, VENTRICULAR PREMATURE DEPolarIZATION, NONRHEUMATIC MITRAL VALVE PROLAPSE, OTHER CARDIOMYOPATHIES | CARDIOVASCULAR DISEASE | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ACUTE RESPIRATORY FAILURE WITH HYPOXIA   | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | AORTIC ANEURYSM UNSPECIFIED SITE WITHOUT RUPTURE   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | AORTIC ECTASIA UNSPECIFIED SITE  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | AORTIC ECTASIA UNSPECIFIED SITE  | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS   | SURGERY-CARDIOVASCULAR | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ATHEROEMBOLISM OF LEFT LOWER EXTREMITY   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | CHEST PAIN UNSPECIFIED   | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | CHEST PAIN UNSPECIFIED   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | COMP OTH ARTERY FOLLOWING PROC NEC INITIAL ENC   | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | COUGH, SHORTNESS OF BREATH   | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | COVID-19  | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | DYSPNEA UNSPECIFIED   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | DYSPNEA UNSPECIFIED   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | DYSPNEA UNSPECIFIED   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | FEVER UNSPECIFIED, DYSPNEA UNSPECIFIED                                      | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | HEMOCHROMATOSIS UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | HEMOPTYSIS, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD                | THORACIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | HYPOXEMIA   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | HYPOXEMIA, DYSPNEA UNSPECIFIED  | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | MALIG NEOPLASM UPPER-INNER QUAD RT FEMALE BREAST                            | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | MALIGNANT NEOPLASM OF LEFT OVARY  | GYNECOLOGY ONCOLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | NONRHEUMATIC AORTIC VALVE INSUFFICIENCY                                     | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | NONRHEUMATIC AORTIC VALVE INSUFFICIENCY, PRESENCE OF PROSTHETIC HEART VALVE | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | NONRHEUMATIC AORTIC VALVE STENOSIS  | CARDIOLOGIST            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTH PULMONARY EMBOLISM W/O ACUTE COR PULMONALE                              | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTH PULMONARY EMBOLISM W/O ACUTE COR PULMONALE                              | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTH PULMONARY EMBOLISM W/O ACUTE COR PULMONALE                                      | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTHER CHEST PAIN  | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTHER CHEST PAIN  | FAMILY PRACTICE        | 2                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTHER CHEST PAIN  | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | Other congenital malformations of aorta   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTHER DISEASES OF PULMONARY VESSELS   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTHER FORMS OF ANGINA PECTORIS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTHER FORMS OF DYSPNEA  | PULMONARY DISEASES     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, AORTIC ECTASIA UNSPECIFIED SITE   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY, OTHER CHEST PAIN, SHORTNESS OF BREATH | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | Other specified postprocedural states   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | PAIN IN THORACIC SPINE, SHORTNESS OF BREATH   | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | PERSONAL HISTORY OF PULMONARY EMBOLISM  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | PERSONAL HISTORY OF PULMONARY EMBOLISM  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | PRESENCE OF PROSTHETIC HEART VALVE  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | RHEUMATIC MITRAL VALVE DISEASE UNSPECIFIED  | SURGERY-CARDIOVASCULAR | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | SHORTNESS OF BREATH  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | SHORTNESS OF BREATH  | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | SHORTNESS OF BREATH  | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | SHORTNESS OF BREATH, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG                     | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | SOLITARY PULMONARY NODULE  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | TACHYCARDIA UNSPECIFIED, CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH                   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE   | CARDIOLOGIST           | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE   | CARDIOVASCULAR DISEASE | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE   | SURGERY-CARDIOVASCULAR | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE   | SURGERY-THORACIC       | 2                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE, ESSENTIAL PRIMARY HYPERTENSION               | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM | SURGERY-THORACIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | THORACIC AORTIC ECTASIA  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA CHEST; without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | UNSTABLE ANGINA  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing                          |  | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC, DIZZINESS AND GIDDINESS                             | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC, OCCLUSION & STENOSIS RT ANTERIOR CEREBRAL ARTERY    | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | CEREBRAL ANEURYSM NONRUPTURED   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | CEREBRAL ANEURYSM NONRUPTURED   | NEUROLOGY          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | CEREBRAL ANEURYSM NONRUPTURED   | SURGERY-NEUROLOGY  | 2                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | CEREBRAL INFARCTION UNSPECIFIED, OCCLUSION & STENOSIS UNS VERTEBRAL ARTERY                            | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | CERVICALGIA   | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | CHRONIC TENSION-TYPE HEADACHE NOT INTRACTABLE   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | DISORDER OF ARTERIES AND ARTERIOLES UNSPECIFIED   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | DISSECTION OF CAROTID ARTERY  | NEUROLOGY          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | HORNERS SYNDROME, UNSPECIFIED PTOSIS OF UNSPECIFIED EYELID  | OPHTHALMOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | INTRACRANL & INTRASPINL PHLEBIT & THROMBOPHLEBIT  | NEUROSURGERY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | NONTRAUMATIC SUBARACHNOID HEMORRHAGE UNSPECIFIED  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | OCCLUSION AND STENOSIS OF RIGHT CAROTID ARTERY  | Rheumatology       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | OCULAR PAIN RIGHT EYE, DIZZINESS AND GIDDINESS, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM, Unknown | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing | OTHER HEADACHE SYNDROME   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |



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|---|--|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing                                    | OTHER VISUAL DISTURBANCES  | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing                                    | PERSONAL HX TIA & CEREB INFARCT NO RESID DEFICIT   | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing                                    | PERSONAL HX TIA & CEREB INFARCT NO RESID DEFICIT   | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing                                    | SYNCOPE AND COLLAPSE   | NEUROLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing                                    | TINNITUS RIGHT EAR   | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing                                    | TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED   | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA HEAD, without contrast, followed by contrast and further sections, including image post-processing                                    | VERTEBRO-BASILAR ARTERY SYNDROME   | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA Lower Extremity, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | ANKYLOSIS LEFT KNEE, OTHER SPECIFIED JOINT DISORDERS UNS JOINT, TRAUMATIC ARTHROPATHY LEFT KNEE    | ORTHOPEDIC SURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA Lower Extremity, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS  | SURGERY, ORAL & MAXILLOFACIAL |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA Lower Extremity, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing | MALIGNANT NEOPLASM OF OROPHARYNX UNSPECIFIED   | SURGERY, ORAL & MAXILLOFACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    |  | NEUROLOGY                     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC, DIZZINESS AND GIDDINESS                          | NEUROLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC, OCCLUSION & STENOSIS RT ANTERIOR CEREBRAL ARTERY | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    | CEREBRAL INFARCTION UNSPECIFIED, OCCLUSION & STENOSIS UNS VERTEBRAL ARTERY                         | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    | CERVICALGIA  | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    | DISSECTION OF CAROTID ARTERY   | NEUROLOGY                     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    | DISSECTION OF VERTEBRAL ARTERY   | NEUROLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    | ESSENTIAL PRIMARY HYPERTENSION   | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing                                    | HORNERS SYNDROME   | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | HORNERS SYNDROME, UNSPECIFIED PTOSIS OF UNSPECIFIED EYELID | OPHTHALMOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | INTRACRANL & INTRASPINL PHLEBIT & THROMBOPHLEBIT           | NEUROSURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | NONTRAUMATIC SUBARACHNOID HEMORRHAGE UNSPECIFIED           | NEUROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | OCCLUSION & STENOSIS BILATERAL CAROTID ARTERIES            | FAMILY PRACTICE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | OCCLUSION AND STENOSIS OF LEFT CAROTID ARTERY              | NEUROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | OCCLUSION AND STENOSIS OF RIGHT CAROTID ARTERY             | NEUROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | OCCLUSION AND STENOSIS OF RIGHT CAROTID ARTERY             | Rheumatology         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | OTHER HEADACHE SYNDROME                                    | NEUROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | PERSONAL HX TIA & CEREB INFARCT NO RESID DEFICIT           | INTERNAL MEDICINE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | PERSONAL HX TIA & CEREB INFARCT NO RESID DEFICIT           | NEUROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | SECONDARY MALIGNANT NEOPLASM OF UNSPECIFIED LUNG           | Gynecologic Oncology |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | SYNCOPE AND COLLAPSE                                       | NEUROLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | TINNITUS RIGHT EAR   | INTERNAL MEDICINE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED             | NEUROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CTA NECK, without contrast, followed by contrast and further sections, including image post-processing | VERTEBRO-BASILAR ARTERY SYNDROME                           | NEUROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Cultured chondrocytes implnt   | OTHER DERANGEMENTS OF PATELLA RIGHT KNEE                   | SURGERY- ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| CYSTO/URETERO W/LITHOTRIPSY  | CALCULUS OF URETER   | Family Medicine      |                    | 1                | 1               |  |                          |                        |                      |                 |
| CYSTOSCOPY AND TREATMENT   | CALCULUS OF KIDNEY   | Urology              |                    | 2                | 2               |  |                          |                        |                      |                 |
| CYSTOSCOPY AND TREATMENT   | DVTRCLI OF LG INT W/O PERFORATION OR ABSCESS W/O BLEEDING  | Surgery, General     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CYSTOSCOPY AND TREATMENT   | MALIGNANT NEOPLASM OF BLADDER, UNSPECIFIED                 | Urology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CYSTOURETERO W/CONGEN REPR   | CONGENITAL POSTERIOR URETHRAL VALVES                       | Urology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| CYSTOURETHRO W/ADDL IMPLANT  | BENIGN PROSTATIC HYPERPLASIA WITH LOWER URINARY TRACT SYMP | Urology              | 3                  |                  |                 |  |                          |                        |                      |                 |
| CYSTOURETHRO W/IMPLANT   | BENIGN PROSTATIC HYPERPLASIA WITH LOWER URINARY TRACT SYMP | Urology              | 5                  |                  |                 |  |                          |                        |                      |                 |
| CYTARABINE HCL 100 MG INJ  | ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION                  | Hematology           | 3                  |                  |                 |  |                          |                        |                      |                 |
| CYTARABINE HCL 100 MG INJ  | MYELOID SARCOMA, NOT HAVING ACHIEVED REMISSION             | Hematology           | 3                  |                  |                 |  |                          |                        |                      |                 |
| CYTOG ALYS CHRML ABNR CGH  | CONGENITAL PES CAVUS, UNSPECIFIED FOOT                     | Neurology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| CYTOG ALYS CHRML ABNR SNP CGH  | DEVELOPMENTAL DISORDER OF SPEECH AND LANGUAGE, UNSPECIFIED | Genetics             | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-----------------------------------|--|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| CYTOG ALYS CHRML ABNR SNPCGH      | EXPRESSIVE LANGUAGE DISORDER                                 | Family Medicine              |                    | 1                | 1               |  |                          |                        |                      |                 |
| CYTOG ALYS CHRML ABNR SNPCGH      | GALACTOSEMIA   | Pediatrics                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| CYTOG ALYS CHRML ABNR SNPCGH      | MATERNAL CARE FOR CHROMOSOMAL ABNORMALITY IN FETUS, UNSP     | Obstetrics/Gynecology        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CYTOG ALYS CHRML ABNR SNPCGH      | MISSED ABORTION  | Obstetrics/Gynecology        |                    | 1                | 1               |  |                          |                        |                      |                 |
| CYTOG ALYS CHRML ABNR SNPCGH      | OTHER MICRODELETIONS   | Maternal And Fetal Medicine  | 1                  |                  |                 |  |                          |                        |                      |                 |
| CYTOG ALYS CHRML ABNR SNPCGH      | SENSORINEURAL HEARING LOSS, BILATERAL                        | Genetics                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| CYTOG ALYS CHRML ABNR SNPCGH      | SUPERVISION OF ELDERLY MULTIGRAVIDA, SECOND TRIMESTER        | Maternal And Fetal Medicine  | 1                  |                  |                 |  |                          |                        |                      |                 |
| DALFAMPRIDINE ER 10 MG TAB ER 12H |  | Other                        |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| DALIRESP 250 MCG TABLET           |  | PCP/Pediatrician             | 1                  |                  |                 |  |                          |                        |                      |                 |
| DAPSONE 5 % GEL (GRAM)            |  | Dermatology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| DAPSONE 7.5 % GEL W/PUMP          |  | Other                        | 2                  | 7                | 7               |  |                          |                        |                      |                 |
| DARATUMUMAB, HYALURONIDASE        | MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION               | Internal Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| DARBEPOETIN ALFA, ESRD USE        | END STAGE RENAL DISEASE                                      | Nephrology                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| DARBEPOETIN ALFA, NON-ESRD        | ANEMIA IN CHRONIC KIDNEY DISEASE                             | Hematology                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| DARBEPOETIN ALFA, NON-ESRD        | ANEMIA IN CHRONIC KIDNEY DISEASE                             | Nephrology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DARBEPOETIN ALFA, NON-ESRD        | AUTOIMMUNE HEMOLYTIC ANEMIA, UNSPECIFIED                     | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DARBEPOETIN ALFA, NON-ESRD        | CHRONIC KIDNEY DISEASE, STAGE 3 UNSPECIFIED                  | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DARBEPOETIN ALFA, NON-ESRD        | CHRONIC KIDNEY DISEASE, STAGE 5                              | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DARBEPOETIN ALFA, NON-ESRD        | WARM AUTOIMMUNE HEMOLYTIC ANEMIA                             | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DARIFENACIN ER 7.5 MG TAB ER 24H  |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DAYVIGO 10 MG TABLET              |  | Other                        | 3                  |                  |                 |  |                          |                        |                      |                 |
| DAYVIGO 5 MG TABLET               |  | Other                        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| DECOMPRESS SPINAL CORD LMBR       | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DECOMPRESS SPINAL CORD LMBR       | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DECOMPRESS SPINE CORD ADD-ON      | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DEGARELIX INJECTION               | OTHER GENERAL SYMPTOMS AND SIGNS                             | Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| DELZICOL 400 MG CAP(DRTAB)        |  | Gastroenterology             |                    | 2                | 2               |  |                          |                        |                      |                 |
| DENAVIR 1 % CREAM(GM)             |  | Other                        |                    | 3                | 3               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION               | AGE-REL OSTEOPOR W CURRENT PATH FRACTURE, UNSP SITE, SEQUELA | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION               | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Endocrinology And Metabolism | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION               | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Family Medicine              | 6                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION               | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Family Nurse Practitioner    | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION               | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION               | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Internal Medicine            | 4                  | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|--|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| DENOSUMAB INJECTION        | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Neurology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Obstetrics/Gynecology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Oncology                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Physician Assistant             | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE   | Rheumatology                    | 13                 |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | LOCALIZED OSTEOPOROSIS [LEQUESNE]                            | Internal Medicine               |                    | 1                | 1               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | MALIG NEOPLM OF UPPER-OUTER QUADRANT OF RIGHT FEMALE BREAST  | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | MALIGNANT NEOPLASM OF ENDOMETRIUM                            | Family Medicine                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST | Internal Medicine               | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION               | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | OTH DISRD OF BONE DENSITY AND STRUCTURE, UNSPECIFIED SITE    | Family Medicine                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | OTH DISRD OF BONE DENSITY AND STRUCTURE, UNSPECIFIED SITE    | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | OTH DISRD OF BONE DENSITY AND STRUCTURE, UNSPECIFIED SITE    | Internal Medicine               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | OTH DISRD OF BONE DENSITY AND STRUCTURE, UNSPECIFIED SITE    | Oncology                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | OTHER OSTEOPOROSIS WITHOUT CURRENT PATHOLOGICAL FRACTURE     | Rheumatology                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | PRESENCE OF CORONARY ANGIOPLASTY IMPLANT AND GRAFT           | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | SECONDARY MALIGNANT NEOPLASM OF BONE                         | Hematology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| DENOSUMAB INJECTION        | VENTRICULAR TACHYCARDIA                                      | Internal Medicine               |                    | 1                | 1               |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | CELLULITIS AND ABSCESS OF MOUTH                              | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | DENTAL CARIES ON SMOOTH SURFACE PENETRATING INTO DENTIN      | Dentistry                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | DENTAL CARIES, UNSPECIFIED                                   | Anesthesiology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | DENTAL CARIES, UNSPECIFIED                                   | Dentistry                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | DENTAL CARIES, UNSPECIFIED                                   | Family Medicine                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | DENTAL CARIES, UNSPECIFIED                                   | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | DENTAL CARIES, UNSPECIFIED                                   | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | ENCOUNTER FOR DENTAL EXAM AND CLEANING W/O ABNORMAL FINDINGS | Dentistry                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | ENCOUNTER FOR DENTAL EXAM AND CLEANING W/O ABNORMAL FINDINGS | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE   | IMPACTED TEETH   | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| DENTAL SURGERY PROCEDURE  | PATIENT'S NONCOMPLIANCE W OTH MEDICAL TREATMENT AND REGIMEN   | Dentistry                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| DENTAL SURGERY PROCEDURE  | UNSPECIFIED CYST OF JAW   | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESCOVY   | HIV Prep  | Infectious Disease              |                    |                  |                 |  |                          | 1                      |                      |                 |
| DESCOVY   | Other   | Family Medicine                 |                    |                  |                 |  |                          | 1                      |                      |                 |
| DESCOVY   | PrEP  | Surgery, General                |                    |                  |                 |  |                          | 1                      |                      |                 |
| DESCOVY 200MG-25MG TABLET   |   | Infectious Disease              |                    | 4                | 4               |  |                          |                        |                      |                 |
| DESCOVY 200MG-25MG TABLET   |   | Internal Medicine               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| DESCOVY 200MG-25MG TABLET   |   | Other                           | 10                 | 40               | 40              |  |                          |                        |                      |                 |
| DESCOVY 200MG-25MG TABLET   |   | PCP/Pediatrician                | 2                  | 24               | 24              |  |                          |                        |                      |                 |
| DESIGN MLC DEVICE FOR IMRT  | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST  | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESIGN MLC DEVICE FOR IMRT  | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK   | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESTROY NERVE FACE MUSCLE   | BELL'S PALSY  | Neurology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESTROY NERVE FACE MUSCLE   | BLEPHAROSPASM   | Ophthalmology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESTROY NERVE FACE MUSCLE   | CHRONIC MIGRAINE W/O AURA, INTRACTABLE, W STATUS MIGRAINOSUS  | Neurology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| DESTROY NERVE FACE MUSCLE   | IDIOPATHIC OROFACIAL DYSTONIA   | Dentistry                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESTROY NERVE FACE MUSCLE   | OTHER SPECIFIED FORMS OF TREMOR   | Physical Medicine               | 3                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint | CERVICALGIA, OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE   | NEUROSURGERY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | ANESTHESIOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | PAIN MANAGEMENT                 | 5                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint          | CERVICALGIA, OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE   | NEUROSURGERY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint          | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | ANESTHESIOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint          | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | PAIN MANAGEMENT                 | 5                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint          | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, CERVICALGIA, ENCOUNTER FOR SCREENING FOR OTHER VIRAL DISEASES | ANESTHESIOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint     |   | PAIN MANAGEMENT                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint     | LOW BACK PAIN, POSTLAMINECTOMY SYNDROME NEC   | ANESTHESIOLOGY                  | 2                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | LOW BACK PAIN, POSTLAMINECTOMY SYNDROME NEC, UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE                        | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | OTH INTERVERTEBRAL DISC DEGEN LUMBOSACRAL REGION  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | OTHER SPONDYLOSIS LUMBAR REGION   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | OTHER SPONDYLOSIS LUMBOSACRAL REGION, ARTHROPATHY UNSPECIFIED   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT                    | 11                 |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | PAIN MANAGEMENT                    | 6                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN, OTHER CHRONIC PAIN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | UNS INFLAMMATORY SPONDYLOPATHY LUMBAR REGION  | PAIN MANAGEMENT                    | 7                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint | UNS THOR THORACOLUMBAR LUMBOSACRAL IV DISC D/O  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint          |   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint          | LOW BACK PAIN, POSTLAMINECTOMY SYNDROME NEC   | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint          | LOW BACK PAIN, POSTLAMINECTOMY SYNDROME NEC, UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE                        | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | OTH INTERVERTEBRAL DISC DEGEN LUMBOSACRAL REGION   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | OTHER SPONDYLOSIS LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | OTHER SPONDYLOSIS LUMBOSACRAL REGION, ARTHROPATHY UNSPECIFIED  | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN   | PAIN MANAGEMENT                    | 11                 |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN                | INFECTIOUS DISEASES                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN  | PAIN MANAGEMENT                    | 6                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN, OTHER CHRONIC PAIN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | UNS INFLAMMATORY SPONDYLOPATHY LUMBAR REGION   | PAIN MANAGEMENT                    | 7                  |                  |                 |  |                          |                        |                      |                 |
| Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | UNS THOR THORACOLUMBAR LUMBOSACRAL IV DISC D/O   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESTRUCTION OF SKIN LESIONS  | CONGENITAL NON-NEOPLASTIC NEVUS  | Pediatrics                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESTRUCTION OF SKIN LESIONS  | NEVUS, NON-NEOPLASTIC  | Dermatology                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| DESVENLAFAXINE ER 100 MG TAB ER 24H  |  | Other                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESVENLAFAXINE ER 50 MG TAB ER 24H   |  | Other                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| DEXCOM G6 EACH   |  | Endocrinology                      | 14                 | 2                | 2               |  |                          |                        |                      |                 |
| DEXCOM G6 EACH   |  | Endocrinology And Metabolism       | 2                  |                  |                 |  |                          |                        |                      |                 |
| DEXCOM G6 EACH   |  | Other                              | 29                 | 1                | 1               |  |                          |                        |                      |                 |
| DEXCOM G6 EACH   |  | PCP/Pediatrician                   | 1                  | 4                | 4               |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| DEXCOM G6 EACH  |   | Pediatric Endocrinology | 3                  |                  |                 |  |                          |                        |                      |                 |
| DEXILANT 60 MG CAP DR BP  |   | Gastroenterology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DEXILANT 60 MG CAP DR BP  |   | Other                   | 3                  |                  |                 |  |                          |                        |                      |                 |
| DEXILANT 60 MG CAP DR BP  |   | PCP/Pediatrician        |                    | 1                | 1               |  |                          |                        |                      |                 |
| DESMETHYLPHENIDATE HCL 5 MG TABLET                                  |   | Other                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DESMETHYLPHENIDATE HCL ER 20 MG CPBP 50-50                          |   | Other                   | 5                  |                  |                 |  |                          |                        |                      |                 |
| DESMETHYLPHENIDATE HCL ER 5 MG CPBP 50-50                           |   | Other                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE   | Bipolar disorder, current episode depressed, moderate   | Psychiatry              |                    |                  |                 |  |                          | 1                      |                      |                 |
| DEXTROAMPHETAMINE SULFATE 5 MG TABLET                               |   | Other                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE SULFATE ER 10 MG CAPSULE SA                       |   | Other                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE SULFATE ER 5 MG CAPSULE SA                        |   | Other                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHET ER 10 MG CAP.SR 24H                        |   | Other                   | 9                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHET ER 15 MG CAP.SR 24H                        |   | Other                   | 5                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHET ER 20 MG CAP.SR 24H                        |   | Other                   | 15                 |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHET ER 20 MG CAP.SR 24H                        |   | PCP/Pediatrician        | 4                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHET ER 25 MG CAP.SR 24H                        |   | Other                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHET ER 30 MG CAP.SR 24H                        |   | Other                   | 7                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHET ER 30 MG CAP.SR 24H                        |   | PCP/Pediatrician        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHETAMINE 10 MG TABLET                          |   | Other                   | 4                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHETAMINE 10 MG TABLET                          |   | PCP/Pediatrician        | 2                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHETAMINE 15 MG TABLET                          |   | Other                   | 4                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHETAMINE 20 MG TABLET                          |   | Other                   | 5                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHETAMINE 30 MG TABLET                          |   | Other                   | 4                  |                  |                 |  |                          |                        |                      |                 |
| DEXTROAMPHETAMINE-AMPHETAMINE 5 MG TABLET                           |   | Other                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| Diagnostic Nuclear Medicine Procedures on the Cardiovascular System | HYPERLIPIDEMIA UNSPECIFIED, OTHER FORMS OF DYSPNEA, HYPERTROPHY OF BREAST, ANGINA PECTORIS UNSPECIFIED, CORONARY ATHEROSCLEROSIS DUE TO LIPID RICH PLAQUE     | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Diagnostic Nuclear Medicine Procedures on the Cardiovascular System | OTHER FORMS OF DYSPNEA, OTHER CHEST PAIN  | CARDIOLOGIST            |                    | 2                | 2               |  |                          |                        |                      |                 |
| Diagnostic Nuclear Medicine Procedures on the Cardiovascular System | PALPITATIONS, DYSPNEA UNSPECIFIED, OVERWEIGHT, CARDIOMYOPATHY UNSPECIFIED, LEFT BUNDLE-BRANCH BLOCK UNSPECIFIED, BODY MASS INDEX BMI 27.0-27.9 ADULT, Unknown | CARDIOLOGIST            | 1                  |                  |                 |  |                          |                        |                      |                 |



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|---|---|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Diagnostic Nuclear Medicine Procedures on the Cardiovascular System | SARCOID MYOCARDITIS   | CARDIOLOGIST                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Diagnostic Nuclear Medicine Procedures on the Cardiovascular System | SARCOID MYOCARDITIS   | CARDIOVASCULAR DISEASE       |                    | 3                | 3               |  |                          |                        |                      |                 |
| Diagnostic Nuclear Medicine Procedures on the Cardiovascular System | SARCOIDOSIS UNSPECIFIED   | CARDIOVASCULAR DISEASE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Diagnostic Nuclear Medicine Procedures on the Cardiovascular System | SHORTNESS OF BREATH   | CARDIOVASCULAR DISEASE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Diagnostic Nuclear Medicine Procedures on the Cardiovascular System | UNSPECIFIED ATRIAL FIBRILLATION, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR DISEASE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen | Unspecified abdominal pain                                      | Other                        |                    |                  |                 |  |                          | 1                      |                      |                 |
| DIALYSIS ONE EVALUATION   | END STAGE RENAL DISEASE   | Nephrology                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| DIALYSIS PROCEDURE  | ACUTE KIDNEY FAILURE, UNSPECIFIED                               | Nephrology                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| DIALYSIS PROCEDURE  | END STAGE RENAL DISEASE   | Dialysis                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| DIALYSIS PROCEDURE  | END STAGE RENAL DISEASE   | Internal Medicine            | 2                  |                  |                 |  |                          |                        |                      |                 |
| DIALYSIS PROCEDURE  | END STAGE RENAL DISEASE   | Nephrology                   | 7                  | 1                | 1               |  |                          |                        |                      |                 |
| DICLOFENAC SODIUM 3 % GEL (GRAM)                                    |   | Other                        |                    | 3                | 2               | 1                                      |                          |                        |                      |                 |
| DIMETHYL FUMARATE 120 MG CAPSULE DR                                 |   | Neurology                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| DIMETHYL FUMARATE 120-240 MG CAPSULE DR                             |   | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DIMETHYL FUMARATE 240 MG CAPSULE DR                                 |   | Behavioral Health            | 1                  |                  |                 |  |                          |                        |                      |                 |
| DIMETHYL FUMARATE 240 MG CAPSULE DR                                 |   | Neurology                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| DIMETHYL FUMARATE 240 MG CAPSULE DR                                 |   | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | OTHER GENERAL SYMPTOMS AND SIGNS                                | DME                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | OTHER GENERAL SYMPTOMS AND SIGNS                                | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA                     | Endocrinology And Metabolism | 3                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA                     | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | TYPE 1 DIABETES MELLITUS WITH UNSPECIFIED COMPLICATIONS         | Family Medicine              | 2                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | TYPE 1 DIABETES MELLITUS WITH UNSPECIFIED COMPLICATIONS         | Pediatrics                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS                  | Endocrinology And Metabolism | 3                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS                  | Family Medicine              | 3                  |                  |                 |  |                          |                        |                      |                 |
| DISPOSABLE SENSOR, CGM SYS  | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS                  | Internal Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| DOCETAXEL INJECTION   | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                       | Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| DORZOLAMIDE-TIMOLOL 2 %-0.5 % DROPERETTE                            |   | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| DOXORUBICIN HCL INJECTION   | BURKITT LYMPHOMA, UNSPECIFIED SITE                              | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| DOXYCYCLINE IR-DR 40 MG CAP IR DR                                   |   | Other                        |                    | 2                | 2               |  |                          |                        |                      |                 |
| DOXYLAMINE SUCC-PYRIDOXINE HCL 10 MG-10MG TABLET DR                 |   | OB/GYN                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| DRUGS UNCLASSIFIED INJECTION  | FEMALE INFERTILITY, UNSPECIFIED                                 | Family Medicine              | 2                  |                  |                 |  |                          |                        |                      |                 |
| DRUGS UNCLASSIFIED INJECTION  | FEMALE INFERTILITY, UNSPECIFIED                                 | Obstetrics/Gynecology        | 4                  |                  |                 |  |                          |                        |                      |                 |

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|-------------------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| DRUGS UNCLASSIFIED INJECTION        | FEMALE INFERTILITY, UNSPECIFIED                              | Reproductive Endocrinology/Infertility | 13                 |                  |                 |  |                          |                        |                      |                 |
| DRUGS UNCLASSIFIED INJECTION        | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| DUEXIS 800-26.6MG TABLET            |  | Other                                  |                    | 4                | 4               |  |                          |                        |                      |                 |
| DUEXIS 800-26.6MG TABLET            |  | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| DUPIXENT                            | Other  | Dermatology                            |                    |                  |                 |  |                          |                        | 1                    |                 |
| DUPIXENT                            | SEVERE PERSISTENT ASTHMA, UNCOMPLICATED                      | Urology                                |                    |                  |                 |  |                          | 1                      |                      |                 |
| DUPIXENT PEN 300 MG/2ML PEN INJCTR  |  | Dermatology                            | 2                  |                  |                 |  |                          |                        |                      |                 |
| DUPIXENT PEN 300 MG/2ML PEN INJCTR  |  | ENT/Otolaryngology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| DUPIXENT PEN 300 MG/2ML PEN INJCTR  |  | Other                                  | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| DUPIXENT SYRINGE 200MG/1.14 SYRINGE |  | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| DUPIXENT SYRINGE 300 MG/2ML SYRINGE |  | Dermatology                            | 4                  |                  |                 |  |                          |                        |                      |                 |
| DUPIXENT SYRINGE 300 MG/2ML SYRINGE |  | ENT/Otolaryngology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| DUPIXENT SYRINGE 300 MG/2ML SYRINGE |  | Other                                  | 18                 | 3                | 3               |  |                          |                        |                      |                 |
| DURABLE MEDI EQUIP MISC             | Cerebral palsy, unspecified                                  | Orthopedic Surgery                     |                    |                  |                 |  |                          | 1                      |                      |                 |
| DURABLE MEDI EQUIP MISC             | Cystic fibrosis with pulmonary manifestations                | Pediatric Pulmonology                  |                    |                  |                 |  |                          |                        | 1                    |                 |
| DURABLE MEDICAL EQUIPMENT MI        | CYSTIC FIBROSIS WITH PULMONARY MANIFESTATIONS                | Pediatric Pulmonology                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| DURABLE MEDICAL EQUIPMENT MI        | SLEEP APNEA, UNSPECIFIED                                     | Family Medicine                        | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| DURABLE MEDICAL EQUIPMENT MI        | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE                | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| DUROLANE 60 MG/3 ML SYRINGE         |  | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| DX BRONCHOSCOPE/WASH                | SOLITARY PULMONARY NODULE                                    | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Dyanavel                            | Attention-deficit hyperactivity disorder, unspecified type   | Pediatrics                             |                    |                  |                 |  |                          | 1                      |                      |                 |
| DYANAVAL XR 2.5 MG/ML SUS BP 24H    |  | Other                                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| EAR CARTILAGE GRAFT                 | ADHESIVE RIGHT MIDDLE EAR DISEASE                            | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| EAR CARTILAGE GRAFT                 | BASAL CELL CARCINOMA OF SKIN OF NOSE                         | Dermatology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| EAR CARTILAGE GRAFT                 | DEVIATED NASAL SEPTUM  | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| EAR CARTILAGE GRAFT                 | OTHER SPECIFIED DISORDERS OF EUSTACHIAN TUBE, BILATERAL      | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| EAR CARTILAGE GRAFT                 | OTHER SPECIFIED DISORDERS OF NOSE AND NASAL SINUSES          | Otolaryngology (Ear, Nose, And Throat) | 2                  |                  |                 |  |                          |                        |                      |                 |
| EAR CARTILAGE GRAFT                 | SQUAMOUS CELL CARCINOMA OF SKIN OF NOSE                      | Dermatology                            | 1                  |                  |                 |  |                          |                        |                      |                 |

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| EAR CARTILAGE GRAFT        | UNSPECIFIED CHOLESTEATOMA, LEFT EAR  | Pediatric Otolaryngology | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO GUIDE FOR BIOPSY      | ELEVATED PROSTATE SPECIFIC ANTIGEN [PSA]   | Urology                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL ELECTROCARDIOGRAM   | CARDIOLOGIST             | 2                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL ELECTROCARDIOGRAM   | FAMILY PRACTICE          |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL ELECTROCARDIOGRAM   | INTERNAL MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL ELECTROCARDIOGRAM, OTHER CHEST PAIN   | CARDIOLOGIST             | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL ELECTROCARDIOGRAM, OTHER CHEST PAIN, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | FAMILY PRACTICE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL ELECTROCARDIOGRAM, OTHER FORMS OF DYSPNEA   | INTERNAL MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL ELECTROCARDIOGRAM, UNSPECIFIED ASTHMA UNCOMPLICATED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, OTHER HYPERTROPHIC CARDIOMYOPATHY, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR DISEASE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | FAMILY PRACTICE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | PEDIATRICS               | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ANGINA PECTORIS UNSPECIFIED  | INTERNAL MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOLOGIST             | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOVASCULAR DISEASE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOVASCULAR DISEASE   | 2                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | FAMILY PRACTICE          |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ATHEROSCLEROSIS CABG WITHOUT ANGINA PECTORIS   | CARDIOVASCULAR DISEASE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | BRADYCARDIA UNSPECIFIED, CARDIAC MURMUR UNSPECIFIED, DYSPNEA UNSPECIFIED   | CARDIOVASCULAR DISEASE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | CARDIOMEGALY, NONRHEUMATIC MITRAL VALVE INSUFFICIENCY, NONRHEUMATIC AORTIC VALVE INSUFFICIENCY   | CARDIOVASCULAR DISEASE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | CHEST PAIN UNSPECIFIED   | CARDIOVASCULAR DISEASE   | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | CHEST PAIN UNSPECIFIED   | EMERGENCY MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | CHEST PAIN UNSPECIFIED   | FAMILY PRACTICE          |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | CHEST PAIN UNSPECIFIED   | GENERAL PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | CHEST PAIN UNSPECIFIED   | INTERNAL MEDICINE        | 1                  | 4                | 4               |  |                          |                        |                      |                 |

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| ECHO TRANSTHORACIC         | CHEST PAIN UNSPECIFIED, PRECORDIAL PAIN  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | DIZZINESS AND GIDDINESS, CHEST PAIN UNSPECIFIED, DYSPNEA UNSPECIFIED, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | DYSPNEA UNSPECIFIED  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | DYSPNEA UNSPECIFIED  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | DYSPNEA UNSPECIFIED  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | DYSPNEA UNSPECIFIED  | INTERNAL MEDICINE      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | DYSPNEA UNSPECIFIED, TYPE 2 DIABETES MELLITUS W/OTH CIRCULATORY COMP   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ESSENTIAL PRIMARY HYPERTENSION, PERSONAL HISTORY OF NICOTINE DEPENDENCE, PERSONAL HISTORY OTH DISEASES CIRCULATORY SYSTEM, Unknown                         | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | HYPERLIPIDEMIA UNSPECIFIED, ABNORMAL ELECTROCARDIOGRAM, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS, ESSENTIAL PRIMARY HYPERTENSION                     | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | HYPERLIPIDEMIA UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | HYPERLIPIDEMIA UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, PRESENCE OF CORONARY ANGIOPLASTY IMPLANT & GRAFT, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | HYPERLIPIDEMIA UNSPECIFIED, PALPITATIONS, DIZZINESS AND GIDDINESS, CHEST PAIN UNSPECIFIED, DYSPNEA UNSPECIFIED   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | ISCHEMIC CARDIOMYOPATHY  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | MIXED HYPERLIPIDEMIA, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PERSONAL HISTORY OF NICOTINE DEPENDENCE   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | MIXED HYPERLIPIDEMIA, PRECORDIAL PAIN, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | OTHER CHEST PAIN   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | OTHER CHEST PAIN   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | OTHER CHEST PAIN   | FAMILY PRACTICE        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | OTHER CHEST PAIN   | INTERNAL MEDICINE      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | OTHER CHEST PAIN, DYSPNEA UNSPECIFIED  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC         | OTHER CHEST PAIN, DYSPNEA UNSPECIFIED  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |

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| ECHO TRANSTHORACIC          | OTHER CHEST PAIN, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM                    | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | OTHER FATIGUE, MIXED HYPERLIPIDEMIA, PALPITATIONS, ESSENTIAL PRIMARY HYPERTENSION | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | OTHER FATIGUE, SNORING, BRADYCARDIA UNSPECIFIED, Unknown                          | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | OTHER FORMS OF ANGINA PECTORIS  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | OTHER FORMS OF ANGINA PECTORIS  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | OTHER HYPERTROPHIC CARDIOMYOPATHY   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | OTHER HYPERTROPHIC CARDIOMYOPATHY   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PALPITATIONS  | FAMILY PRACTICE        | 2                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PALPITATIONS  | INTERNAL MEDICINE      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PALPITATIONS, DIZZINESS AND GIDDINESS   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PALPITATIONS, DYSPNEA UNSPECIFIED   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PALPITATIONS, OTHER SPECIFIED HEALTH STATUS                                       | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PAROXYSMAL ATRIAL FIBRILLATION  | CARDIOLOGIST           | 2                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PAROXYSMAL ATRIAL FIBRILLATION  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PAROXYSMAL ATRIAL FIBRILLATION, ESSENTIAL PRIMARY HYPERTENSION                    | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | PRECORDIAL PAIN   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | RA W/RHEUMATOID FCT MX SITE W/O ORGAN/SYS INVLV, DYSPNEA UNSPECIFIED              | CRITICAL CARE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | RHEUMATIC MITRAL STENOSIS   | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | SHORTNESS OF BREATH   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | SHORTNESS OF BREATH   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | SHORTNESS OF BREATH   | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | SYNCOPE AND COLLAPSE  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ECHO TRANSTHORACIC          | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS                                     | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Echocardiography Procedures | ATRIAL SEPTAL DEFECT  | PEDIATRIC CARDIOLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Echocardiography Procedures | CARDIAC MURMUR UNSPECIFIED  | PEDIATRIC CARDIOLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Echocardiography Procedures | CORONARY ARTERY ANEURYSM  | PEDIATRIC CARDIOLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--------------------------------|--|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Echocardiography Procedures    | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS, OTHER LONG TERM CURRENT DRUG THERAPY, ENCOUNTER FOR THERAPEUTIC DRUG LEVEL MONITORING | PEDIATRIC HEMATOLOGY - ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| Echocardiography Procedures    | PECTUS CARINATUM   | PEDIATRIC GENETICS              |                    | 1                | 1               |  |                          |                        |                      |                 |
| Echocardiography Procedures    | SHORTNESS OF BREATH  | PEDIATRIC CARDIOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| Echocardiography Procedures    | SHORTNESS OF BREATH  | Pediatric Surgery               |                    | 1                | 1               |  |                          |                        |                      |                 |
| EDARAVONE                      | Amyotrophic lateral sclerosis  | Neurology                       |                    |                  |                 |  |                          |                        | 1                    |                 |
| EDARBI 80 MG TABLET            |  | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| EDARBYCLOR 40 MG-25MG TABLET   |  | Other                           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| EDARBYCLOR 40 MG-25MG TABLET   |  | PCP/Pediatrician                | 1                  |                  |                 |  |                          |                        |                      |                 |
| EDARBYCLOR 40-12.5 MG TABLET   |  | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| EEG CONT REC W/VID EEG TECH    | EPILEPSY, UNSP, NOT INTRACTABLE, WITHOUT STATUS EPILEPTICUS  | Neurology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| EEG PHY/QHP>36<60 HR W/VEEG    | EPILEPSY, UNSP, NOT INTRACTABLE, WITHOUT STATUS EPILEPTICUS  | Neurology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| EEG PHY/QHP>36<60 HR W/VEEG    | LOCAL-REL SYMPTC EPI W SIMPLE PART SEIZ, NTRCT, W/O STAT EPI   | Neurology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| EFFEXOR XR 150 MG CAP.SR 24H   |  | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| EGD DIAGNOSTIC BRUSH WASH      | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES   | Surgery, General                |                    | 1                | 1               |  |                          |                        |                      |                 |
| EGD US EXAM DUODENUM/JEJUNUM   | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST  | Gastroenterology                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| EGD-esophagogastroduodenoscopy | Gastro-esophageal reflux disease without esophagitis   | GASTROENTEROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| EGFR GENE COM VARIANTS         | ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION  | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| EGFR GENE COM VARIANTS         | BURKITT LYMPHOMA, LYMPH NODES OF AXILLA AND UPPER LIMB   | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| EGFR GENE COM VARIANTS         | GASTROINTESTINAL STROMAL TUMOR, UNSPECIFIED SITE   | Hematology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| EGFR GENE COM VARIANTS         | INTRAHEPATIC BILE DUCT CARCINOMA   | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| EGFR GENE COM VARIANTS         | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED  | Internal Medicine               | 1                  |                  |                 |  |                          |                        |                      |                 |
| EGFR GENE COM VARIANTS         | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX   | Hematology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| EGFR GENE COM VARIANTS         | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG   | Hematology                      |                    | 2                | 1               | 1                                      |                          |                        |                      |                 |
| EGFR GENE COM VARIANTS         | SOLITARY PULMONARY NODULE  | Surgery, Thoracic               |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELEC KNEE-SHIN SWING/STANCE    | ACQUIRED ABSENCE OF RIGHT LEG ABOVE KNEE   | Physical Medicine               |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELEC KNEE-SHIN SWING/STANCE    | ACQUIRED ABSENCE OF RIGHT LEG ABOVE KNEE   | Surgery, Orthopedic             |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM NOT SPINE   | CHARCOT'S JOINT, RIGHT ANKLE AND FOOT  | Surgery, Orthopedic             | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM NOT SPINE   | DISP FX OF 5TH METATARSAL BONE, L FT, SUBS FOR FX W NONUNION   | Surgery, General                | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM NOT SPINE   | FX UNSP METATARSAL BONE(S), R FOOT, SUBS FOR FX W NONUNION   | Surgery, Orthopedic             | 1                  |                  |                 |  |                          |                        |                      |                 |

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| ELEC OSTEOGEN STIM NOT SPINE | NONDISP TRANSVERSE FX SHAFT OF L ULNA, 7THK                  | Surgery, Orthopedic       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM SPINAL    | ARTHRODESIS STATUS   | Surgery, Neurological     |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM SPINAL    | ARTHRODESIS STATUS   | Surgery, Orthopedic       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM SPINAL    | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION | Surgery, Orthopedic       |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM SPINAL    | RADICULOPATHY, CERVICAL REGION                               | Surgery, Neurological     |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM SPINAL    | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Neurological     |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELEC OSTEOGEN STIM SPINAL    | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological     | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELEC STIM CANCER TREATMENT   | MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED                     | Oncology                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| ELECTRICAL BONE STIMULATION  | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological     |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELECTROPHYSIOLOGY EVALUATION | ATRIOVENTRICULAR BLOCK, COMPLETE                             | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELECTROPHYSIOLOGY EVALUATION | LEFT VENTRICULAR FAILURE, UNSPECIFIED                        | Cardiovascular Disease    |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELECTROPHYSIOLOGY EVALUATION | OTHER PERSISTENT ATRIAL FIBRILLATION                         | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELECTROPHYSIOLOGY EVALUATION | PALPITATIONS   | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELECTROPHYSIOLOGY EVALUATION | PAROXYSMAL ATRIAL FIBRILLATION                               | Pediatric Cardiology      | 2                  |                  |                 |  |                          |                        |                      |                 |
| ELECTROPHYSIOLOGY EVALUATION | SUPRAVENTRICULAR TACHYCARDIA                                 | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELECTROPHYSIOLOGY EVALUATION | SUPRAVENTRICULAR TACHYCARDIA                                 | Pediatrics                | 2                  |                  |                 |  |                          |                        |                      |                 |
| ELECTROPHYSIOLOGY EVALUATION | VENTRICULAR TACHYCARDIA                                      | Cardiac Electrophysiology | 2                  |                  |                 |  |                          |                        |                      |                 |
| ELETRIPTAN HBR 40 MG TABLET  |  | Neurology                 |                    | 3                | 3               |  |                          |                        |                      |                 |
| ELETRIPTAN HBR 40 MG TABLET  |  | Other                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| ELIQUIS 2.5 MG TABLET        |  | Orthopedic Surgery        | 2                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 2.5 MG TABLET        |  | Other                     | 6                  | 4                | 4               |  |                          |                        |                      |                 |
| ELIQUIS 2.5 MG TABLET        |  | PCP/Pediatrician          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 5 MG (74) TAB DS PK  |  | Other                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 5 MG TABLET          |  | Cardiology                | 6                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 5 MG TABLET          |  | Cardiovascular Disease    | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 5 MG TABLET          |  | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 5 MG TABLET          |  | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 5 MG TABLET          |  | Oncology/Radiation        | 2                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 5 MG TABLET          |  | Other                     | 41                 | 2                | 2               |  |                          |                        |                      |                 |
| ELIQUIS 5 MG TABLET          |  | PCP/Pediatrician          | 2                  |                  |                 |  |                          |                        |                      |                 |
| ELIQUIS 5 MG TABLET          |  | Physical Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| ELIQUIS 5 MG TABLET  |  | Surgery, General       |                    | 2                | 2               |  |                          |                        |                      |                 |
| EMGALITY PEN 120 MG/ML PEN INJCTR                                |  | Neurology              | 6                  |                  |                 |  |                          |                        |                      |                 |
| EMGALITY PEN 120 MG/ML PEN INJCTR                                |  | Other                  | 20                 | 3                | 3               |  |                          |                        |                      |                 |
| EMGALITY PEN 120 MG/ML PEN INJCTR                                |  | PCP/Pediatrician       |                    | 2                | 2               |  |                          |                        |                      |                 |
| EMGALITY SYRINGE   | migraine prophylaxis   | Surgery, Vascular      |                    |                  |                 |  |                          | 1                      |                      |                 |
| EMGALITY SYRINGE 120 MG/ML SYRINGE                               |  | Neurology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| EMGALITY SYRINGE 120 MG/ML SYRINGE                               |  | Other                  | 7                  | 3                | 1               | 2                                      |                          |                        |                      |                 |
| ENBREL 50MG/ML(1) SYRINGE  |  | Other                  | 5                  |                  |                 |  |                          |                        |                      |                 |
| ENBREL 50MG/ML(1) SYRINGE  |  | PCP/Pediatrician       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENBREL 50MG/ML(1) SYRINGE  |  | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENBREL MINI 50MG/ML(1) CARTRIDGE                                 |  | PCP/Pediatrician       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENBREL MINI 50MG/ML(1) CARTRIDGE                                 |  | Rheumatology           | 3                  |                  |                 |  |                          |                        |                      |                 |
| ENBREL SURECLICK 50MG/ML(1) PEN INJCTR                           |  | Other                  | 15                 | 1                | 1               |  |                          |                        |                      |                 |
| ENBREL SURECLICK 50MG/ML(1) PEN INJCTR                           |  | PCP/Pediatrician       | 8                  |                  |                 |  |                          |                        |                      |                 |
| ENBREL SURECLICK 50MG/ML(1) PEN INJCTR                           |  | Rheumatology           | 6                  |                  |                 |  |                          |                        |                      |                 |
| ENDO CHOLANGIOPANCREATOGRAPH                                     | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST  | Gastroenterology       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ENDOCRINE SURGERY PROCEDURE                                      | PRIMARY HYPERPARATHYROIDISM                                  | Surgery, General       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDODONTIC THERAPY, ANTERIOR TOOTH (EXCLUDING FINAL RESTORATION) | CRACKED TOOTH  | Family Medicine        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Endometrial Cancer   | Malignant neoplasm of endometrium                            | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Endometrial Cancer   | Malignant neoplasm of endometrium                            | RADIATION ONCOLOGY     | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENDOMETRIN 100 MG INSERT   |  | Endocrinology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOSCOPIC VEIN HARVEST  | ABDOMINAL AORTIC ANEURYSM, WITHOUT RUPTURE                   | Cardiovascular Disease | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVEN THER CHEM ADHES 1ST                                      | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN      | Surgery, Vascular      |                    | 1                | 1               |  |                          |                        |                      |                 |
| ENDOVEN THER CHEM ADHES 1ST                                      | VARICOSE VEINS OF L LOW EXTREM W ULCER OTH PART OF LOWER LEG | Surgery, Vascular      |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| ENDOVEN THER CHEM ADHES SBSQ                                     | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN      | Surgery, Vascular      |                    | 1                | 1               |  |                          |                        |                      |                 |
| ENDOVEN THER CHEM ADHES SBSQ                                     | VARICOSE VEINS OF L LOW EXTREM W ULCER OTH PART OF LOWER LEG | Surgery, Vascular      |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEI   | Varicose veins of left lower extremity with pain             | Other                  |                    |                  |                 |  |                          | 1                      |                      |                 |
| ENDOVENOUS LASER 1ST VEIN  | CHRONIC VENOUS HTN W INFLAMMATION OF BILATERAL LOW EXTRM     | Surgery, General       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN  | CHRONIC VENOUS HYPERTENSION W OTH COMP OF L LOW EXTREM       | Internal Medicine      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN  | VARICOS VN UNSP LOWER EXTREMITY WITH OTHER COMPLICATIONS     | Surgery, Plastic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN  | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS          | Radiology, Diagnostic  | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN  | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS          | Surgery, General       |                    | 1                | 1               |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN  | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN      | Internal Medicine      | 1                  |                  |                 |  |                          |                        |                      |                 |



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| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Radiology                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Surgery, General                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Surgery, Thoracic                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Surgery, Vascular                   | 3                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF LEFT LOWER EXTREMITY WITH PAIN            | Radiology, Diagnostic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF LEFT LOWER EXTREMITY WITH PAIN            | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION   | Surgery, General                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION   | Surgery, Vascular                   | 3                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN           | Radiology, Diagnostic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Internal Medicine                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER 1ST VEIN   | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Surgery, General                    | 5                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER VEIN ADDON | VARICOSE VEINS OF LEFT LOWER EXTREMITY WITH PAIN            | Radiology, Diagnostic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER VEIN ADDON | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION   | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS LASER VEIN ADDON | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN           | Radiology, Diagnostic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | ASYMPTOMATIC VARICOSE VEINS OF RIGHT LOWER EXTREMITY        | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | CHRONIC VENOUS HTN W OTH COMP OF BILATERAL LOW EXTRM        | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | CHRONIC VENOUS HTN W ULCER AND INFLAMMATION OF L LOW EXTREM | Radiology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS         | Surgery, General                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS         | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Surgery, Vascular                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Vascular & Interventional Radiology | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | VARICOSE VEINS OF L LOW EXTREM WITH OTHER COMPLICATIONS     | Pain Management                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | VARICOSE VEINS OF R LOW EXTREM WITH OTHER COMPLICATIONS     | Pain Management                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN      | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION   | Vascular & Interventional Radiology | 2                  |                  |                 |  |                          |                        |                      |                 |

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| ENDOVENOUS RF 1ST VEIN                  | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN            | Surgery, General                    | 4                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN                  | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                  | Physical Medicine                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF 1ST VEIN                  | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                  | Surgery, Vascular                   | 4                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF VEIN ADD-ON               | ASYMPTOMATIC VARICOSE VEINS OF RIGHT LOWER EXTREMITY         | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF VEIN ADD-ON               | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN      | Vascular & Interventional Radiology | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENDOVENOUS RF VEIN ADD-ON               | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN            | Surgery, General                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENOXAPARIN SODIUM 40MG/0.4ML SYRINGE    |  | Other                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| ENSTILAR 0.005-.064 FOAM                |  | Dermatology                         |                    | 4                | 4               |  |                          |                        |                      |                 |
| ENSTILAR 0.005-.064 FOAM                |  | Other                               |                    | 3                | 3               |  |                          |                        |                      |                 |
| ENT PROCEDURE/SERVICE                   | DIZZINESS AND GIDDINESS                                      | Audiology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENT PROCEDURE/SERVICE                   | LABYRINTHINE DYSFUNCTION, RIGHT EAR                          | Audiology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENTYVIO 300 MG VIAL                     |  | Other                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| ENVARUS XR 1 MG TAB ER 24H              |  | Other                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| EPCLUSA 400-100 MG TABLET               |  | Other                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| EPIDUO FORTE 0.3 %-2.5% GEL W/PUMP      |  | Other                               | 3                  | 5                | 5               |  |                          |                        |                      |                 |
| EPIFIX 1 SQ CM                          | NON-PRS CHRONIC ULCER OTH PRT R FOOT LIMITED TO BRKDWN SKIN  | Family Medicine                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| EPIFIX 1 SQ CM                          | OTH COMPLICATIONS OF PROCEDURES, NEC, INIT                   | Internal Medicine                   | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| EPIFIX 1 SQ CM                          | TYPE 1 DIABETES MELLITUS WITH FOOT ULCER                     | Podiatry                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| EPIFIX 1 SQ CM                          | UNSPECIFIED OPEN WOUND, RIGHT FOOT, INITIAL ENCOUNTER        | Podiatry                            | 2                  |                  |                 |  |                          |                        |                      |                 |
| EPIPEN 2-PAK 0.3MG/0.3 AUTO INJECT      |  | Other                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| EPOETIN ALFA, NON-ESRD                  | CHRONIC KIDNEY DISEASE, STAGE 3A                             | Nephrology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| EPOETIN BETA ESRD USE                   | ANEMIA IN CHRONIC KIDNEY DISEASE                             | Internal Medicine                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| EPOETIN BETA ESRD USE                   | END STAGE RENAL DISEASE                                      | Nephrology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| ERCP DUCT STENT PLACEMENT               | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST  | Gastroenterology                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ERCP EA DUCT/AMPULLA DILATE             | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST  | Gastroenterology                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ERCP REMOVE DUCT CALCULI                | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST  | Gastroenterology                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ERCP REMOVE FORGN BODY DUCT             | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST  | Gastroenterology                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ERCP STENT EXCHANGE W/DILATE            | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST  | Gastroenterology                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ERLOTINIB HCL 100 MG TABLET             |  | Oncology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| ESCITALOPRAM OXALATE 10 MG TABLET       |  | Other                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| ESCITALOPRAM OXALATE 20 MG TABLET       |  | Behavioral Health                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ESCITALOPRAM OXALATE 20 MG TABLET       |  | Internal Medicine                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ESCITALOPRAM OXALATE 20 MG TABLET       |  | Other                               | 9                  |                  |                 |  |                          |                        |                      |                 |
| ESCITALOPRAM OXALATE 20 MG TABLET       |  | PCP/Pediatrician                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| ESKETAMINE, NASAL SPRAY                 | MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES | Psychiatry                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| ESOMEPRAZOLE MAGNESIUM 40 MG CAPSULE DR |  | PCP/Pediatrician                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Esophagogastroduodenoscopy Procedures   | Crohn's disease of both small and large intestine without complications | Internal Medicine               |                    |                  |                 |  |                          |                        |                      | 1               |
| Esophagogastroduodenoscopy Procedures   | Unspecified abdominal pain  | Gastroenterology                |                    |                  |                 |  |                          |                        |                      | 1               |
| Established Patient Office or Other Outpatient Services                                       | Encounter for full-term uncomplicated delivery                          | Midwifery                       |                    |                  |                 |  |                          |                        |                      | 1               |
| Established Patient Office or Other Outpatient Services                                       | Encounter for full-term uncomplicated delivery                          | Other                           |                    |                  |                 |  |                          |                        |                      | 1               |
| ESTRADIOL (TWICE WEEKLY) 0.1MG/24HR PATCH TDSW  |   | Endocrinology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| ESTRADIOL (TWICE WEEKLY) 0.1MG/24HR PATCH TDSW  |   | Other                           | 4                  |                  |                 |  |                          |                        |                      |                 |
| ESTRADIOL 0.01 % CREAM/APPL   |   | OB/GYN                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| ESTRADIOL 0.01 % CREAM/APPL   |   | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ESTRADIOL 0.01 % CREAM/APPL   |   | PCP/Pediatrician                |                    | 1                | 1               |  |                          |                        |                      |                 |
| ESTRADIOL 0.01 % CREAM/APPL   |   | Urology                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| ESTRING 7.5MCG/24H VAG RING   |   | PCP/Pediatrician                |                    | 1                | 1               |  |                          |                        |                      |                 |
| ETOPOSIDE INJECTION   | BURKITT LYMPHOMA, UNSPECIFIED SITE                                      | Hematology                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| EUCRISA 2 % OINT. (G)   |   | Other                           | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| EUFLEXXA 20 MG/2 ML SYRINGE   |   | Other                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| EUFLEXXA INJ PER DOSE   | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE                            | Surgery, Orthopedic             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| EUFLEXXA INJ PER DOSE   | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE                           | Sports Medicine                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| EUFLEXXA INJ PER DOSE   | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE                           | Surgery, Orthopedic             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| EVALUATE SPEECH PRODUCTION  | AUTISTIC DISORDER   | Pediatric Neurology             |                    | 1                | 1               |  |                          |                        |                      |                 |
| EVASC RPR A-AO NDGFT  | ABDOMINAL AORTIC ANEURYSM, WITHOUT RUPTURE                              | Surgery, Vascular               | 1                  |                  |                 |  |                          |                        |                      |                 |
| EX FOR SPEECH DEVICE RX ADDL  | AUTISTIC DISORDER   | Pediatric Neurology             |                    | 1                | 1               |  |                          |                        |                      |                 |
| EXC SKIN ABD  | LOCALIZED ADIPOSITY   | Surgery, Plastic                |                    | 1                | 1               |  |                          |                        |                      |                 |
| EXC SKIN ABD  | OTHER DORSALGIA   | Surgery, Plastic                |                    | 1                | 1               |  |                          |                        |                      |                 |
| EXCISION OF BONE LOWER JAW  | INFLAMMATORY CONDITIONS OF JAWS   | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| Excision, soft tissue tumor, shoulder area; subcutaneous                                      | LOCALIZED SWELLING MASS & LUMP RIGHT UPPER LIMB                         | SURGERY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Excision, tumor, pelvis and hip area; subcutaneous tissue                                     | OTHER HYPERTROPHIC DISORDERS OF THE SKIN                                | SURGERY-GENERAL                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Excision, tumor, pelvis and hip area; subcutaneous tissue                                     | RESIDUAL HEMORRHOIDAL SKIN TAGS   | SURGERY-GENERAL                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Excision, tumor, soft tissue of pelvis and hip area, subcutaneous;3 cm or greater             | BENIGN LIPOMATOUS NEOPLASM SKIN & SUBQ TRUNK                            | SURGERY-GENERAL                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Excision, tumor, soft tissue of shoulder area, subcutaneous;3 cm or greater                   | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED, RESIDUAL HEMORRHOIDAL SKIN TAGS | GENERAL SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Excision, tumor, soft tissue of shoulder area, subcutaneous;3 cm or greater                   | LOCALIZED SWELLING MASS & LUMP RIGHT UPPER LIMB                         | SURGERY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Excision, tumor, soft tissue of shoulder area, subfascial (eg, intramuscular);5 cm or greater | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED, RESIDUAL HEMORRHOIDAL SKIN TAGS | GENERAL SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Excision, tumor, soft tissue of thigh or knee area, subcutaneous; 3 cm or greater      | LOCALIZED SWELLING MASS & LUMP RIGHT LOWER LIMB  | SURGERY- PLASTIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Excision, tumor, soft tissue of thigh or knee area, subcutaneous; less than 3 cm       | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED, RESIDUAL HEMORRHOIDAL SKIN TAGS                            | GENERAL SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Excision, tumor, soft tissue of thigh or knee area, subcutaneous; less than 3 cm       | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB | SURGERY-GENERAL                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Excision, tumor, thigh or knee area;deep, subfascial, or intramuscular; less than 5 cm | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED, RESIDUAL HEMORRHOIDAL SKIN TAGS                            | GENERAL SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| EXELDERM 1 % CREAM (G)   |  | Dermatology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXELDERM 1 % CREAM (G)   |  | Other                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| EXPLORATION OF ABDOMEN   | INTRA-ABD AND PELVIC SWELLING, MASS AND LUMP, UNSP SITE  | Obstetrics/Gynecology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXPLORATION OF CHEST   | MALIGNANT NEOPLASM OF UNSP PART OF LEFT BRONCHUS OR LUNG   | Surgery, Thoracic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXPLORATION OF CHEST   | MALIGNANT NEOPLASM OF UNSPECIFIED MAIN BRONCHUS  | Surgery, Thoracic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXPLORATION OF CHEST   | OTHER DISEASES OF MEDIASTINUM, NOT ELSEWHERE CLASSIFIED  | Surgery, Thoracic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXPLORATION OF CHEST   | SOLITARY PULMONARY NODULE  | Surgery, Thoracic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXPLORATION OF SPINAL FUSION   | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological           | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 1 DIABETES MELLITUS WITH DIABETIC NEUROPATHY, UNSP  | Endocrinology And Metabolism    | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA  | Endocrinology And Metabolism    | 8                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA  | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA  | Internal Medicine               | 2                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA  | Pediatric Endocrinology         | 3                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 1 DIABETES MELLITUS WITH UNSPECIFIED COMPLICATIONS  | Endocrinology And Metabolism    | 3                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS   | Emergency Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS   | Endocrinology And Metabolism    | 3                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 2 DIABETES MELLITUS WITH HYPERGLYCEMIA  | Pediatric Endocrinology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS   | Internal Medicine               |                    | 1                | 1               |  |                          |                        |                      |                 |
| EXT AMB INFUSN PUMP INSULIN  | TYPE 2 DIABETES W OTH DIABETIC NEUROLOGICAL COMPLICATION   | Endocrinology And Metabolism    | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXTENSIVE JAW SURGERY  | MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED  | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXTERNAL RECEIVER, CGM SYS   | OTHER GENERAL SYMPTOMS AND SIGNS   | DME                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXTERNAL RECEIVER, CGM SYS   | OTHER GENERAL SYMPTOMS AND SIGNS   | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXTERNAL TRANSMITTER, CGM  | OTHER GENERAL SYMPTOMS AND SIGNS   | DME                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| EXTERNAL TRANSMITTER, CGM  | OTHER GENERAL SYMPTOMS AND SIGNS   | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| EXTERNAL TRANSMITTER, CGM        | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS  | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Extra-Cranial Metastases         | Secondary malignant neoplasm of bone            | RADIATION ONCOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Extra-Cranial Metastases         | Secondary malignant neoplasm of right lung      | OUTPATIENT REHAB FACILITY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| FABIOR 0.1 % FOAM                |   | Other                           |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| FACTOR VIIA RECOMB NOVOSEVEN     | HEREDITARY DEFICIENCY OF OTHER CLOTTING FACTORS | Pediatric Hematology/Oncology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| FACTOR VIII NUWIQ RECOMB 1IU     | HEREDITARY FACTOR VIII DEFICIENCY               | Hematology                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| FACTOR VIII RECOMBINANT NOS      | HEREDITARY FACTOR VIII DEFICIENCY               | Hematology                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| FARXIGA 10 MG TABLET             |   | Cardiovascular Disease          | 1                  |                  |                 |  |                          |                        |                      |                 |
| FARXIGA 10 MG TABLET             |   | Other                           | 4                  | 6                | 6               |  |                          |                        |                      |                 |
| FARXIGA 5 MG TABLET              |   | Endocrinology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| FARXIGA 5 MG TABLET              |   | Other                           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| FARXIGA 5 MG TABLET              |   | PCP/Pediatrician                | 2                  |                  |                 |  |                          |                        |                      |                 |
| FASENRA 30 MG/ML SYRINGE         |   | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| FASENRA PEN 30 MG/ML AUTO INJECT |   | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| FEM/POPL REVAS W/ATHER           | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED        | Cardiology, Interventional      |                    | 1                | 1               |  |                          |                        |                      |                 |
| FEM/POPL REVAS W/ATHER           | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED        | Surgery, Vascular               |                    | 2                | 2               |  |                          |                        |                      |                 |
| FEM/POPL REVAS W/TLA             | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED        | Cardiology, Interventional      |                    | 1                | 1               |  |                          |                        |                      |                 |
| FEM/POPL REVAS W/TLA             | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED        | Cardiovascular Disease          |                    | 1                | 1               |  |                          |                        |                      |                 |
| FEM/POPL REVAS W/TLA             | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED        | Surgery, Vascular               |                    | 2                | 2               |  |                          |                        |                      |                 |
| FEM/POPL REVASC STNT & ATHER     | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED        | Cardiology, Interventional      |                    | 1                | 1               |  |                          |                        |                      |                 |
| FEM/POPL REVASC W/STENT          | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED        | Cardiology, Interventional      |                    | 1                | 1               |  |                          |                        |                      |                 |
| FEM/POPL REVASC W/STENT          | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED        | Surgery, Vascular               |                    | 2                | 2               |  |                          |                        |                      |                 |
| FEMRING 0.05MG/24H VAG RING      |   | Other                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| FEMRING 0.1MG/24HR VAG RING      |   | OB/GYN                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL 100 MCG/HR PATCH TD72   |   | Other                           | 5                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL 12 MCG/HR PATCH TD72    |   | Hospice And Palliative Medicine | 1                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL 12 MCG/HR PATCH TD72    |   | Other                           | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| FENTANYL 12 MCG/HR PATCH TD72    |   | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL 25 MCG/HR PATCH TD72    |   | Oncology/Radiation              | 1                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL 25 MCG/HR PATCH TD72    |   | Other                           | 3                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL 25 MCG/HR PATCH TD72    |   | Surgery, Orthopedic             |                    | 1                | 1               |  |                          |                        |                      |                 |
| FENTANYL 37.5MCG/HR PATCH TD72   |   | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL 37.5MCG/HR PATCH TD72   |   | PCP/Pediatrician                | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-------------------------------------|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| FENTANYL 50MCG/HR PATCH TD72        |   | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| FENTANYL 50MCG/HR PATCH TD72        |   | PCP/Pediatrician                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL 75MCG/HR PATCH TD72        |   | Other                                  | 5                  |                  |                 |  |                          |                        |                      |                 |
| FENTANYL CITRATE 200 MCG LOZENGE HD |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| FIASP FLEXTOUCH                     | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA                 | Endocrinology                          |                    |                  |                 |  |                          | 1                      |                      |                 |
| FIBULA BONE GRAFT MICROVASC         | MALIGNANT NEOPLASM OF MOUTH, UNSPECIFIED                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| FINACEA 15 % FOAM                   |   | Dermatology                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| FINACEA 15 % FOAM                   |   | Other                                  |                    | 5                | 5               |  |                          |                        |                      |                 |
| FIXATION OF KNEE JOINT              | ANKYLOSIS, LEFT ELBOW                                       | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| FIXATION OF KNEE JOINT              | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE               | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| FIXATION OF SHOULDER                | ADHESIVE CAPSULITIS OF LEFT SHOULDER                        | Chiropractic                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| FIXATION OF SHOULDER                | ADHESIVE CAPSULITIS OF LEFT SHOULDER                        | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| FLEX-WALK SYS LOW EXT PROSTH        | ACQUIRED ABSENCE OF LEFT LEG ABOVE KNEE                     | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| FLEX-WALK SYS LOW EXT PROSTH        | ACQUIRED ABSENCE OF LEFT LEG BELOW KNEE                     | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| FLEX-WALK SYS LOW EXT PROSTH        | ACQUIRED ABSENCE OF RIGHT LEG ABOVE KNEE                    | Physical Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| FLEX-WALK SYS LOW EXT PROSTH        | ACQUIRED ABSENCE OF RIGHT LEG BELOW KNEE                    | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| FLEX-WALK SYS LOW EXT PROSTH        | COMPLETE TRAUM AMP AT LEV BETW KN AND ANKL, L LOW LEG, SUBS | Physical Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| FLURANDRENOLIDE 0.05 % LOTION       |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| FOCALIN XR 20 MG CPBP 50-50         |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| FOLLISTIM AQ 300/0.36ML CARTRIDGE   |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| FOOT/TOES SURGERY PROCEDURE         | PLANTAR FASCIAL FIBROMATOSIS                                | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| FORTEO 20MCG/DOSE PEN INJCTR        |   | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| FOSAPREPITANT INJECTION             | MALIGNANT NEOPLASM OF BLADDER, UNSPECIFIED                  | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| FOSAPREPITANT INJECTION             | MALIGNANT NEOPLASM OF ENDOMETRIUM                           | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| FOSAPREPITANT INJECTION             | MALIGNANT NEOPLASM OF ENDOMETRIUM                           | Gynecologic Oncology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| FRAGMENTING OF KIDNEY STONE         | CALCULUS OF KIDNEY  | Urology                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| FREE FASCIAL FLAP MICROVASC         | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST            | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| FREE MYO/SKIN FLAP MICROVASC        | MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED                   | Surgery, Oral And Maxillofacial        | 1                  |                  |                 |  |                          |                        |                      |                 |
| FREE SKIN FLAP MICROVASC            | MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED                   | Surgery, Oral And Maxillofacial        | 1                  |                  |                 |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 14 DAY READER EACH  |   | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 14 DAY READER EACH  |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 14 DAY SENSOR KIT   |   | Endocrinology                          | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 14 DAY SENSOR KIT   |   | Endocrinology And Metabolism           | 1                  |                  |                 |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 14 DAY SENSOR KIT   |   | Other                                  | 6                  | 8                | 8               |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 14 DAY SENSOR KIT   |   | PCP/Pediatrician                       | 1                  | 5                | 5               |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 2 READER EACH       |   | Endocrinology                          | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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| FREESTYLE LIBRE 2 READER EACH              |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 2 SENSOR KIT               |   | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 2 SENSOR KIT               |   | Endocrinology And Metabolism           | 1                  |                  |                 |  |                          |                        |                      |                 |
| FREESTYLE LIBRE 2 SENSOR KIT               |   | Other                                  | 2                  | 7                | 7               |  |                          |                        |                      |                 |
| FROVA                                      | MIGRAINES   | Neurology                              |                    |                  |                 |  |                          | 1                      |                      |                 |
| FROVA 2.5 MG TABLET                        |   | Neurology                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| FULL NIGHT TITRATION STUDY, >= 6 YEARS OLD | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)               | Respiratory Therapy                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| FUSION OF ANKLE JOINT OPEN                 | CHARCOT'S JOINT, RIGHT ANKLE AND FOOT                     | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| FXJL ABL LSR 1ST 100 SQ CM                 | VIRAL WART, UNSPECIFIED                                   | Pediatric Surgery                      |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| GAIT TRAINING THERAPY                      | PRESENCE OF LEFT ARTIFICIAL KNEE JOINT                    | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| GAMMAGARD LIQUID INJECTION                 | CHRONIC INFLAMMATORY DEMYELINATING POLYNEURITIS           | Neurology                              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| GAMMAGARD LIQUID INJECTION                 | CHRONIC RHINITIS  | Allergy/Immunology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| GAMMAGARD LIQUID INJECTION                 | HEREDITARY HYPOGAMMAGLOBULINEMIA                          | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| GAMMAGARD LIQUID INJECTION                 | JUVENILE DERMATOMYOSITIS, ORGAN INVOLVEMENT UNSPECIFIED   | Pediatric Rheumatology                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| GAMMAGARD LIQUID INJECTION                 | NONFAMILIAL HYPOGAMMAGLOBULINEMIA                         | Hematology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| GAMMAGARD LIQUID INJECTION                 | OTH GENERALIZED EPILEPSY, INTRACTABLE, W/O STAT EPI       | Allergy/Immunology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| GAMMAGARD LIQUID INJECTION                 | SELECTIVE DEFICIENCY OF IMMUNOGLOBULIN G [IGG] SUBCLASSES | Allergy/Immunology                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| GAMMAPLEX INJECTION                        | CHRONIC INFLAMMATORY DEMYELINATING POLYNEURITIS           | Neurology                              | 3                  |                  |                 |  |                          |                        |                      |                 |
| GAMUNEX-C/GAMMAKED                         | CHRONIC INFLAMMATORY DEMYELINATING POLYNEURITIS           | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| GAMUNEX-C/GAMMAKED                         | OTHER COMMON VARIABLE IMMUNODEFICIENCIES                  | Allergy                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| GANIRELIX ACETATE 250MCG/0.5 SYRINGE       |   | Endocrinology                          | 3                  |                  |                 |  |                          |                        |                      |                 |
| GANIRELIX ACETATE 250MCG/0.5 SYRINGE       |   | Obstetrics/Gynecology                  | 5                  |                  |                 |  |                          |                        |                      |                 |
| GANIRELIX ACETATE 250MCG/0.5 SYRINGE       |   | Other                                  | 12                 | 1                | 1               |  |                          |                        |                      |                 |
| GANIRELIX ACETATE 250MCG/0.5 SYRINGE       |   | Reproductive Endocrinology/Infertility | 5                  |                  |                 |  |                          |                        |                      |                 |
| GASTRIC BYPASS FOR OBESITY                 | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES            | Surgery, General                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| GASTROENTEROLOGY PROCEDURE                 | GASTRO-ESOPHAGEAL REFLUX DISEASE WITHOUT ESOPHAGITIS      | Surgery, General                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| GEL-ONE                                    | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                  | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| GEL-ONE                                    | PAIN IN RIGHT KNEE  | Pain Management                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| GEL-ONE                                    | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE              | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| GEL-ONE                                    | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE             | Surgery, Orthopedic                    |                    | 2                | 2               |  |                          |                        |                      |                 |

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| GELSYN-3 INJECTION 0.1 MG                   | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE              | Pain Management                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| GELSYN-3 INJECTION 0.1 MG                   | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE              | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| GI TRC IMG INTRAL ESOPHAGUS                 | IRON DEFICIENCY ANEMIA, UNSPECIFIED                        | Gastroenterology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| GILENYA 0.5 MG CAPSULE                      |  | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| GLATIRAMER ACETATE 40 MG/ML SYRINGE         |  | Neurology                              | 2                  |                  |                 |  |                          |                        |                      |                 |
| GLATIRAMER ACETATE 40 MG/ML SYRINGE         |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| GLATOPA 20 MG/ML SYRINGE                    |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| GLATOPA 40 MG/ML SYRINGE                    |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| GLYXAMBI 25 MG-5 MG TABLET                  |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| GLYXAMBI 25 MG-5 MG TABLET                  |  | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Gocovri                                     | Parkinson's disease  | Other                                  |                    |                  |                 |  |                          |                        | 1                    |                 |
| GOCOVRI 137 MG CAP ER 24H                   |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | ANKYLOSING SPONDYLITIS OF MULTIPLE SITES IN SPINE          | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | ANKYLOSING SPONDYLITIS OF UNSPECIFIED SITES IN SPINE       | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | ARTHROPATHIC PSORIASIS, UNSPECIFIED                        | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | OTHER PSORIATIC ARTHROPATHY                                | Rheumatology                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | OTHER SPECIFIED RHEUMATOID ARTHRITIS, MULTIPLE SITES       | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | RHEU ARTHRITIS W RHEU FACTOR MULT SITE W/O ORG/SYS INVOLV  | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | RHEUMATOID ARTHRITIS W/O RHEUMATOID FACTOR, MULTIPLE SITES | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | RHEUMATOID ARTHRITIS, UNSPECIFIED                          | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| GOLIMUMAB FOR IV USE 1MG                    | SPONDYLOSIS WITHOUT MYELOPATHY OR RADICULOPATHY, SITE UNSP | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F 450 UNIT VIAL                       |  | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F 450 UNIT VIAL                       |  | Other                                  | 5                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F RFF 75 UNIT VIAL                    |  | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 300/0.5ML PEN INJCTR  |  | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 300/0.5ML PEN INJCTR  |  | Other                                  | 5                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 300/0.5ML PEN INJCTR  |  | Reproductive Endocrinology/Infertility | 2                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 450/0.75ML PEN INJCTR |  | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 450/0.75ML PEN INJCTR |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 900/1.5 ML PEN INJCTR |  | Endocrinology                          | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 900/1.5 ML PEN INJCTR |  | Obstetrics/Gynecology                  | 6                  |                  |                 |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 900/1.5 ML PEN INJCTR |  | Other                                  | 29                 | 1                | 1               |  |                          |                        |                      |                 |
| GONAL-F RFF REDI-JECT 900/1.5 ML PEN INJCTR |  | Reproductive Endocrinology/Infertility | 10                 |                  |                 |  |                          |                        |                      |                 |



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| GOSERELIN ACETATE IMPLANT                   | MALIGNANT NEOPLASM OF OVRLP SITES OF LEFT FEMALE BREAST      | Oncology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRAFIX STRAVIX PRIME PL SQCM                | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                  | Podiatry                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| GRALISE 600 MG TAB ER 24H                   |  | Pain Management          |                    | 1                | 1               |  |                          |                        |                      |                 |
| GRASTEK 2800 UNIT TAB SUBL                  |  | Allergy/Immunology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO 50 CC/<                 | ENCOUNTER FOR BREAST RECONSTRUCTION FOLLOWING MASTECTOMY     | Surgery, Plastic         | 2                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO 50 CC/<                 | MALIG NEOPLM OF UPPER-OUTER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic         | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO 50 CC/<                 | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT FEMALE BREAST     | Surgery, Plastic         | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO 50 CC/<                 | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, Plastic         | 2                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO 50 CC/<                 | OTHER SPECIFIED POSTPROCEDURAL STATES                        | Surgery, Plastic         | 2                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO 50 CC/<                 | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic         | 4                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO EA ADDL                 | ENCOUNTER FOR BREAST RECONSTRUCTION FOLLOWING MASTECTOMY     | Surgery, Plastic         | 2                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO EA ADDL                 | MALIG NEOPLM OF UPPER-OUTER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic         | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO EA ADDL                 | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT FEMALE BREAST     | Surgery, Plastic         | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO EA ADDL                 | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, Plastic         | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO EA ADDL                 | OTHER SPECIFIED POSTPROCEDURAL STATES                        | Surgery, Plastic         | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL FAT LIPO EA ADDL                 | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic         | 4                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL SOFT TISS DIR EXC                | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic         | 1                  |                  |                 |  |                          |                        |                      |                 |
| GRFG AUTOL SOFT TISS DIR EXC                | UNSPECIFIED CHOLESTEATOMA, LEFT EAR                          | Pediatric Otolaryngology | 1                  |                  |                 |  |                          |                        |                      |                 |
| GUIDANCE FOR RADJ TX DLVR                   | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST | Radiation Oncology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| GUIDANCE FOR RADJ TX DLVR                   | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK  | Radiation Oncology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| GVOKE HYPOPEN 2-PACK 1 MG/0.2ML AUTO INJCT  |  | Endocrinology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| GVOKE PFS 1-PACK SYRINGE 1 MG/0.2ML SYRINGE |  | PCP/Pediatrician         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HBOT, FULL BODY CHAMBER, 30M                | INFLAMMATORY CONDITIONS OF JAWS                              | Family Medicine          | 1                  |                  |                 |  |                          |                        |                      |                 |
| HBOT, FULL BODY CHAMBER, 30M                | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, General         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HBOT, FULL BODY CHAMBER, 30M                | OTH DISRD OF THE SKIN, SUBCU RELATED TO RADIATION            | Physical Medicine        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HBOT, FULL BODY CHAMBER, 30M                | SKIN GRAFT (ALLOGRAFT) (AUTOGRAFT) FAILURE                   | Surgery, General         | 3                  |                  |                 |  |                          |                        |                      |                 |
| Head/Neck Carcinoma                         | Malignant neoplasm of base of tongue                         | RADIATION ONCOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Head/Neck Carcinoma                         | Malignant neoplasm of overlapping sites of nasopharynx       | RADIATION ONCOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Head/Neck Carcinoma          | Malignant neoplasm of tonsillar fossa                        | RADIATION ONCOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HEARING LOSS DUP/DEL ANALYS  | ENCOUNTER FOR OTH GENETIC TESTING OF FEMALE FOR PRO MGMT     | Genetics                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| HEARING LOSS DUP/DEL ANALYS  | MATERNAL CARE FOR HEREDITARY DISEASE IN FETUS, UNSP          | Genetics                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| HEARING LOSS DUP/DEL ANALYS  | SENSORINEURAL HEARING LOSS, BILATERAL                        | Genetics                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HEARING LOSS SEQUENCE ANALYS | SENSORINEURAL HEARING LOSS, BILATERAL                        | Genetics                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HEMODIALYSIS ONE EVALUATION  | ACUTE KIDNEY FAILURE, UNSPECIFIED                            | Nephrology                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| HEMODIALYSIS ONE EVALUATION  | END STAGE RENAL DISEASE                                      | Dialysis                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HEMODIALYSIS ONE EVALUATION  | END STAGE RENAL DISEASE                                      | Internal Medicine                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| HEMODIALYSIS ONE EVALUATION  | END STAGE RENAL DISEASE                                      | Nephrology                             | 4                  |                  |                 |  |                          |                        |                      |                 |
| HEMODIALYSIS REPEATED EVAL   | ACUTE KIDNEY FAILURE, UNSPECIFIED                            | Nephrology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HEMODIALYSIS REPEATED EVAL   | END STAGE RENAL DISEASE                                      | Internal Medicine                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| HEMODIALYSIS REPEATED EVAL   | END STAGE RENAL DISEASE                                      | Nephrology                             | 3                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SERV OF OT,EA 15 MIN    | COVID-19   | Pain Management                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SERV OF OT,EA 15 MIN    | ENCNTR FOR SURGICAL AFTCR FOLLOWING SURGERY ON THE DGSTV SYS | Internal Medicine                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SERV OF PT,EA 15 MIN    | COVID-19   | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SERV OF PT,EA 15 MIN    | COVID-19   | Pain Management                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SERV OF PT,EA 15 MIN    | ENCNTR FOR SURGICAL AFTCR FOLLOWING SURGERY ON THE DGSTV SYS | Internal Medicine                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SERV OF PT,EA 15 MIN    | ESSENTIAL (PRIMARY) HYPERTENSION                             | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SERV OF PT,EA 15 MIN    | INFECT/INFLM REACT D/T OTH CARDI/VASC DEV/IMPLNT/GRFT, SUBS  | Infectious Disease                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | ABNORMAL FINDINGS ON DX IMAGING OF OTH BODY STRUCTURES       | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | CONCUSSION W LOC OF 30 MINUTES OR LESS, SUBS                 | Internal Medicine                      | 5                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | COVID-19   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | ENCOUNTER FOR ATTENTION TO COLOSTOMY                         | Surgery, Colon And Rectal              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | HYPOXEMIA  | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF AIDE,EA 15 MIN   | OTHER AMNESIA  | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF CSW,EA 15 MIN    | ENCOUNTER FOR ATTENTION TO COLOSTOMY                         | Surgery, Colon And Rectal              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF CSW,EA 15 MIN    | HYPOXEMIA  | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF CSW,EA 15 MIN    | INFECTION OF AMPUTATION STUMP, RIGHT LOWER EXTREMITY         | Podiatry                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF CSW,EA 15 MIN    | MALIGNANT NEOPLASM OF UPPER LOBE, RIGHT BRONCHUS OR LUNG     | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF CSW,EA 15 MIN    | OTHER AMNESIA  | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF CSW,EA 15 MIN    | OTHER SEIZURES   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|------------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HHCP-SVS OF S/L PATH,EA 15MN | COVID-19   | Pain Management                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF S/L PATH,EA 15MN | DEVELOPMENTAL DISORDER OF SPEECH AND LANGUAGE, UNSPECIFIED   | Pediatrics                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF S/L PATH,EA 15MN | HEMIPLGA FOL UNSP CEREBVASC DISEASE AFF LEFT DOMINANT SIDE   | Physical Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF S/L PATH,EA 15MN | MALIGNANT NEOPLASM OF MOUTH, UNSPECIFIED                     | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF S/L PATH,EA 15MN | MALIGNANT NEOPLASM OF UNSP PART OF RIGHT BRONCHUS OR LUNG    | Hospice And Palliative Medicine        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF S/L PATH,EA 15MN | MALIGNANT NEOPLASM OF UPPER LOBE, RIGHT BRONCHUS OR LUNG     | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHCP-SVS OF S/L PATH,EA 15MN | PRESSURE-INDUCED DEEP TISSUE DAMAGE OF SACRAL REGION         | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | CEREB INFRC DUE TO UNSP OCCLS OR STENOS OF UNSP CEREB ARTERY | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | COVID-19   | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE                     | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE             | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | MALIGNANT NEOPLASM OF MOUTH, UNSPECIFIED                     | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | MALIGNANT NEOPLASM OF NASOPHARYNX, UNSPECIFIED               | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | PAIN IN LEFT SHOULDER  | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | PRESSURE ULCER OF SACRAL REGION, UNSTAGEABLE                 | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | PRESSURE-INDUCED DEEP TISSUE DAMAGE OF SACRAL REGION         | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | SPINAL STENOSIS, SITE UNSPECIFIED                            | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF LPN EA 15 MIN | UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, LEFT KNEE          | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | ABDOMINAL AORTIC ANEURYSM, WITHOUT RUPTURE                   | Surgery, Vascular                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | ABNORMAL FINDINGS ON DX IMAGING OF OTH BODY STRUCTURES       | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | ABSCESS OF LIVER   | Hepatology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | ABSCESS OF THE BREAST AND NIPPLE                             | Radiology, Diagnostic                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | ACQUIRED ABSENCE OF OTHER ORGANS                             | Radiology, Diagnostic                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | ACUTE KIDNEY FAILURE, UNSPECIFIED                            | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION                    | Home Health                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | ACUTE MYELOBLASTIC LEUKEMIA, NOT HAVING ACHIEVED REMISSION   | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-----------------------------|--|-----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HHS/HOSPICE OF RN EA 15 MIN | ACUTE MYELOBLASTIC LEUKEMIA, NOT HAVING ACHIEVED REMISSION   | Hematology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY                | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY                | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY                | Orthopaedic Sports Medicine | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY                | Surgery, General            | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY                | Surgery, Orthopedic         | 25                 |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ATHEROSCLEROSIS OF CABG W/O ANGINA PECTORIS                  | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ATHSCL HEART DISEASE OF NATIVE COR ART W UNSP ANG PCTRS      | Surgery, Cardiovascular     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS | Surgery, Thoracic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | BACTEREMIA   | Hematology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | BLINDNESS, ONE EYE, LOW VISION OTHER EYE, UNSPECIFIED EYES   | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | BRONCHIECTASIS WITH (ACUTE) EXACERBATION                     | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | BRONCHIECTASIS WITH ACUTE LOWER RESPIRATORY INFECTION        | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | CELLULITIS OF RIGHT LOWER LIMB                               | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | CEREB INFRC DUE TO UNSP OCCLS OR STENOS OF UNSP CEREB ARTERY | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | CEREBRAL INFARCTION, UNSPECIFIED                             | Infectious Disease          | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | CHRONIC RESPIRATORY FAILURE, UNSP W HYPOXIA OR HYPERCAPNIA   | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | COMPLETE TRAUMATIC AMP AT LEVEL BETW LEFT HIP AND KNEE, INIT | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | COMPLICATIONS DUE TO IMPLANTED PRSTHT MTRL                   | Surgery, General            | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | CONCUSSION W LOC OF 30 MINUTES OR LESS, SUBS                 | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | COVID-19   | Family Medicine             | 4                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | COVID-19   | Pain Management             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | DEMENTIA WITH LEWY BODIES                                    | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | DISEASE OF INTESTINE, UNSPECIFIED                            | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | DIZZINESS AND GIDDINESS                                      | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | DVTRCLI OF INTEST, PART UNSP, W/O PERF OR ABSCESS W/O BLEED  | Family Medicine             | 3                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | DYSPNEA, UNSPECIFIED   | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCNTR FOR SURGICAL AFTCR FOL SURGERY ON THE NERVOUS SYS     | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-----------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HHS/HOSPICE OF RN EA 15 MIN | ENCNTR FOR SURGICAL AFTCR FOLLOWING SURGERY ON THE DGSTV SYS | Internal Medicine                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCNTR FOR SURGICAL AFTCR FOLLOWING SURGERY ON THE RESP SYS  | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR ADJUSTMENT AND MANAGEMENT OF VAD               | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR ATTENTION TO COLOSTOMY                         | Surgery, Colon And Rectal              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR CHANGE OR REMOVAL OF NONSURG WOUND DRESSING    | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR CHANGE OR REMOVAL OF NONSURG WOUND DRESSING    | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR CHANGE OR REMOVAL OF SURGICAL WOUND DRESSING   | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR FITTING AND ADJUSTMENT OF URINARY DEVICE       | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE                     | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE                     | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE                     | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE             | Surgery, Orthopedic                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ESSENTIAL (PRIMARY) HYPERTENSION                             | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ESSENTIAL (PRIMARY) HYPERTENSION                             | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ESSENTIAL (PRIMARY) HYPERTENSION                             | Infectious Disease                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | ESSENTIAL (PRIMARY) HYPERTENSION                             | Physical Medicine                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | FRACTURE OF LEFT SHOULDER GIRDLE, PART UNSP, INIT            | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | FX UNSP PART OF NK OF L FEMR, SUBS FOR CLOS FX W ROUNN HEAL  | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HEART FAILURE, UNSPECIFIED                                   | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HEART TRANSPLANT STATUS                                      | Surgery, Thoracic                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HEMIPLGA FOLLOWING CEREBRAL INFRC AFFECTING LEFT NONDOM SIDE | Family Nurse Practitioner Primary Care | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HODGKIN LYMPHOMA, UNSP, EXTRANODAL AND SOLID ORGAN SITES     | Physical Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HYPERGLYCEMIA, UNSPECIFIED                                   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HYPERTENSIVE CHRONIC KIDNEY DISEASE W STG 1-4/UNSP CHR KDNY  | Family Medicine                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HYPERTENSIVE CHRONIC KIDNEY DISEASE W STG 1-4/UNSP CHR KDNY  | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HYPERTENSIVE HEART DISEASE WITH HEART FAILURE                | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | HYPOXEMIA  | Family Medicine                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | INFECT/INFLM REACT D/T OTH CARDI/VASC DEV/IMPLNT/GRFT, SUBS  | Infectious Disease                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-----------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HHS/HOSPICE OF RN EA 15 MIN | INFECT/INFLM REACTION DUE TO INTERNAL LEFT HIP PROSTH, INIT  | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | INFECTION OF AMPUTATION STUMP, RIGHT LOWER EXTREMITY         | Podiatry                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | INJURY, UNSPECIFIED, INITIAL ENCOUNTER                       | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | INSTABILITY OF INTERNAL RIGHT KNEE PROSTHESIS, INIT ENCNT    | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIG NEOPLASM OF LOWER-OUTER QUADRANT OF LEFT FEMALE BREAST | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIG NEOPLASM OF OVRLP SITES OF RECTUM, ANUS AND ANAL CANAL | Geriatric Medicine                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                     | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Infectious Disease                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Oncology                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF MOUTH, UNSPECIFIED                     | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF NASOPHARYNX, UNSPECIFIED               | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF PANCREATIC DUCT                        | Hematology                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF STOMACH, UNSPECIFIED                   | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF UNSP PART OF RIGHT BRONCHUS OR LUNG    | Hematology                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MUSCLE WEAKNESS (GENERALIZED)                                | Pulmonary Disease                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | MYELOFIBROSIS  | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | NONDISPLACED FRACTURE OF BASE OF NECK OF LEFT FEMUR, SEQUELA | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | NON-HODGKIN LYMPHOMA, UNSPECIFIED, UNSPECIFIED SITE          | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION              | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION              | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | OTHER AMNESIA  | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | OTHER DISEASES OF STOMACH AND DUODENUM                       | Family Medicine                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | OTHER DISORDERS OF LUNG                                      | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | OTHER DISORDERS OF LUNG                                      | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION        | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | OTHER REDUCED MOBILITY                                       | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PAIN IN LEFT SHOULDER  | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HHS/HOSPICE OF RN EA 15 MIN | PAIN IN RIGHT HIP  | Surgery, Orthopedic     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PARKINSON'S DISEASE  | Internal Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PNEUMONIA, UNSPECIFIED ORGANISM                              | Physical Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PNEUMONIA, UNSPECIFIED ORGANISM                              | Pulmonary Disease       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESENCE OF AORTOCORONARY BYPASS GRAFT                       | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESENCE OF AORTOCORONARY BYPASS GRAFT                       | Surgery, Cardiovascular | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESENCE OF AORTOCORONARY BYPASS GRAFT                       | Surgery, Thoracic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESENCE OF LEFT ARTIFICIAL HIP JOINT                        | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESENCE OF LEFT ARTIFICIAL HIP JOINT                        | Surgery, Orthopedic     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESENCE OF LEFT ARTIFICIAL KNEE JOINT                       | Surgery, Orthopedic     | 3                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESENCE OF RIGHT ARTIFICIAL HIP JOINT                       | Surgery, Orthopedic     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESENCE OF RIGHT ARTIFICIAL KNEE JOINT                      | Surgery, Orthopedic     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESSURE ULCER OF SACRAL REGION                              | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESSURE ULCER OF SACRAL REGION, UNSTAGEABLE                 | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PRESSURE-INDUCED DEEP TISSUE DAMAGE OF SACRAL REGION         | Internal Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | PYOGENIC ARTHRITIS, UNSPECIFIED                              | Infectious Disease      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | RADICULOPATHY, LUMBAR REGION                                 | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Neurological   | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | SECONDARY MALIGNANT NEOPLASM OF BONE                         | Family Medicine         | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | SEPSIS, UNSPECIFIED ORGANISM                                 | Internal Medicine       | 4                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | SEVERE SEPSIS WITH SEPTIC SHOCK                              | Family Medicine         | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUD      | Surgery, Neurological   | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | SPINAL STENOSIS, SITE UNSPECIFIED                            | Surgery, Neurological   | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | SYSTEMIC LUPUS ERYTHEMATOSUS, UNSPECIFIED                    | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | SYSTEMIC LUPUS ERYTHEMATOSUS, UNSPECIFIED                    | Infectious Disease      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | THYROTOXICOSIS W DIFFUSE GOITER W/O THYROTOXIC CRISIS        | Ophthalmology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | TYPE 2 DIABETES MELLITUS WITH OTHER SKIN COMPLICATIONS       | Podiatry                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS               | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS               | Internal Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS               | Obstetrics/Gynecology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN | TYPE 2 DIABETES W DIABETIC PERIPHERAL ANGIOPATH W/O GANGRENE | Internal Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |

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|------------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HHS/HOSPICE OF RN EA 15 MIN  | UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, LEFT KNEE        | Surgery, Orthopedic                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE               | Surgery, Orthopedic                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT HIP               | Surgery, Orthopedic                              | 2                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | UNSP FRACTURE OF RIGHT ACETABULUM, INIT FOR CLOS FX        | Family Medicine                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | UNSP FRACTURE OF RIGHT FEMUR, INIT FOR CLOS FX             | Internal Medicine                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | URINARY TRACT INFECTION, SITE NOT SPECIFIED                | Internal Medicine                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HHS/HOSPICE OF RN EA 15 MIN  | WEAKNESS   | Surgery, General                                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HI FREQ CHEST WALL OSCIL SYS | BRONCHIECTASIS, UNCOMPLICATED                              | Pulmonary Disease                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT ANTI-TNF PER DIEM        | CROHN'S DISEASE OF SMALL INTESTINE WITHOUT COMPLICATIONS   | Gastroenterology                                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT ANTI-TNF PER DIEM        | JUVENILE RHEUMATOID ARTHRITIS W SYSTEMIC ONSET, RIGHT KNEE | Internal Medicine                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT ANTI-TNF PER DIEM        | OTHER ULCERATIVE COLITIS WITHOUT COMPLICATIONS             | Gastroenterology                                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT CONT ANTIEMETIC DIEM     | DEHYDRATION  | Gastroenterology                                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| HIT CONT ANTIEMETIC DIEM     | MILD HYPEREMESIS GRAVIDARUM                                | Midwifery  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT ENTERAL BOLUS NURS       | EOSINOPHILIC ESOPHAGITIS                                   | Pediatric Gastroenterology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| HIT ENTERAL BOLUS NURS       | SECONDARY MALIGNANT NEOPLASM OF RIGHT LUNG                 | Otolaryngology (Ear, Nose, And Throat)           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| HIT HYDRA TOTAL DIEM         | MILD HYPEREMESIS GRAVIDARUM                                | Midwifery  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT IMMUNOTHERAPY DIEM       | NONFAMILIAL HYPOGAMMAGLOBULINEMIA                          | Neurology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT LONGTERM INFUSION DIEM   | PRIMARY PULMONARY HYPERTENSION                             | Advanced Heart Failure And Transplant Cardiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT NOC PER DIEM             | COVID-19   | Internal Medicine                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT NOC PER DIEM             | CROHN'S DISEASE OF BOTH SMALL AND LG INT W/O COMPLICATIONS | Gastroenterology                                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT NOC PER DIEM             | IRON DEFICIENCY ANEMIA SECONDARY TO BLOOD LOSS (CHRONIC)   | Hematology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT NOC PER DIEM             | MULTIPLE SCLEROSIS   | Neurology  | 4                  |                  |                 |  |                          |                        |                      |                 |
| HIT NOC PER DIEM             | OTHER ULCERATIVE COLITIS WITHOUT COMPLICATIONS             | Gastroenterology                                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT NOC PER DIEM             | PRIMARY PULMONARY HYPERTENSION                             | Advanced Heart Failure And Transplant Cardiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT SYMPATHOMIM DIEM         | HEART FAILURE, UNSPECIFIED                                 | Home Infusion                                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT TPN 2 LITER DIEM         | HEMATEMESIS  | Internal Medicine                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HIT TPN 3 LITER DIEM         | HEMATEMESIS  | Internal Medicine                                | 2                  |                  |                 |  |                          |                        |                      |                 |
| HIZENTRA INJECTION           | CHRONIC INFLAMMATORY DEMYELINATING POLYNEURITIS            | Neurology  | 1                  |                  |                 |  |                          |                        |                      |                 |



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|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HIZENTRA INJECTION   | NONFAMILIAL HYPOGAMMAGLOBULINEMIA                            | Neurology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HLA TYPING A B OR C  | ACUTE LYMPHOBLASTIC LEUKEMIA NOT HAVING ACHIEVED REMISSION   | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HLA TYPING A B OR C  | ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION                    | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HLA TYPING DR/DQ   | ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION                    | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOME INFUSION EACH ADDTL HR  | MALIG NEOPLASM OF LOWER-OUTER QUADRANT OF LEFT FEMALE BREAST | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOME INFUSION/VISIT 2 HRS  | MALIG NEOPLASM OF LOWER-OUTER QUADRANT OF LEFT FEMALE BREAST | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device used with 3 channels to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric)                  | Oncology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Chronic fatigue, unspecified                                 | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Essential (primary) hypertension                             | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Hypersomnia, unspecified                                     | Neurology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Hypersomnia, unspecified                                     | Surgery, Plastic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Morbid (severe) obesity due to excess calories               | PCP/Pediatrician          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric)                  | Allergy/Immunology        | 4                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric)                  | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric)                  | Family Medicine           | 4                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric)                  | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric)                  | Internal Medicine         | 10                 |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric)                  | Neurology                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric)                  | Nurse Practitioner        | 2                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric) | Otolaryngology (Ear, Nose, And Throat) | 3                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric) | PCP/Pediatrician                       | 5                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric) | Physician Assistant                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric) | Podiatry                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric) | Pulmonology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric) | Sleep Medicine                         | 5                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Obstructive sleep apnea (adult) (pediatric) | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Other sleep disorders                       | Pulmonology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Sleep apnea, unspecified                    | Internal Medicine                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Sleep apnea, unspecified                    | Nurse Practitioner                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Sleep apnea, unspecified                    | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Sleep apnea, unspecified                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Sleep apnea, unspecified                    | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Sleep apnea, unspecified                    | Sleep Medicine                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Sleep apnea, unspecified                    | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Sleep disorder, unspecified                 | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Snoring  | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Snoring  | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Snoring  | Pulmonology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Home sleep study test (HST), home based device with 4 channels used to monitor your sleep and breathing during sleep | Snoring  | Surgery, Plastic          | 2                  |                  |                 |  |                          |                        |                      |                 |
| HOME SLEEP TEST/TYPE 3 PORTA   | SLEEP APNEA, UNSPECIFIED                                   | Family Nurse Practitioner | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOME SLEEP TEST/TYPE 4 PORTA   | SLEEP APNEA, UNSPECIFIED                                   | Family Nurse Practitioner | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOME VENT NON-INVASIVE INTER   | AMYOTROPHIC LATERAL SCLEROSIS                              | Neurology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOME VENT NON-INVASIVE INTER   | CHRONIC RESPIRATORY FAILURE WITH HYPERCAPNIA               | Nurse Practitioner        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOME VENT NON-INVASIVE INTER   | OTHER FORMS OF SCOLIOSIS, SITE UNSPECIFIED                 | Pulmonary Disease         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOME VENT NON-INVASIVE INTER   | OTHER INHERITED SPINAL MUSCULAR ATROPHY                    | Pediatric Pulmonology     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOME VENT NON-INVASIVE INTER   | OTHER SPECIFIED MUSCULAR DYSTROPHIES                       | Family Medicine           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| HOME VENT NON-INVASIVE INTER   | SLEEP APNEA, UNSPECIFIED                                   | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE CARE, IN THE HOME, P   | LIVER CELL CARCINOMA                                       | Family Medicine           | 2                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE CARE, IN THE HOME, P   | MALIGNANT NEOPLASM OF ESOPHAGUS, UNSPECIFIED               | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE CARE, IN THE HOME, P   | MALIGNANT NEOPLASM OF OCCIPITAL LOBE                       | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE CARE, IN THE HOME, P   | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG   | Family Medicine           | 2                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE CARE, IN THE HOME, P   | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST     | Oncology                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE CARE, IN THE HOME, P   | MALIGNANT NEOPLASM OF UPPER LOBE, LEFT BRONCHUS OR LUNG    | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE CARE, IN THE HOME, P   | MALIGNANT NEOPLASM OF UPPER LOBE, LEFT BRONCHUS OR LUNG    | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE CONTINUOUS HOME CARE   | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG   | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE IN SNF   | SECONDARY MALIGNANT NEOPLASM OF BRAIN                      | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE OR HOME HLTH IN HOME   | ACUTE MYELOBLASTIC LEUKEMIA, NOT HAVING ACHIEVED REMISSION | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE OR HOME HLTH IN HOME   | LIVER CELL CARCINOMA                                       | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE OR HOME HLTH IN HOME   | MALIGNANT NEOPLASM OF ASCENDING COLON                      | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE OR HOME HLTH IN HOME   | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                   | Geriatric Medicine        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE OR HOME HLTH IN HOME   | MALIGNANT NEOPLASM OF PANCREAS, UNSPECIFIED                | Family Medicine           | 2                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE OR HOME HLTH IN HOME   | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG   | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPICE OR HOME HLTH IN HOME   | RESPIRATORY SYNCYTIAL VIRUS PNEUMONIA                      | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HOSPITAL - INPATIENT  | ACUTE LEUKEMIA OF UNSPECIFIED CELL TYPE, IN REMISSION      | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | ACUTE LYMPHOBLASTIC LEUKEMIA [ALL]                         | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | ACUTE LYMPHOBLASTIC LEUKEMIA NOT HAVING ACHIEVED REMISSION | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | ACUTE MYELOBLASTIC LEUKEMIA, NOT HAVING ACHIEVED REMISSION | Emergency Medicine                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | ACUTE MYELOBLASTIC LEUKEMIA, NOT HAVING ACHIEVED REMISSION | Hematology                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | CLEFT PALATE   | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | COVID-19   | Pulmonary Disease                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | CYST OF PANCREAS   | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | HODGKIN LYMPHOMA, UNSP, EXTRANODAL AND SOLID ORGAN SITES   | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | NEUTROPENIA, UNSPECIFIED                                   | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOSPITAL - INPATIENT  | NEUTROPENIA, UNSPECIFIED                                   | Hospital                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOUSING & INTEGRATED ADHESIV  | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HOUSING & INTEGRATED ADHESIV  | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Apnea, not elsewhere classified                            | Internal Medicine                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Apnea, not elsewhere classified                            | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Body mass index [BMI] 35.0-35.9, adult                     | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Chronic fatigue, unspecified                               | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Encounter for preprocedural laboratory examination         | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Epistaxis  | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Headache, unspecified                                      | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Headache, unspecified                                      | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                                   | ENT/Otolaryngology                     | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description                  | Provider Specialty                     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Internal Medicine                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Nurse Practitioner                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Physician Assistant                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Rheumatology                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypersomnia, unspecified                    | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypertrophy of tonsils                      | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Hypoxemia                                   | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Insomnia, unspecified                       | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Insomnia, unspecified                       | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Insomnia, unspecified                       | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Insomnia, unspecified                       | Sleep Medicine                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Cardiac Electrophysiology              | 9                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description                  | Provider Specialty                     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Cardiovascular Disease                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | ENT/Otolaryngology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Family Medicine                        | 9                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Hospital                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Internal Medicine                      | 24                 |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Nephrology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Neurology                              | 6                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Nurse Practitioner                     | 3                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Obstetrics/Gynecology                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Otolaryngology (Ear, Nose, And Throat) | 7                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | PCP/Pediatrician                       | 15                 |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Pediatrics                             | 5                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Psychiatry                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Pulmonology                            | 6                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description                  | Provider Specialty           | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Rheumatology                 | 9                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Sleep Medicine               | 5                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Surgery, General             | 10                 |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Surgery, Orthopedic          | 3                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Surgery, Thoracic            | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Surgery, Vascular            | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Obstructive sleep apnea (adult) (pediatric) | Urology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Other fatigue                               | Surgery, General             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Other hypersomnia                           | PCP/Pediatrician             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Palpitations                                | Surgery, Thoracic            | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Paroxysmal atrial fibrillation              | Cardiovascular Disease       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Secondary polycythemia                      | Obstetrics/Gynecology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Shortness of breath                         | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified                    | Cardiovascular Disease       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified                    | Endocrinology And Metabolism | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|-----------------------------|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | ENT/Otolaryngology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Family Medicine                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Nurse Practitioner                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Otolaryngology (Ear, Nose, And Throat) | 5                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | PCP/Pediatrician                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Physician Assistant                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Surgery, General                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep apnea, unspecified    | Surgery, Thoracic                      | 4                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep deprivation           | Rheumatology                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep disorder, unspecified | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep disorder, unspecified | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |



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|---|-----------------------------|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep disorder, unspecified | Rheumatology                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Sleep disorder, unspecified | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | ENT/Otolaryngology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Internal Medicine                      | 5                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Nurse Practitioner                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | PCP/Pediatrician                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Radiation Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Rheumatology                           | 4                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                     | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Snoring                                       | Surgery, Vascular                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Somnolence                                    | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Somnolence                                    | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Somnolence                                    | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Somnolence                                    | Otolaryngology (Ear, Nose, And Throat) | 2                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Somnolence                                    | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HST, or Home Sleep Test device - a home based healthcare device used to diagnose sleep disordered breathing | Somnolence                                    | Surgery, Plastic                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| HUMALOG 100/ML UNITS  |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMALOG MIX 75-25 75-25/ML VIAL   |   | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| HUMATROPE 12 MG CARTRIDGE   |   | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMATROPE 12 MG CARTRIDGE   |   | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| HUMATROPE 24 MG CARTRIDGE   |   | Other                                  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| HUMATROPE 6 MG CARTRIDGE  |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA  | Other chronic osteomyelitis, unspecified site | Rheumatology                           |                    |                  |                 |  |                          | 1                      |                      |                 |
| HUMIRA 40MG/0.8ML SYRINGEKIT  |   | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA 40MG/0.8ML SYRINGEKIT  |   | Rheumatology                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| HUMIRA PEN 40MG/0.8ML PEN IJ KIT  |   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA PEN 40MG/0.8ML PEN IJ KIT  |   | Other                                  | 4                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA PEN 40MG/0.8ML PEN IJ KIT  |   | PCP/Pediatrician                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA PEN 40MG/0.8ML PEN IJ KIT  |   | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA PEN CROHN'S-UC-HS 40MG/0.8ML PEN IJ KIT  |   | Gastroenterology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) 20MG/0.2ML SYRINGEKIT  |   | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) 40MG/0.4ML SYRINGEKIT  |   | Dermatology                            | 2                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) 40MG/0.4ML SYRINGEKIT  |   | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) 40MG/0.4ML SYRINGEKIT  |   | PCP/Pediatrician                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) 40MG/0.4ML SYRINGEKIT  |   | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN 40MG/0.4ML PEN IJ KIT  |   | Dermatology                            | 3                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN 40MG/0.4ML PEN IJ KIT  |   | Gastroenterology                       | 12                 | 1                | 1               |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN 40MG/0.4ML PEN IJ KIT  |   | Other                                  | 31                 | 1                | 1               |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN 40MG/0.4ML PEN IJ KIT  |   | PCP/Pediatrician                       | 5                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN 40MG/0.4ML PEN IJ KIT  |   | Rheumatology                           | 6                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN 80MG/0.8ML PEN IJ KIT  |   | Gastroenterology                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN 80MG/0.8ML PEN IJ KIT  |   | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN CROHN'S-UC-HS 80MG/0.8ML PEN IJ KIT  |   | Gastroenterology                       | 4                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                            | Diagnosis Code Description                    | Provider Specialty       | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|--------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| HUMIRA(CF) PEN CROHN'S-UC-HS 80MG/0.8ML PEN IJ KIT    |   | Other                    | 4                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN PEDIATRIC UC 80MG/0.8ML PEN IJ KIT     |   | Gastroenterology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN PSOR-UV-ADOL HS 80 MG-40MG PEN IJ KIT  |   | Dermatology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| HUMIRA(CF) PEN PSOR-UV-ADOL HS 80 MG-40MG PEN IJ KIT  |   | Other                    | 3                  |                  |                 |  |                          |                        |                      |                 |
| HYALGAN SUPARTZ VISCO-3 DOSE                          | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE      | Surgery, Orthopedic      |                    | 1                | 1               |  |                          |                        |                      |                 |
| HYALGAN SUPARTZ VISCO-3 DOSE                          | CHONDRIMALACIA PATELLAE, RIGHT KNEE           | Surgery, Orthopedic      |                    | 1                | 1               |  |                          |                        |                      |                 |
| HYALGAN SUPARTZ VISCO-3 DOSE                          | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE | Surgery, Orthopedic      |                    | 1                | 1               |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 10MG-325MG TABLET           |   | Family Medicine          | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 10MG-325MG TABLET           |   | Neurology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 10MG-325MG TABLET           |   | Other                    | 20                 |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 10MG-325MG TABLET           |   | Pain Management          | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 10MG-325MG TABLET           |   | PCP/Pediatrician         | 6                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 10MG-325MG TABLET           |   | Physiatry/Rehabilitative | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 10MG-325MG TABLET           |   | Surgery, Neurological    | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 5 MG-325MG TABLET           |   | ENT/Otolaryngology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 5 MG-325MG TABLET           |   | Oncology/Radiation       | 2                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 5 MG-325MG TABLET           |   | Orthopedic Surgery       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 5 MG-325MG TABLET           |   | Other                    | 14                 | 1                | 1               |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 5 MG-325MG TABLET           |   | PCP/Pediatrician         | 5                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 7.5-325 MG TABLET           |   | Other                    | 4                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 7.5-325 MG TABLET           |   | Pain Management          | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 7.5-325 MG TABLET           |   | PCP/Pediatrician         |                    | 1                | 1               |  |                          |                        |                      |                 |
| HYDROCODONE-ACETAMINOPHEN 7.5-325/15 SOLUTION         |   | PCP/Pediatrician         | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-CHLORPHENIRAMINE ER 10-8MG/5ML SUS.12H SR |   | Other                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| HYDROCODONE-IBUPROFEN 7.5-200 MG TABLET               |   | Other                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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| HYDROMORPHONE                               | long standing abdominal pain  | Pain Management                        |                    |                  |                 |  |                          |                        | 1                    |                 |
| HYDROMORPHONE ER 8 MG TAB ER 24H            |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| HYDROMORPHONE HCL 4 MG TABLET               |   | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| HYDROMORPHONE HCL 8 MG TABLET               |   | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| HYDROXYCHLOROQUINE SULFATE 200 MG TABLET    |   | Other                                  | 8                  |                  |                 |  |                          |                        |                      |                 |
| HYDROXYCHLOROQUINE SULFATE 200 MG TABLET    |   | PCP/Pediatrician                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| HYDROXYCHLOROQUINE SULFATE 200 MG TABLET    |   | Rheumatology                           | 6                  |                  |                 |  |                          |                        |                      |                 |
| HYDROXYPROGESTERONE CAPROATE 250 MG/ML VIAL |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYMOVIS INJECTION 1 MG                      | PAIN IN LEFT KNEE   | Physical Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| HYPERBARIC OXYGEN THERAPY                   | INFLAMMATORY CONDITIONS OF JAWS                                       | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYPERBARIC OXYGEN THERAPY                   | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST                | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYPERBARIC OXYGEN THERAPY                   | OTH DISRD OF THE SKIN, SUBCU RELATED TO RADIATION                     | Physical Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| HYPERBARIC OXYGEN THERAPY                   | SKIN GRAFT (ALLOGRAFT) (AUTOGRAFT) FAILURE                            | Surgery, General                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| IBRANCE 125 MG CAPSULE                      |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| IBRANCE 125 MG TABLET                       |   | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| IBUPROFEN-FAMOTIDINE 800-26.6MG TABLET      |   | Other                                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| ICLUSIG 15 MG TABLET                        |   | Oncology/Radiation                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| ICOSAPENT ETHYL 1 G CAPSULE                 |   | Cardiology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| ICOSAPENT ETHYL 1 G CAPSULE                 |   | PCP/Pediatrician                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| IGG 1 2 3 OR 4 EACH                         | ANAPHYLACTIC REACTION DUE TO PEANUTS, SUBSEQUENT ENCOUNTER            | Pediatrics                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| ILIAC REVASC W/STENT                        | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED                              | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| ILIAC REVASC W/STENT                        | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED                              | Surgery, Vascular                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| ILUMYA 100 MG/ML SYRINGE                    |   | Dermatology                            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ILUMYA 100 MG/ML SYRINGE                    |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMATINIB MESYLATE 400 MG TABLET             |   | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMATINIB MESYLATE 400 MG TABLET             |   | Oncology/Radiation                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMATINIB MESYLATE 400 MG TABLET             |   | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| IMBRUVICA 420 MG TABLET                     |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMBRUVICA 560 MG TABLET                     |   | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMIQUIMOD 3.75 % CREAM PACK                 |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| IMMUNOASSAY QUANT NOS NONAB                 | ANAPHYLACTIC REACTION DUE TO PEANUTS, SUBSEQUENT ENCOUNTER            | Pediatrics                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| IMPLANT COCHLEAR DEVICE                     | SENSORINEURAL HEARING LOSS, BILATERAL                                 | Pediatric Otolaryngology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| IMPLANT COCHLEAR DEVICE                     | SNSRNRL HEAR LOSS, UNI, L EAR, WITH RSTRCD HEAR CNTRA SIDE            | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES                     | ALGONEURODYSTROPHY UNSPECIFIED SITE                                   | PAIN MANAGEMENT                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES                     | CHRONIC PAIN SYNDROME, COMPLEX REGIONAL PAIN SYNDROME I RT LOWER LIMB | ANESTHESIOLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES                     | COMPLEX REGIONAL PAIN SYNDROME I OF LEFT LOWER LIMB                   | Pain Management                        | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| IMPLANT NEUROELECTRODES   | COMPLEX REGIONAL PAIN SYNDROME I RT LOWER LIMB, NEURALGIA AND NEURITIS UNSPECIFIED | PAIN MANAGEMENT                        | 1                  | 1                |                 | 1                                      |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES   | OTH INTERVERTEBRAL DISC DEGEN LUMBOSACRAL REGION                                   | ANESTHESIOLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES   | Pain in right knee   | Other                                  |                    |                  |                 |  |                          |                        | 1                    |                 |
| IMPLANT NEUROELECTRODES   | Pain in right knee   | Physician Assistant                    |                    |                  |                 |  |                          |                        | 1                    |                 |
| IMPLANT NEUROELECTRODES   | PERIPHERAL VASCULAR DISEASE UNSPECIFIED  | ANESTHESIOLOGY                         |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES   | POSTLAMINECTOMY SYNDROME NEC   | ANESTHESIOLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES   | RADICULOPATHY CERVICAL REGION  | PAIN MANAGEMENT                        |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES   | RADICULOPATHY LUMBAR REGION  | PAIN MANAGEMENT                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMPLANT NEUROELECTRODES   | URGENCY OF URINATION   | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMPLANTABLE TISSUE MARKER   | MALIGNANT NEOPLASM OF PROSTATE   | Radiation Oncology                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Implt neurostim elctr each  | CHRONIC PAIN SYNDROME, COMPLEX REGIONAL PAIN SYNDROME I RT LOWER LIMB              | ANESTHESIOLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Implt neurostim elctr each  | RADICULOPATHY CERVICAL REGION  | PAIN MANAGEMENT                        |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| IMPLTJ OI IMPLT SKL PERQ ESP  | HYPERTROPHY OF NASAL TURBINATES  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| IMPLTJ OI IMPLT SKL PERQ ESP  | UNSPECIFIED SENSORINEURAL HEARING LOSS   | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| INBRIJA 42 MG CAP W/DEV   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INCIS 1 VERTEBRAL SEG LUMBAR  | OTHER SECONDARY SCOLIOSIS, LUMBAR REGION   | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INCIS 1 VERTEBRAL SEG LUMBAR  | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED                           | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INCIS 1 VERTEBRAL SEG THORAC  | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION                       | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INCIS ADDL SPINE SEGMENT  | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION                       | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| INCISE SKULL (PRESS RELIEF)   | SYRINGOMYELIA AND SYRINGOBULBIA  | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Incision and drainage, deep abscess, bursa, or hematoma, thigh or knee region | CONTUSION OF LEFT KNEE INITIAL ENCOUNTER   | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INCISION OF WINDPIPE  | MALIGNANT NEOPLASM OF MOUTH, UNSPECIFIED   | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| INCISION OF WINDPIPE  | MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED  | Surgery, Oral And Maxillofacial        | 1                  |                  |                 |  |                          |                        |                      |                 |
| INCOBOTULINUMTOXIN A  | CLONIC HEMIFACIAL SPASM, RIGHT   | Neurology                              |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| INCOBOTULINUMTOXIN A  | SPASMODIC TORTICOLLIS  | Neurology                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| INFLECTRA 100 MG VIAL   |  | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG  | ANKYLOSING SPONDYLITIS OF UNSPECIFIED SITES IN SPINE                               | Rheumatology                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG  | ARTHROPATHIC PSORIASIS, UNSPECIFIED  | Rheumatology                           | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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|------------------------------|---|----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE OF BOTH SMALL AND LG INT W INTESTINAL OBST  | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE OF BOTH SMALL AND LG INT W INTESTINAL OBST  | Internal Medicine          |                    | 1                | 1               |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE OF BOTH SMALL AND LG INT W/O COMPLICATIONS  | Family Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE OF BOTH SMALL AND LG INT W/O COMPLICATIONS  | Gastroenterology           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE OF BOTH SMALL AND LG INT W/O COMPLICATIONS  | Pediatrics                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE OF LARGE INTESTINE W INTESTINAL OBSTRUCTION | Internal Medicine          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE OF LARGE INTESTINE WITHOUT COMPLICATIONS    | Gastroenterology           | 6                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE OF SMALL INTESTINE WITHOUT COMPLICATIONS    | Gastroenterology           | 2                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE, UNSPECIFIED, WITH OTHER COMPLICATION       | Pediatric Gastroenterology | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS         | Family Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS         | Gastroenterology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS         | Pediatric Gastroenterology | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | LEFT SIDED COLITIS WITHOUT COMPLICATIONS                    | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | NONINFECTIVE GASTROENTERITIS AND COLITIS, UNSPECIFIED       | Pediatric Gastroenterology | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | ORBITAL MYOSITIS, BILATERAL                                 | Internal Medicine          |                    | 1                | 1               |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | OTHER JUVENILE ARTHRITIS, UNSPECIFIED SITE                  | Pediatric Rheumatology     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | OTHER ULCERATIVE COLITIS WITHOUT COMPLICATIONS              | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | PSORIASIS VULGARIS  | Internal Medicine          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | RHEUMATOID ARTHRITIS, UNSPECIFIED                           | Rheumatology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | ULCERATIVE (CHRONIC) PANCOLITIS WITH RECTAL BLEEDING        | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | ULCERATIVE (CHRONIC) PANCOLITIS WITHOUT COMPLICATIONS       | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | ULCERATIVE (CHRONIC) PANCOLITIS WITHOUT COMPLICATIONS       | Pediatrics                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | ULCERATIVE COLITIS, UNSPECIFIED WITH FISTULA                | Gastroenterology           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INFLIXIMAB NOT BIOSIMIL 10MG | ULCERATIVE COLITIS, UNSPECIFIED, WITHOUT COMPLICATIONS      | Neurology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INITIAL HOSPITAL CARE        | ACUTE LEUKEMIA OF UNSP CELL TYPE NOT ACHIEVE REMISSION      | Oncology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INITIAL HOSPITAL CARE        | MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION              | Oncology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INITIAL HOSPITAL CARE        | PAROXYSMAL ATRIAL FIBRILLATION                              | Cardiovascular Disease     | 1                  |                  |                 |  |                          |                        |                      |                 |

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| INJ BIMATOPROST ITC IMP1MCG  | PRIMARY OPEN-ANGLE GLAUCOMA, BILATERAL, MODERATE STAGE   | Ophthalmology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ CABOTEGRAVIR/RILPIVIRINE | HUMAN IMMUNODEFICIENCY VIRUS [HIV] DISEASE   | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ FAM-TRASTU DERU-NXKI 1MG | MALIGNANT NEOPLASM OF DESCENDING COLON   | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FERRIC CARBOXYMALTOS 1MG | IRON DEFICIENCY ANEMIA, UNSPECIFIED  | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FOLLITROPIN ALFA 75 IU   | FEMALE INFERTILITY OF OTHER ORIGIN   | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FOLLITROPIN ALFA 75 IU   | FEMALE INFERTILITY, UNSPECIFIED  | Anesthesiology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FOLLITROPIN ALFA 75 IU   | FEMALE INFERTILITY, UNSPECIFIED  | Obstetrics/Gynecology                  | 8                  |                  |                 |  |                          |                        |                      |                 |
| INJ FOLLITROPIN ALFA 75 IU   | FEMALE INFERTILITY, UNSPECIFIED  | Reproductive Endocrinology/Infertility | 11                 |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | Spinal stenosis, lumbar region without neurogenic claud  | PHYSICAL MEDICINE & REHABILITATION     | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | CERVICALGIA  | ANESTHESIOLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | CERVICALGIA  | PAIN MANAGEMENT                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMBAR RGN   | PAIN MANAGEMENT                        | 4                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | LOW BACK PAIN  | PAIN MANAGEMENT                        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | LOW BACK PAIN  | PHYSICAL MEDICINE & REHABILITATION     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | LOW BACK PAIN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | LUMBAGO WITH SCIATICA LEFT SIDE  | PAIN MANAGEMENT                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | LUMBAGO WITH SCIATICA LEFT SIDE, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMBAR RGN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION, INSOMNIA DUE TO MEDICAL CONDITION | PAIN MANAGEMENT                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | LUMBAGO WITH SCIATICA RIGHT SIDE   | PHYSICAL MEDICINE & REHABILITATION     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | LUMBAGO WITH SCIATICA RIGHT SIDE   | SURGERY-ORTHOPEDIC                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | ANESTHESIOLOGY                         | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | PAIN MANAGEMENT                        | 18                 |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON  | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |

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| INJ FORAMEN EPIDURAL ADD-ON | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN                                | PAIN MANAGEMENT                    | 4                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY CERVICAL REGION  | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 8                  | 2                | 2               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBAR REGION  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBAR REGION  | PAIN MANAGEMENT                    | 25                 | 4                | 4               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBAR REGION  | SPORTS MEDICINE                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBAR REGION  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBOSACRAL REGION   | ANESTHESIOLOGY                     | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBOSACRAL REGION   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | RADICULOPATHY LUMBOSACRAL REGION   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | SACROCOCCYGEAL DISORDERS NEC   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | SCIATICA LEFT SIDE   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN                               | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN                                  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL ADD-ON | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN                                  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL C/T    | CERVICALGIA  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL C/T    | CERVICALGIA  | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL C/T    | OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION, RADICULOPATHY CERVICAL REGION | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL C/T    | RADICULOPATHY CERVICAL REGION  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL C/T    | RADICULOPATHY CERVICAL REGION  | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL C/T    | RADICULOPATHY CERVICAL REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL C/T    | RADICULOPATHY THORACIC REGION  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S    |  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S    | , Spinal stenosis, lumbar region with neurogenic claudication                  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |



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| INJ FORAMEN EPIDURAL L/S   | , Spinal stenosis, lumbar region with neurogenic claudication  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | , Spinal stenosis, lumbar region with neurogenic claudication  | PHYSICAL MEDICINE & REHABILITATION | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | , Spinal stenosis, lumbar region with neurogenic claudication  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | , Spinal stenosis, lumbar region without neurogenic claudication   | PHYSICAL MEDICINE & REHABILITATION | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LS RGN   | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | PAIN MANAGEMENT                    | 5                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION, NEURALGIA AND NEURITIS UNSPECIFIED                                 | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LOW BACK PAIN  | PAIN MANAGEMENT                    | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LOW BACK PAIN  | PHYSICAL MEDICINE & REHABILITATION | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LOW BACK PAIN  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LOW BACK PAIN, LUMBAGO WITH SCIATICA LEFT SIDE, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, RADICULOPATHY LUMBAR REGION  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LOW BACK PAIN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LUMBAGO WITH SCIATICA LEFT SIDE  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LUMBAGO WITH SCIATICA LEFT SIDE  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LUMBAGO WITH SCIATICA LEFT SIDE, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION, INSOMNIA DUE TO MEDICAL CONDITION | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| INJ FORAMEN EPIDURAL L/S   | LUMBAGO WITH SCIATICA RIGHT SIDE   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | LUMBAGO WITH SCIATICA RIGHT SIDE   | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | PAIN MANAGEMENT                    | 21                 |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION, RADICULOPATHY LUMBAR REGION                  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | ORTHOPEDIC SURGERY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | PAIN MANAGEMENT                    | 4                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION  | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 14                 | 3                | 3               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBAR REGION  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBAR REGION  | PAIN MANAGEMENT                    | 41                 | 4                | 4               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 15                 | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBAR REGION  | SPORTS MEDICINE                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBAR REGION  | SURGERY- ORTHOPEDIC                | 5                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBAR REGION, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION                     | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBOSACRAL REGION   | ANESTHESIOLOGY                     | 4                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBOSACRAL REGION   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | RADICULOPATHY LUMBOSACRAL REGION   | PHYSICAL MEDICINE & REHABILITATION | 4                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | SACROCOCCYGEAL DISORDERS NEC   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S   | SCIATICA LEFT SIDE   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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| INJ FORAMEN EPIDURAL L/S     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN           | PAIN MANAGEMENT                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S     | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN              | PAIN MANAGEMENT                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ FORAMEN EPIDURAL L/S     | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN              | PHYSICAL MEDICINE & REHABILITATION     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ GANIRELIX ACETAT 250 MCG | FEMALE INFERTILITY, UNSPECIFIED                            | Anesthesiology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ GANIRELIX ACETAT 250 MCG | FEMALE INFERTILITY, UNSPECIFIED                            | Obstetrics/Gynecology                  | 5                  |                  |                 |  |                          |                        |                      |                 |
| INJ GANIRELIX ACETAT 250 MCG | FEMALE INFERTILITY, UNSPECIFIED                            | Reproductive Endocrinology/Infertility | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ HEPARIN SODIUM PER 10 U  | OTHER INTRAOPERATIVE COMPLICATIONS OF THE SPLEEN           | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ MENOTROPINS 75 IU        | FEMALE INFERTILITY OF OTHER ORIGIN                         | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ MENOTROPINS 75 IU        | FEMALE INFERTILITY, UNSPECIFIED                            | Anesthesiology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ MENOTROPINS 75 IU        | FEMALE INFERTILITY, UNSPECIFIED                            | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ MENOTROPINS 75 IU        | FEMALE INFERTILITY, UNSPECIFIED                            | Obstetrics/Gynecology                  | 7                  |                  |                 |  |                          |                        |                      |                 |
| INJ MENOTROPINS 75 IU        | FEMALE INFERTILITY, UNSPECIFIED                            | Reproductive Endocrinology/Infertility | 10                 |                  |                 |  |                          |                        |                      |                 |
| INJ MVASI 10 MG              | MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED                   | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ MVASI 10 MG              | MALIGNANT NEOPLASM OF CECUM                                | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ MVASI 10 MG              | MALIGNANT NEOPLASM OF ENDOMETRIUM                          | Hospital                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ PARAVERT F JNT L/S 1 LEV | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, LUMBAR REGION | Pain Management                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ PARAVERT F JNT L/S 2 LEV | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, LUMBAR REGION | Pain Management                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ PARAVERT F JNT L/S 3 LEV | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, LUMBAR REGION | Pain Management                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ PEMBROLIZUMAB            | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                  | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ PROGESTERONE PER 50 MG   | FEMALE INFERTILITY, UNSPECIFIED                            | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ RETACRIT NON-ESRD USE    | ANEMIA IN CHRONIC KIDNEY DISEASE                           | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ RETACRIT NON-ESRD USE    | END STAGE RENAL DISEASE                                    | Nephrology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ RUXIENCE, 10 MG          | NEPHROTIC SYNDROME W DIFFUSE MEMBRANOUS GLOMERULONEPHRITIS | Nephrology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ RUXIENCE, 10 MG          | NEPHROTIC SYNDROME WITH OTHER MORPHOLOGIC CHANGES          | Nephrology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ RUXIENCE, 10 MG          | RHEU ARTHRITIS W RHEU FACTOR MULT SITE W/O ORG/SYS INVOLV  | Internal Medicine                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INJ TBO FILGRASTIM 1 MICROG  | MALIGNANT NEOPLASM OF ENDOMETRIUM                          | Hematology                             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INJ TRIAMCINOLONE ACE XR 1MG | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                   | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ TRIAMCINOLONE ACE XR 1MG | UNILATERAL PRIMARY OSTEOARTHRITIS, UNSPECIFIED KNEE        | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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| INJ, BROLUZUMAB-DBLL, 1 MG   | EXDTVE AGE-REL MCLR DEGN, LEFT EYE, WITH ACTV CHRDL NEOVAS  | Ophthalmology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ, DUROLANE 1 MG   | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                    | Surgery, Orthopedic          |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ, DUROLANE 1 MG   | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE                | Surgery, Orthopedic          |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ, NUSINERSEN, 0.1MG   | SPINAL MUSCULAR ATROPHY, UNSPECIFIED                        | Pediatric Neurology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ, RIMABOTULINUMTOXINB   | HYPO-OSMOLALITY AND HYPONATREMIA                            | Pain Management              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | ARTHROPATHIC PSORIASIS, UNSPECIFIED                         | Rheumatology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | CROHN'S DISEASE OF BOTH SMALL AND LG INT W/O COMPLICATIONS  | Gastroenterology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | CROHN'S DISEASE OF LARGE INTESTINE W INTESTINAL OBSTRUCTION | Internal Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | CROHN'S DISEASE OF LARGE INTESTINE WITHOUT COMPLICATIONS    | Gastroenterology             | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | CROHN'S DISEASE OF SMALL INTESTINE WITHOUT COMPLICATIONS    | Gastroenterology             | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS         | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | OTHER ULCERATIVE COLITIS WITHOUT COMPLICATIONS              | Gastroenterology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | SARCOIDOSIS, UNSPECIFIED                                    | Internal Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | ULCERATIVE COLITIS, UNSP WITH UNSPECIFIED COMPLICATIONS     | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. AVSOLA, 10 MG   | ULCERATIVE COLITIS, UNSPECIFIED WITH FISTULA                | Gastroenterology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. JIVI 1 IU   | HEREDITARY FACTOR VIII DEFICIENCY                           | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. ROMOSUZUMAB-AQQG 1 MG   | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE  | Endocrinology And Metabolism | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. ROMOSUZUMAB-AQQG 1 MG   | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE  | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ. TEPROTUMUMAB-TRBW 10 MG   | THYROTOXICOSIS W DIFFUSE GOITER W/O THYROTOXIC CRISIS       | Ophthalmology                | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJ., BENRALIZUMAB, 1 MG   | SEVERE PERSISTENT ASTHMA WITH (ACUTE) EXACERBATION          | Allergy/Immunology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ., BENRALIZUMAB, 1 MG   | SEVERE PERSISTENT ASTHMA, UNCOMPLICATED                     | Allergy/Immunology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ., BENRALIZUMAB, 1 MG   | SEVERE PERSISTENT ASTHMA, UNCOMPLICATED                     | Pulmonary Disease            |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ., DURVALUMAB, 10 MG  | MALIGNANT NEOPLASM OF UNSP PART OF RIGHT BRONCHUS OR LUNG   | Hematology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ., RITUXIMAB, 10 MG   | ANEMIA IN CHRONIC KIDNEY DISEASE                            | Oncology                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ., RITUXIMAB, 10 MG   | ARTERITIS, UNSPECIFIED                                      | Rheumatology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ., RITUXIMAB, 10 MG   | GLOMERULAR DISEASE IN SYSTEMIC LUPUS ERYTHEMATOSUS          | Rheumatology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJ., RITUXIMAB, 10 MG   | NEPHROTIC SYNDROME WITH OTHER MORPHOLOGIC CHANGES           | Nephrology                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJ., RITUXIMAB, 10 MG   | RHEUMATOID ARTHRITIS, UNSPECIFIED                           | Rheumatology                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | CHRONIC PAIN SYNDROME                                       | PAIN MANAGEMENT              | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | JOINT DISORDER UNSPECIFIED   | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | JOINT DISORDER UNSPECIFIED   | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | LOW BACK PAIN  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | LOW BACK PAIN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | LOW BACK PAIN  | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION, SACROILIITIS NOT ELSEWHERE CLASSIFIED | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN                                    | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | PAIN IN RIGHT KNEE   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | RADICULOPATHY SACRAL AND SACROCOCCYGEAL REGION                                     | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROCOCCYGEAL DISORDERS NEC   | ANESTHESIOLOGY                     | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROCOCCYGEAL DISORDERS NEC   | PAIN MANAGEMENT                    | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROCOCCYGEAL DISORDERS NEC   | PHYSICAL MEDICINE & REHABILITATION | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROCOCCYGEAL DISORDERS NEC, POSTLAMINECTOMY SYNDROME NEC                         | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROCOCCYGEAL DISORDERS NEC, SACROILIITIS NOT ELSEWHERE CLASSIFIED                | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROCOCCYGEAL DISORDERS NEC, SACROILIITIS NOT ELSEWHERE CLASSIFIED                | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROILIITIS NOT ELSEWHERE CLASSIFIED  | ANESTHESIOLOGY                     | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROILIITIS NOT ELSEWHERE CLASSIFIED  | PAIN MANAGEMENT                    | 12                 |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROILIITIS NOT ELSEWHERE CLASSIFIED  | PHYSICAL MEDICINE & REHABILITATION | 6                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROILIITIS NOT ELSEWHERE CLASSIFIED  | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROILIITIS NOT ELSEWHERE CLASSIFIED  | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint, arthrography and/or anesthetic/steroid | SACROILIITIS NOT ELSEWHERE CLASSIFIED, Unknown, Unknown                            | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description                                    | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography (when performed in ASC)   | SACROCOCCYGEAL DISORDERS NEC                                  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography (when performed in ASC)   | SACROILIITIS NOT ELSEWHERE CLASSIFIED                         | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography (when performed in ASC)   | SACROILIITIS NOT ELSEWHERE CLASSIFIED, Unknown, Unknown       | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), anesthetic agent(s) and/or steroid; nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)   | SACROILIITIS NOT ELSEWHERE CLASSIFIED                         | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | CERVICALGIA   | ANESTHESIOLOGY                     | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | CERVICALGIA   | INTERNAL MEDICINE                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | CERVICALGIA   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | CERVICALGIA   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | CERVICALGIA, OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | LOW BACK PAIN   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | OTH CERVICAL DISC DEGENERATION UNS CERV REGION                | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE              | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | OTHER SPONDYLOSIS CERVICAL REGION   | NEUROLOGY                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | OTHER SPONDYLOSIS CERVICAL REGION   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | OTHER SPONDYLOSIS CERVICAL REGION, CERVICAL DISC D/O W/RADICULOPATHY UNS CERV RGN | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | PAIN IN THORACIC SPINE  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | RADICULOPATHY CERVICAL REGION, CERVICALGIA, ARTHRODESIS STATUS                    | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | ANESTHESIOLOGY                     | 4                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | PAIN MANAGEMENT                    | 8                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, CERVICALGIA                     | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | UNS INFLAMMATORY SPONDYLOPATHY CERVICAL REGION                                    | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level |   | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level |   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | , Spinal stenosis, lumbar region without neurogenic claud   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | DORSALGIA UNSPECIFIED   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LOW BACK PAIN   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LOW BACK PAIN   | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LOW BACK PAIN   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LOW BACK PAIN, OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE                                     | NEUROSURGERY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LOW BACK PAIN, OTHER SPONDYLOSIS LUMBAR REGION  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LUMBAGO WITH SCIATICA LEFT SIDE   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LUMBAGO WITH SCIATICA LEFT SIDE, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN, OTHER CHRONIC PAIN | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | LUMBOSACRAL PLEXUS DISORDERS   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION                                      | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTH INTERVERTEBRAL DISC DEGEN LUMBOSACRAL REGION                                 | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION                                    | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION, RADICULOPATHY LUMBAR REGION       | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE                                 | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE                                 | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTHER SPONDYLOSIS LUMBAR REGION  | PAIN MANAGEMENT                    | 7                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTHER SPONDYLOSIS LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTHER SPONDYLOSIS LUMBAR REGION, SPRAIN LIGAMENTS LUMBAR SPINE INITIAL ENCOUNTER | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTHER SPONDYLOSIS LUMBOSACRAL REGION, ARTHROPATHY UNSPECIFIED                    | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTHER SPONDYLOSIS LUMBOSACRAL REGION, CHRONIC PAIN SYNDROME                      | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | OTHER SPONDYLOSIS WITH MYELOPATHY LUMBAR REGION   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | PAIN UNSPECIFIED, LOW BACK PAIN   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | POSTLAMINECTOMY SYNDROME NEC  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | RADICULOPATHY LUMBAR REGION   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOLYSIS LUMBAR REGION   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | ANESTHESIOLOGY                     | 6                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT                    | 18                 | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PHYSICAL MEDICINE & REHABILITATION | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN | INFECTIOUS DISEASES                | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN, TRAUMATIC SPONDYLOPATHY LUMBAR REGION | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN  | PAIN MANAGEMENT                    | 5                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN  | PHYSICAL MEDICINE & REHABILITATION | 5                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | UNS INFLAMMATORY SPONDYLOPATHY LUMBAR REGION   | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | UNS INFLAMMATORY SPONDYLOPATHY LUMBAR REGION   | PAIN MANAGEMENT                    | 14                 |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level                 | CERVICALGIA  | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level                 | CERVICALGIA  | INTERNAL MEDICINE                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level                 | CERVICALGIA  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level                 | CERVICALGIA  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level                 | CERVICALGIA, OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level                 | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE                                  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | OTHER SPONDYLOSIS CERVICAL REGION   | NEUROLOGY                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | OTHER SPONDYLOSIS CERVICAL REGION   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | OTHER SPONDYLOSIS CERVICAL REGION, CERVICAL DISC D/O W/RADICULOPATHY UNS CERV RGN | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | PAIN IN THORACIC SPINE  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | ANESTHESIOLOGY                     | 4                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | PAIN MANAGEMENT                    | 8                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, CERVICALGIA                     | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance, cervical or thoracic; second level | UNS INFLAMMATORY SPONDYLOPATHY CERVICAL REGION                                    | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level |  | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level |  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | , Spinal stenosis, lumbar region without neurogenic claud  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | DORSALGIA UNSPECIFIED  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | LOW BACK PAIN  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | LOW BACK PAIN  | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | LOW BACK PAIN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | LOW BACK PAIN, OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE                                    | NEUROSURGERY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | LOW BACK PAIN, OTHER SPONDYLOSIS LUMBAR REGION   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | LUMBAGO WITH SCIATICA LEFT SIDE, SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN, OTHER CHRONIC PAIN | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | LUMBOSACRAL PLEXUS DISORDERS   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTH INTERVERTEBRAL DISC DEGEN LUMBOSACRAL REGION                           | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION                              | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION, RADICULOPATHY LUMBAR REGION | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE                           | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTHER SPONDYLOSIS LUMBAR REGION  | PAIN MANAGEMENT                    | 6                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTHER SPONDYLOSIS LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTHER SPONDYLOSIS LUMBOSACRAL REGION, ARTHROPATHY UNSPECIFIED              | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | OTHER SPONDYLOSIS LUMBOSACRAL REGION, CHRONIC PAIN SYNDROME                | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | POSTLAMINECTOMY SYNDROME NEC   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | SPONDYLOLYSIS LUMBAR REGION  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMBAR REGION                      | ANESTHESIOLOGY                     | 6                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT                    | 17                 | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PHYSICAL MEDICINE & REHABILITATION | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN, TRAUMATIC SPONDYLOPATHY LUMBAR REGION | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | PAIN MANAGEMENT                    | 5                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | PHYSICAL MEDICINE & REHABILITATION | 5                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | UNS INFLAMMATORY SPONDYLOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level      | UNS INFLAMMATORY SPONDYLOPATHY LUMBAR REGION  | PAIN MANAGEMENT                    | 14                 |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | CERVICALGIA   | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | CERVICALGIA   | INTERNAL MEDICINE                  | 2                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | CERVICALGIA   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | OTHER SPONDYLOSIS CERVICAL REGION, CERVICAL DISC D/O W/RADICULOPATHY UNS CERV RGN | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | ANESTHESIOLOGY                     | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | PAIN MANAGEMENT                    | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN                                  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, CERVICALGIA                     | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint (or nerves innervating that joint) with image guidance, cervical or thoracic; third and any additional level(s) | UNS INFLAMMATORY SPONDYLOPATHY CERVICAL REGION                                    | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s)                    |   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s)                    | , Spinal stenosis, lumbar region without neurogenic claud                         | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s)                    | LOW BACK PAIN   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s)                    | LOW BACK PAIN   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s)                    | LOW BACK PAIN   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description                                    | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION                   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION                 | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE              | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | OTHER SPONDYLOSIS LUMBAR REGION                               | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | RADICULOPATHY LUMBAR REGION                                   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | SPONDYLOLYSIS LUMBAR REGION                                   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN              | ANESTHESIOLOGY                     | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN              | PAIN MANAGEMENT                    | 8                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN                 | PAIN MANAGEMENT                    | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN                 | PHYSICAL MEDICINE & REHABILITATION | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), diagnostic or therapeutic agent, paravertebral facet joint with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) | UNS INFLAMMATORY SPONDYLOPATHY LUMBAR REGION                  | PAIN MANAGEMENT                    | 14                 |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances         | , Spinal stenosis, lumbar region with neurogenic claudication | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description                                       | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | , Spinal stenosis, lumbar region with neurogenic claudication    | PHYSICAL MEDICINE & REHABILITATION | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | , Spinal stenosis, lumbar region with neurogenic claudication    | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | , Spinal stenosis, lumbar region without neurogenic claudication | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | ANKYLOSING SPONDYLITIS LUMBAR REGION                             | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | CERVICAL DISC D/O W/RADICULOPATHY UNS CERV RGN                   | PHYSICAL MEDICINE & REHABILITATION | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | CERVICAL DISC D/O W/RADICULOPATHY UNS CERV RGN, CERVICALGIA      | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | CERVICALGIA  | ANESTHESIOLOGY                     | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | CERVICALGIA  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | CERVICALGIA  | PAIN MANAGEMENT                    | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | CERVICALGIA  | PHYSICAL MEDICINE & REHABILITATION | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LS RGN                   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN                 | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN                 | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN                 | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN                 | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN                 | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LOW BACK PAIN   | ANESTHESIOLOGY                     | 5                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LOW BACK PAIN   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LOW BACK PAIN   | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LOW BACK PAIN, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LUMBAGO WITH SCIATICA LEFT SIDE   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LUMBAGO WITH SCIATICA LEFT SIDE   | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LUMBAGO WITH SCIATICA LEFT SIDE   | PHYSICAL MEDICINE & REHABILITATION | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LUMBAGO WITH SCIATICA RIGHT SIDE  | ORTHOPEDIC SURGERY                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LUMBAGO WITH SCIATICA RIGHT SIDE  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE, LUMBAGO WITH SCIATICA LEFT SIDE, LUMBAGO WITH SCIATICA RIGHT SIDE | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN                  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH CERVICAL DISC DEGENERATION UNS CERV REGION  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH CERVICAL DISC DEGENERATION UNS CERV REGION  | PAIN MANAGEMENT                    | 5                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION   | PAIN MANAGEMENT                    | 7                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION, SACROILIITIS NOT ELSEWHERE CLASSIFIED   | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION, CERVICALGIA  | PAIN MANAGEMENT                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION, RADICULOPATHY LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | ANESTHESIOLOGY                     | 4                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION                                     | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION   | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH INTERVERTEBRAL DISC DISPLACEMENT THOR REGION, RADICULOPATHY THORACIC REGION  | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION, SPINAL STENOSIS CERVICAL REGION, OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | OTHER CHRONIC PAIN   | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | PAIN IN THORACIC SPINE   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description                                    | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY CERVICAL REGION                                 | ANESTHESIOLOGY                     | 28                 | 2                | 2               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY CERVICAL REGION                                 | ORTHOPEDIC SURGERY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY CERVICAL REGION                                 | PAIN MANAGEMENT                    | 11                 | 2                | 2               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY CERVICAL REGION                                 | PHYSICAL MEDICINE & REHABILITATION | 12                 |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBAR REGION                                   | ANESTHESIOLOGY                     | 15                 | 3                | 3               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBAR REGION                                   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBAR REGION                                   | PAIN MANAGEMENT                    | 27                 | 1                | 1               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBAR REGION                                   | PHYSICAL MEDICINE & REHABILITATION | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBAR REGION                                   | RADIOLOGY - DIAGNOSTIC             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBAR REGION                                   | SURGERY-NEUROLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBAR REGION, RADICULOPATHY CERVICAL REGION    | ANESTHESIOLOGY                     |                    | 2                | 2               |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBOSACRAL REGION                              | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBOSACRAL REGION                              | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY LUMBOSACRAL REGION, RADICULOPATHY LUMBAR REGION | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY THORACIC REGION                                 | ANESTHESIOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances | RADICULOPATHY THORACIC REGION                                 | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SCIATICA LEFT SIDE, LOW BACK PAIN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, SPONDYLOLISTHESIS LUMBAR REGION                   | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPINAL STENOSIS CERVICAL REGION   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPINAL STENOSIS CERVICAL REGION   | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION  | ANESTHESIOLOGY                     | 4                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION  | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPINAL STENOSIS LUMBOSACRAL REGION  | PAIN MANAGEMENT                    | 3                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPINAL STENOSIS SITE UNSPECIFIED, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPONDYLOLISTHESIS LUMBOSACRAL REGION  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, CERVICALGIA   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, SPINAL STENOSIS CERVICAL REGION, CERVICALGIA, OTHER NERVE ROOT AND PLEXUS DISORDERS | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, | LOW BACK PAIN, PAIN IN UNSPECIFIED JOINT  | ANESTHESIOLOGY                     |                    |                  | 1               | 1                                      |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description                                   | Provider Specialty         | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, | PHIMOSIS   | ANESTHESIOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Injection, anesthetic agent;stellate ganglion (cervical sympathetic)   | UNSPECIFIED ABDOMINAL PAIN                                   | PAIN MANAGEMENT            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, DARATUMUMAB 10 MG   | MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION               | Hematology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, EDARAVONE, 1 MG   | AMYOTROPHIC LATERAL SCLEROSIS                                | Neurology                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, FULVESTRANT   | MALIG NEOPLASM OF LOWER-OUTER QUADRANT OF UNSP FEMALE BREAST | Oncology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | ARTHRITIS, PSORIASIS, UNSPECIFIED                            | Rheumatology               | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE OF BOTH SMALL AND LG INT W INTESTINAL OBST   | Family Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE OF BOTH SMALL AND LG INT W INTESTINAL OBST   | Internal Medicine          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE OF BOTH SMALL AND LG INT W/O COMPLICATIONS   | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE OF LARGE INTESTINE W INTESTINAL OBSTRUCTION  | Internal Medicine          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE OF LARGE INTESTINE WITHOUT COMPLICATIONS     | Gastroenterology           | 4                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE OF SMALL INTESTINE WITHOUT COMPLICATIONS     | Gastroenterology           | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE, UNSPECIFIED, WITH OTHER COMPLICATION        | Pediatric Gastroenterology | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS          | Family Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS          | Gastroenterology           | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS          | Infectious Disease         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | OTHER ULCERATIVE COLITIS WITHOUT COMPLICATIONS               | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | RHEU ARTHRITIS W RHEU FACTOR MULT SITE W/O ORG/SYS INVOLV    | Rheumatology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | RHEUMATOID ARTHRITIS W/O RHEUMATOID FACTOR, MULTIPLE SITES   | Rheumatology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | ULCERATIVE (CHRONIC) PANCOLITIS WITHOUT COMPLICATIONS        | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | ULCERATIVE COLITIS, UNSPECIFIED WITH FISTULA                 | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, INFLECTRA   | ULCERATIVE COLITIS, UNSPECIFIED, WITHOUT COMPLICATIONS       | Neurology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, NIVOLUMAB   | MALIGNANT MELANOMA OF LEFT UPPER LIMB, INCLUDING SHOULDER    | Hematology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, NIVOLUMAB   | MALIGNANT NEOPLASM OF LEFT KIDNEY, EXCEPT RENAL PELVIS       | Hematology                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, OCRELIZUMAB, 1 MG   | MULTIPLE SCLEROSIS   | Neurology                  | 13                 | 1                |                 | 1                                      |                          |                        |                      |                 |
| INJECTION, OCRELIZUMAB, 1 MG   | MULTIPLE SCLEROSIS   | Pediatric Neurology        |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description                                   | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|------------------------------|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| INJECTION, PEGFILGRASTIM 6MG | DIFFUSE LARGE B-CELL LYMPHOMA, LYMPH NODES OF MULTIPLE SITES | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, PEGFILGRASTIM 6MG | MALIG NEOPLASM OF LOWER-INNER QUADRANT OF LEFT FEMALE BREAST | Oncology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, PEGFILGRASTIM 6MG | MALIGNANT NEOPLASM OF CENTRAL PORTION OF RIGHT FEMALE BREAST | Oncology                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, PEGFILGRASTIM 6MG | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Oncology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, PEGFILGRASTIM 6MG | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, RAMUCIRUMAB       | HEART TRANSPLANT STATUS                                      | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, RESLIZUMAB, 1MG   | OTHER ASTHMA   | Infectious Disease        | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, UDENYCA 0.5 MG    | MALIG NEOPLASM OF LOWER-OUTER QUADRANT OF LEFT FEMALE BREAST | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, UDENYCA 0.5 MG    | MALIGNANT NEOPLASM OF UPPER LOBE, RIGHT BRONCHUS OR LUNG     | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | CROHN'S DISEASE OF BOTH SMALL AND LARGE INTESTINE W FISTULA  | Gastroenterology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | CROHN'S DISEASE OF LARGE INTESTINE WITHOUT COMPLICATIONS     | Gastroenterology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | CROHN'S DISEASE OF SMALL INTESTINE WITHOUT COMPLICATIONS     | Gastroenterology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS          | Gastroenterology          | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | ULCER OF INTESTINE   | Gastroenterology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | ULCERATIVE (CHRONIC) PANCOLITIS WITHOUT COMPLICATIONS        | Gastroenterology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | ULCERATIVE (CHRONIC) PROCTITIS WITH UNSP COMPLICATIONS       | Pediatrics                |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | ULCERATIVE (CHRONIC) RECTOSIGMOIDITIS WITH RECTAL BLEEDING   | Gastroenterology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | ULCERATIVE COLITIS, UNSP WITH UNSPECIFIED COMPLICATIONS      | Gastroenterology          | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | ULCERATIVE COLITIS, UNSPECIFIED WITH OTHER COMPLICATION      | Gastroenterology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | ULCERATIVE COLITIS, UNSPECIFIED, WITHOUT COMPLICATIONS       | Gastroenterology          | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION, VEDOLIZUMAB       | ULCERATIVE COLITIS, UNSPECIFIED, WITHOUT COMPLICATIONS       | Infectious Disease        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | ANAL FISSURE, UNSPECIFIED                                    | Surgery, Colon And Rectal | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | BELL'S PALSY   | Neurology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CERVICALGIA  | Physical Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CHRONIC ANAL FISSURE   | Surgery, Colon And Rectal | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CHRONIC MIGRAINE W/O AURA, INTRACTABLE, W STATUS MIGRAINOSUS | Neurology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CHRONIC MIGRAINE W/O AURA, INTRACTABLE, W/O STAT MIGR        | Neurology                 | 14                 | 2                | 2               |  |                          |                        |                      |                 |



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| Procedure Code Description   | Diagnosis Code Description                                  | Provider Specialty                                | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|------------------------------|---|---|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| INJECTION,ONABOTULINUMTOXINA | CHRONIC MIGRAINE W/O AURA, INTRACTABLE, W/O STAT MIGR       | Psychiatry  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CHRONIC MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STAT MIGR   | Neurology   | 11                 | 3                | 3               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CHRONIC MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STAT MIGR   | Pain Management                                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CHRONIC MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STAT MIGR   | Physician Assistant                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CLONIC HEMIFACIAL SPASM, RIGHT                              | Ophthalmology                                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CRAMP AND SPASM   | Neurology   | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | CRAMP AND SPASM   | Surgery, Orthopedic                               |                    | 1                |                 |  | 1                        |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | EPILEPSY, UNSP, NOT INTRACTABLE, WITHOUT STATUS EPILEPTICUS | Pediatric Rehabilitation Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | FREQUENCY OF MICTURITION                                    | Gynecology (No OB)                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | GENETIC TORSION DYSTONIA                                    | Neurology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | IDIOPATHIC OROFACIAL DYSTONIA                               | Dentistry   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | LARYNGEAL SPASM   | Otolaryngology (Ear, Nose, And Throat)            | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | MIGRAINE W/O AURA, INTRACTABLE, WITHOUT STATUS MIGRAINOSUS  | Neurology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STATUS MIGRAINOSUS  | Neurology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | MIGRAINE WITH AURA, INTRACTABLE, WITHOUT STATUS MIGRAINOSUS | Neurology   | 2                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | MIGRAINE, UNSP, INTRACTABLE, WITHOUT STATUS MIGRAINOSUS     | Neurology   |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | MIGRAINE, UNSP, NOT INTRACTABLE, WITHOUT STATUS MIGRAINOSUS | Neurology   |                    | 2                | 2               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | NEUROMUSCULAR DYSFUNCTION OF BLADDER, UNSPECIFIED           | Urology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | OTHER DISEASES OF VOCAL CORDS                               | Otolaryngology (Ear, Nose, And Throat)            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBAR REGION       | Neurology   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | OTHER NEUROMUSCULAR DYSFUNCTION OF BLADDER                  | Female Pelvic Medicine And Reconstructive Surgery | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | OTHER SPECIFIED EXTRAPYRAMIDAL AND MOVEMENT DISORDERS       | Neurology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | OTHER SPECIFIED FORMS OF TREMOR                             | Physical Medicine                                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | PRIMARY FOCAL HYPERHIDROSIS, AXILLA                         | Dermatology                                       | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | PRIMARY FOCAL HYPERHIDROSIS, PALMS                          | Dermatology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA | QUADRIPLEGIA, UNSPECIFIED                                   | Physical Medicine                                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description                                   | Provider Specialty                | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|-----------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| INJECTION,ONABOTULINUMTOXINA   | SPASMODIC TORTICOLLIS  | Neurology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA   | SPASTIC QUADRIPLEGIC CEREBRAL PALSY                          | Pediatric Rehabilitation Medicine | 1                  |                  |                 |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA   | TORTICOLLIS  | Neurology                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| INJECTION,ONABOTULINUMTOXINA   | URGE INCONTINENCE  | Urology                           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; subarachnoid | OTHER CHRONIC PAIN   | PAIN MANAGEMENT                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| INLYTA 5 MG TABLET   |  | Other                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Inpatient Detox  | Alcohol abuse, uncomplicated                                 | Behavioral Health                 |                    |                  |                 |  |                          | 1                      |                      |                 |
| INS/REP SUBQ DEFIBRILLATOR   | ISCHEMIC CARDIOMYOPATHY                                      | Cardiovascular Disease            | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT ANT SEGMENT DRAIN INT   | AGE-RELATED NUCLEAR CATARACT, LEFT EYE                       | Ophthalmology                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| INSERT ANT SEGMENT DRAIN INT   | AGE-RELATED NUCLEAR CATARACT, RIGHT EYE                      | Ophthalmology                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| INSERT ANT SEGMENT DRAIN INT   | PRIMARY OPEN-ANGLE GLAUCOMA, LEFT EYE, MILD STAGE            | Ophthalmology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT ANT SEGMENT DRAIN INT   | PRIMARY OPEN-ANGLE GLAUCOMA, RIGHT EYE, MILD STAGE           | Ophthalmology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT PELV FIXATION DEVICE  | OTHER SECONDARY SCOLIOSIS, LUMBAR REGION                     | Surgery, Orthopedic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT PELV FIXATION DEVICE  | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED     | Surgery, Neurological             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT PELV FIXATION DEVICE  | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | ARTHRODESIS STATUS   | Surgery, Orthopedic               |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | CERVICAL DISC DISORDER W RADICULOPATHY, UNSP CERVICAL REGION | Surgery, Orthopedic               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | DISEASE OF SPINAL CORD, UNSPECIFIED                          | Family Medicine                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION | Surgery, Orthopedic               |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION        | Surgery, Orthopedic               |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | OTHER SECONDARY SCOLIOSIS, LUMBAR REGION                     | Surgery, Orthopedic               | 2                  |                  |                 |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED     | Surgery, Neurological             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | RADICULOPATHY, CERVICAL REGION                               | Surgery, Orthopedic               | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Neurological             |                    | 1                |                 |  | 1                        |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Orthopedic               |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Neurological             | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE   | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Orthopedic               | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description                                     | Provider Specialty           | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|------------------------------|--|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| INSERT SPINE FIXATION DEVICE | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION    | Surgery, Neurological        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION    | Surgery, Orthopedic          | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE | SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUDICATION | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE | SPONDYLOLISTHESIS, LUMBAR REGION                               | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSERT SPINE FIXATION DEVICE | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION   | Surgery, Neurological        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | CERVICAL DISC DISORDER W RADICULOPATHY, UNSP CERVICAL REGION   | Surgery, Orthopedic          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | DISEASE OF SPINAL CORD, UNSPECIFIED                            | Family Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION          | Surgery, Orthopedic          |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED       | Surgery, Neurological        | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | RADICULOPATHY, CERVICAL REGION                                 | Surgery, Orthopedic          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | RADICULOPATHY, LUMBAR REGION                                   | Surgery, Neurological        |                    | 1                |                 |  | 1                        |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | RADICULOPATHY, LUMBAR REGION                                   | Surgery, Orthopedic          |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | SPINAL STENOSIS, CERVICAL REGION                               | Surgery, Neurological        | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | SPINAL STENOSIS, CERVICAL REGION                               | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION    | Surgery, Neurological        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION    | Surgery, Orthopedic          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUDICATION | Surgery, Neurological        |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSJ BIOMECHANICAL DEVICE    | SPONDYLOLISTHESIS, LUMBAR REGION                               | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ BREAST IMPLT SM D MAST  | GENETIC SUSCEPTIBILITY TO MALIGNANT NEOPLASM OF BREAST         | Surgery, Plastic             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ BREAST IMPLT SM D MAST  | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST         | Surgery, Plastic             | 2                  |                  |                 |  |                          |                        |                      |                 |
| INSJ IMPLTBL GLUCOSE SENSOR  | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS                 | Endocrinology And Metabolism | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ PERQ VAD L HRT ARTL&VEN | ATHSCL HEART DISEASE OF NATIVE COR ART W UNSP ANG PCTRS        | Surgery, Cardiovascular      | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ STABLJ DEV W/O DCMPRN   | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION    | Pain Management              |                    | 4                | 2               |  | 2                        |                        |                      | 1               |
| INSJ SUBQ CAR RHYTHM MNTR    | CEREBRAL INFARCTION, UNSPECIFIED                               | Cardiovascular Disease       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ SUBQ CAR RHYTHM MNTR    | PAROXYSMAL ATRIAL FIBRILLATION                                 | Cardiovascular Disease       |                    | 1                | 1               |  |                          |                        |                      | 1               |

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|---|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| INSJ SUBQ CAR RHYTHM MNTR                           | SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUD      | Internal Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSJ SUBQ CAR RHYTHM MNTR                           | TRANSIENT CEREBRAL ISCHEMIC ATTACK, UNSPECIFIED              | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ SUBQ CAR RHYTHM MNTR                           | UNSPECIFIED ATRIAL FIBRILLATION                              | Cardiology, Interventional             |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | DISPROPORTION OF RECONSTRUCTED BREAST                        | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | ENCOUNTER FOR ADJUSTMENT OR REMOVAL OF LEFT BREAST IMPLANT   | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | ENCOUNTER FOR BREAST RECONSTRUCTION FOLLOWING MASTECTOMY     | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | MALIG NEOPLM OF UPPER-INNER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT FEMALE BREAST     | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Anesthesiology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT BRST IMPLT SEP D                        | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT DEFIB W/LEAD(S)                         | CHRONIC ISCHEMIC HEART DISEASE, UNSPECIFIED                  | Cardiology, Interventional             | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT DEFIB W/LEAD(S)                         | DILATED CARDIOMYOPATHY                                       | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT DEFIB W/LEAD(S)                         | HYPERTENSIVE HEART DISEASE WITHOUT HEART FAILURE             | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT DEFIB W/LEAD(S)                         | OTHER CARDIOMYOPATHIES                                       | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSJ/RPLCMT DEFIB W/LEAD(S)                         | UNSPECIFIED SYSTOLIC (CONGESTIVE) HEART FAILURE              | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSRT/REDO PN/GASTR STIMUL                          | GASTROPARESIS  | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSRT/REDO PN/GASTR STIMUL                          | URGENCY OF URINATION   | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| INSRT/REDO SPINE N GENERATOR                        | ALGONEURODYSTROPHY UNSPECIFIED SITE                          | PAIN MANAGEMENT                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| INSRT/REDO SPINE N GENERATOR                        | OTH INTERVERTEBRAL DISC DEGEN LUMBOSACRAL REGION             | ANESTHESIOLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSULIN ASPART 100/ML VIAL                          |  | Endocrinology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| INSULIN ASPART 100/ML VIAL                          |  | PCP/Pediatrician                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| INSULIN ASPART FLEXPEN 100/ML (3) INSULN PEN        |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTEGRATED FILTER & HOLDER                          | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTEGRATED FILTER & HOLDER                          | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Anorexia nervosa, restricting type                           | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Anxiety disorder, unspecified                                | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Intensive outpatient psychiatric services, per diem | Bipolar II disorder  | Behavioral Health          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Eating disorder, unspecified   | Behavioral Health          | 2                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Major depressive disorder, recurrent, moderate   | Behavioral Health          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Major depressive disorder, recurrent, unspecified  | Behavioral Health          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Major depressive disorder, single episode, moderate  | Behavioral Health          | 2                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Major depressv disorder, recurrent severe w/o psych features   | Behavioral Health          | 2                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Other reactions to severe stress   | Behavioral Health          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Intensive outpatient psychiatric services, per diem | Post-traumatic stress disorder, unspecified  | Behavioral Health          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTRACARDIAC ECG (ICE)                              | CEREBRAL INFARCTION, UNSPECIFIED   | Cardiology, Interventional | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTRACARDIAC ECG (ICE)                              | LONGSTANDING PERSISTENT ATRIAL FIBRILLATION  | Cardiac Electrophysiology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTRACARDIAC ECG (ICE)                              | LONGSTANDING PERSISTENT ATRIAL FIBRILLATION  | Internal Medicine          | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTRACARDIAC ECG (ICE)                              | OTHER PERSISTENT ATRIAL FIBRILLATION   | Cardiac Electrophysiology  | 2                  |                  |                 |  |                          |                        |                      |                 |
| INTRACARDIAC ECG (ICE)                              | PAROXYSMAL ATRIAL FIBRILLATION   | Cardiac Electrophysiology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTRACARDIAC ECG (ICE)                              | PAROXYSMAL ATRIAL FIBRILLATION   | Cardiovascular Disease     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTRACARDIAC ECG (ICE)                              | PAROXYSMAL ATRIAL FIBRILLATION   | Pediatric Cardiology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| INTRACRAN ANGIOPLSTY W/STENT                        | CEREBRAL ANEURYSM, NONRUPTURED   | Surgery, Neurological      |                    | 1                | 1               |  |                          |                        |                      |                 |
| INTRAROSA 6.5 MG INSERT                             |  | OB/GYN                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| INVOKANA  | Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral | Rheumatology               |                    |                  |                 |  |                          | 1                      |                      |                 |
| INVOKANA 100 MG TABLET                              |  | Other                      | 1                  | 7                | 7               |  |                          |                        |                      |                 |
| IRINOTECAN INJECTION                                | MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED   | Neurology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| IRON SUCROSE INJECTION                              | END STAGE RENAL DISEASE  | Nephrology                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| ISOTRETINOIN 30 MG CAPSULE                          |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| IVERMECTIN 1 % CREAM (G)                            |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| IVERMECTIN 3 MG TABLET                              |  | PCP/Pediatrician           | 2                  |                  |                 |  |                          |                        |                      |                 |
| JAKAFI 10 MG TABLET                                 |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| JAKAFI 5 MG TABLET                                  |  | Hematology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| JAKAFI 5 MG TABLET                                  |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| JANUMET 50-1000 MG TABLET                           |  | Other                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| JANUMET 50MG-500MG TABLET                           |  | Other                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| JANUMET XR 50-1000 MG TBMP 24HR                     |  | Other                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| JANUVIA 100 MG TABLET                               |  | Endocrinology              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| JANUVIA 100 MG TABLET                               |  | Family Medicine            |                    | 1                | 1               |  |                          |                        |                      |                 |
| JANUVIA 100 MG TABLET                               |  | Other                      | 10                 | 1                | 1               |  |                          |                        |                      |                 |
| JANUVIA 100 MG TABLET                               |  | PCP/Pediatrician           | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| JANUVIA 25 MG TABLET                                |  | Other                      | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| JANUVIA 25 MG TABLET                                |  | PCP/Pediatrician           |                    | 1                | 1               |  |                          |                        |                      |                 |
| JANUVIA 50 MG TABLET                                |  | Other                      | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| JANUVIA 50 MG TABLET                                |  | PCP/Pediatrician           |                    | 1                | 1               |  |                          |                        |                      |                 |

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|-------------------------------------|---|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| JARDIANCE 10 MG TABLET              |   | Endocrinology             | 2                  |                  |                 |  |                          |                        |                      |                 |
| JARDIANCE 10 MG TABLET              |   | Other                     | 7                  | 1                | 1               |  |                          |                        |                      |                 |
| JARDIANCE 10 MG TABLET              |   | PCP/Pediatrician          | 4                  | 3                | 3               |  |                          |                        |                      |                 |
| JARDIANCE 25 MG TABLET              |   | Endocrinology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| JARDIANCE 25 MG TABLET              |   | Other                     | 13                 | 4                | 4               |  |                          |                        |                      |                 |
| JARDIANCE 25 MG TABLET              |   | PCP/Pediatrician          | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| JATENZO 237 MG CAPSULE              |   | Other                     |                    | 3                | 3               |  |                          |                        |                      |                 |
| JENTADUETO XR 2.5-1000MG TAB BP 24H |   | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| JORNAY PM 100 MG CPDR ER SP         |   | Other                     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| JORNAY PM 40 MG CPDR ER SP          |   | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| JUBLIA 10 % SOL W/APPL              |   | Other                     | 4                  |                  |                 |  |                          |                        |                      |                 |
| JYNARQUE 45 MG-15MG TABLET SEQ      |   | Other                     | 4                  |                  |                 |  |                          |                        |                      |                 |
| JYNARQUE 60 MG-30MG TABLET SEQ      |   | Other                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| JYNARQUE 90 MG-30MG TABLET SEQ      |   | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| KEPPRA 500 MG TABLET                |   | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| KEPPRA XR 750 MG TAB ER 24H         |   | Neurology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| KESIMPTA                            | Relapsing-remitting multiple sclerosis                      | Surgery, General          |                    |                  |                 |  |                          | 1                      |                      |                 |
| KESIMPTA PEN 20MG/0.4ML PEN INJCTR  |   | Neurology                 | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| KESIMPTA PEN 20MG/0.4ML PEN INJCTR  |   | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| KEVZARA 200MG/1.14 PEN INJCTR       |   | Rheumatology              | 2                  |                  |                 |  |                          |                        |                      |                 |
| KINERET                             | Chronic gout, unspecified, with tophus (tophi)              | Other                     |                    |                  |                 |  |                          |                        |                      | 1               |
| Kineret                             | Chronic gout, unspecified, with tophus (tophi)              | Rheumatology              |                    |                  |                 |  |                          |                        |                      | 1               |
| KINERET                             | Gout, unspecified   | Rheumatology              |                    |                  |                 |  |                          |                        |                      | 1               |
| KINERET                             | Schnitzler syndrome   | Hematology                |                    |                  |                 |  |                          | 1                      |                      |                 |
| KINERET 100MG/0.67 SYRINGE          |   | Other                     |                    | 2                | 2               |  |                          |                        |                      |                 |
| KNEE-SHIN SYS HYDRAUL STANCE        | ACQUIRED ABSENCE OF RIGHT LEG ABOVE KNEE                    | Physical Medicine         |                    | 1                | 1               |  |                          |                        |                      |                 |
| KNEE-SHIN SYS HYDRAUL STANCE        | ACQUIRED ABSENCE OF RIGHT LEG ABOVE KNEE                    | Surgery, Orthopedic       |                    | 1                | 1               |  |                          |                        |                      |                 |
| KNEE-SHIN SYS STANCE FLEXION        | ACQUIRED ABSENCE OF LEFT LEG ABOVE KNEE                     | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| KNEE-SHIN SYS STANCE FLEXION        | ACQUIRED ABSENCE OF RIGHT LEG ABOVE KNEE                    | Physical Medicine         |                    | 1                | 1               |  |                          |                        |                      |                 |
| KNEE-SHIN SYS STANCE FLEXION        | ACQUIRED ABSENCE OF RIGHT LEG ABOVE KNEE                    | Surgery, Orthopedic       |                    | 1                | 1               |  |                          |                        |                      |                 |
| KO W ADJ FLEX/EXT ROTAT MOLD        | SPRAIN OF ANTERIOR CRUCIATE LIGAMENT OF LEFT KNEE, INIT     | Surgery, Orthopedic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| KO W ADJ FLEX/EXT ROTAT MOLD        | SPRAIN OF ANTERIOR CRUCIATE LIGAMENT OF LEFT KNEE, SUBS     | Sports Medicine           |                    | 1                | 1               |  |                          |                        |                      |                 |
| KOMBIGLYZE XR 2.5-1000MG TBMP 24HR  |   | Other                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| KRAS GENE VARIANTS EXON 2           | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG    | Hematology                |                    | 1                |                 |  | 1                        |                        |                      |                 |
| L COLECTOMY/COLOPROCTOSTOMY         | DVTRCLI OF INTEST, PART UNSP, W/O PERF OR ABSCESS W/O BLEED | Surgery, Colon And Rectal | 1                  |                  |                 |  |                          |                        |                      |                 |
| L COLECTOMY/COLOPROCTOSTOMY         | DVTRCLI OF LG INT W/O PERFORATION OR ABSCESS W/O BLEEDING   | Surgery, General          | 2                  |                  |                 |  |                          |                        |                      |                 |
| L COLECTOMY/COLOPROCTOSTOMY         | MALIGNANT NEOPLASM OF RECTUM                                | Surgery, General          | 2                  |                  |                 |  |                          |                        |                      |                 |
| L HRT ARTERY/VENTRICLE ANGIO        | HEART TRANSPLANT STATUS                                     | Cardiovascular Disease    | 1                  |                  |                 |  |                          |                        |                      |                 |
| L VENTRIC PACING LEAD ADD-ON        | DILATED CARDIOMYOPATHY                                      | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---------------------------------------|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| LAM FACETEC & FORAMOT CRV             | CERVICALGIA  | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT CRV             | RADICULOPATHY, CERVICAL REGION                               | Surgery, Neurological | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT CRV             | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT LUMBAR          | LOW BACK PAIN  | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT LUMBAR          | OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBAR REGION        | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT LUMBAR          | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Neurological | 2                  | 1                |                 | 1                                      |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT LUMBAR          | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Orthopedic   | 2                  |                  |                 |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT LUMBAR          | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT LUMBAR          | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Orthopedic   | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT LUMBAR          | SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUD      | Surgery, Neurological | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT EA ADDL         | LOW BACK PAIN  | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT EA ADDL         | RADICULOPATHY, CERVICAL REGION                               | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT EA ADDL         | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT EA ADDL         | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Orthopedic   | 2                  |                  |                 |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT EA ADDL         | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological |                    | 2                | 2               |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT EA ADDL         | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Orthopedic   | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| LAM FACETEC & FORAMOT EA ADDL         | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| LAMICTAL XR 200 MG TAB ER 24          |  | Other                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAMINOTOMY SINGLE LUMBAR              | FOOT DROP, LEFT FOOT   | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| LANSOPRAZOLE 30 MG CAPSULE DR         |  | Other                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| LANSOPRAZOLE 30 MG TAB RAP DR         |  | Other                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| LANTUS 100/ML VIAL                    |  | Other                 |                    | 4                | 4               |  |                          |                        |                      |                 |
| LANTUS 100/ML VIAL                    |  | PCP/Pediatrician      |                    | 1                | 1               |  |                          |                        |                      |                 |
| LANTUS SOLOSTAR 100/ML (3) INSULN PEN |  | Other                 | 1                  | 6                | 6               |  |                          |                        |                      |                 |
| LAP CLOSE ENTEROSTOMY                 | COLOSTOMY STATUS   | Surgery, General      | 2                  |                  |                 |  |                          |                        |                      |                 |
| LAP COLECTOMY PART W/ILEUM            | BENIGN NEOPLASM OF CECUM                                     | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP COLECTOMY PART W/ILEUM            | BENIGN NEOPLASM OF COLON, UNSPECIFIED                        | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP COLECTOMY PART W/ILEUM            | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                     | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP COLECTOMY PART W/ILEUM            | MALIGNANT NEOPLASM OF RECTOSIGMOID JUNCTION                  | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |

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| LAP COLOSTOMY                | DVTRCLI OF LG INT W/O PERFORATION OR ABSCESS W/O BLEEDING   | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP GASTRIC BYPASS/ROUX-EN-Y | BODY MASS INDEX [BMI] 50.0-59.9, ADULT                      | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP GASTRIC BYPASS/ROUX-EN-Y | GASTRO-ESOPHAGEAL REFLUX DISEASE WITHOUT ESOPHAGITIS        | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP GASTRIC BYPASS/ROUX-EN-Y | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES              | Surgery, General          | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| LAP MOBIL SPLENIC FL ADD-ON  | DVTRCLI OF INTEST, PART UNSP, W/O PERF OR ABSCESS W/O BLEED | Surgery, Colon And Rectal | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP PLACE GASTR ADJ DEVICE   | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES              | Surgery, General          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| LAP REMOVAL OF RECTUM        | MALIGNANT NEOPLASM OF RECTUM                                | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP RMVL GASTR ADJ ALL PARTS | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES              | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAP SLEEVE GASTRECTOMY       | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES              | Surgery, General          | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| LAPARO PARTIAL COLECTOMY     | DVTRCLI OF LG INT W/O PERFORATION OR ABSCESS W/O BLEEDING   | Surgery, Colon And Rectal | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO PARTIAL COLECTOMY     | DVTRCLI OF LG INT W/O PERFORATION OR ABSCESS W/O BLEEDING   | Surgery, General          | 2                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO PARTIAL COLECTOMY     | MALIGNANT NEOPLASM OF ASCENDING COLON                       | Surgery, Colon And Rectal | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO PARTIAL COLECTOMY     | POLYP OF COLON  | Gastroenterology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO PARTIAL NEPHRECTOMY   | MALIGNANT NEOPLASM OF LEFT KIDNEY, EXCEPT RENAL PELVIS      | Urology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO PARTIAL NEPHRECTOMY   | NEOPLASM OF UNSPECIFIED BEHAVIOR OF UNSPECIFIED KIDNEY      | Urology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO PARTIAL NEPHRECTOMY   | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER              | Urology                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO PROC ABDM/PER/OMENT   | BENIGN NEOPLM OF PRPH NERVES AND AUTONM NRV SYS OF PELVIS   | Surgery, General          |                    | 1                | 1               |  |                          |                        |                      |                 |
| LAPARO PROC ABDM/PER/OMENT   | UNDESCENDED TESTICLE, UNSPECIFIED                           | Pediatric Urology         |                    | 1                | 1               |  |                          |                        |                      |                 |
| LAPARO PROC HERNIA REPAIR    | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE              | Surgical Critical Care    | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO RADICAL NEPHRECTOMY   | NEOPLASM OF UNSPECIFIED BEHAVIOR OF UNSPECIFIED KIDNEY      | Urology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPARO RADICAL PROSTATECTOMY | MALIGNANT NEOPLASM OF PROSTATE                              | Urology                   | 9                  |                  |                 |  |                          |                        |                      |                 |
| LAPAROSCOPE PROC BLA         | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF BLADDER          | Urology                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| LAPAROSCOPE PROC STOM        | ADULT HYPERTROPHIC PYLORIC STENOSIS                         | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPAROSCOPE PROC STOM        | GASTRO-ESOPHAGEAL REFLUX DISEASE WITHOUT ESOPHAGITIS        | Gastroenterology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPAROSCOPE PROC STOM        | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES              | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPAROSCOPE PROCEDURE LIVER  | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES              | Surgery, General          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| LAPAROSCOPIC CHOLECYSTECTOMY | CALCULUS OF GALLBLADDER W CHRONIC CHOLECYST W/O OBSTRUCTION | Surgery, General          |                    | 1                | 1               |  |                          |                        |                      |                 |



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|---|---|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Laparoscopic Procedures on the Esophagus                          | Gastro-esophageal reflux disease without esophagitis  | Surgery, General                |                    |                  |                 |  |                          |                        | 1                    |                 |
| LAPAROSCOPY GASTROSTOMY   | FEEDING DIFFICULTIES  | Pediatric Surgery               | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPAROSCOPY GASTROSTOMY   | MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED   | Surgery, General                | 1                  |                  |                 |  |                          |                        |                      |                 |
| LAPAROSCOPY LYMPHADENECTOMY                                       | MALIGNANT NEOPLASM OF PROSTATE  | Urology                         | 3                  |                  |                 |  |                          |                        |                      |                 |
| LAPAROSCOPY REMOVE ADNEXA   | ENCOUNTER FOR STERILIZATION   | Obstetrics/Gynecology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| LAPS ESOPHGL SPHNCTR AGMNTJ                                       | GASTRO-ESOPHAGEAL REFLUX DISEASE WITHOUT ESOPHAGITIS  | Surgery, General                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Laser Ablation Procedures   | Viral wart, unspecified   | Gastroenterology                |                    |                  |                 |  |                          |                        | 1                    |                 |
| LASER TX SKIN < 250 SQ CM   | LICHEN PLANUS, UNSPECIFIED  | Dermatology                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| LASER TX SKIN < 250 SQ CM   | PSORIASIS VULGARIS  | Dermatology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| LASER TX SKIN < 250 SQ CM   | VITILIGO  | Dermatology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| LASER TX SKIN >500 SQ CM  | LICHEN PLANUS, UNSPECIFIED  | Dermatology                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| LASER TX SKIN >500 SQ CM  | PSORIASIS VULGARIS  | Dermatology                     | 4                  |                  |                 |  |                          |                        |                      |                 |
| LASER TX SKIN >500 SQ CM  | VITILIGO  | Dermatology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| LASER TX SKIN 250-500 SQ CM                                       | LICHEN PLANUS, UNSPECIFIED  | Dermatology                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| LASER TX SKIN 250-500 SQ CM                                       | VITILIGO  | Dermatology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Lateral retinacular release, open                                 | OTHER INSTABILITY LEFT KNEE   | SURGERY- ORTHOPEDIC             | 1                  |                  |                 |  |                          |                        |                      |                 |
| LATUDA 20 MG TABLET   |   | Other                           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| LATUDA 40 MG TABLET   |   | Other                           | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| LATUDA 60 MG TABLET   |   | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEFORT I-1 PIECE W/ GRAFT   | MAXILLARY HYPOPLASIA  | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEFORT I-1 PIECE W/O GRAFT  | CONGEN MALFORM SYNDROMES PREDOM AFFECTING FACIAL APPEARANCE   | Surgery, Plastic                |                    | 1                | 1               |  |                          |                        |                      |                 |
| LEFORT I-2 PIECE W/O GRAFT  | MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE, UNSP  | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEFORT I-2 PIECE W/O GRAFT  | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)   | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEFORT I-3/> PIECE W/O GRAFT                                      | MALOCCLUSION, UNSPECIFIED   | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| Left heart catheterization without right heart cath or coronaries | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, ENCOUNTER FOR PREPROCEDURAL LABORATORY EXAM, NONRHEUMATIC AORTIC VALVE DISORDER UNSPECIFIED | INTERNAL MEDICINE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Left heart catheterization without right heart cath or coronaries | ENCOUNTER FOR PREPROCEDURAL LABORATORY EXAM   | CARDIOVASCULAR DISEASE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEG/ANKLE SURGERY PROCEDURE                                       | UNSP FRACTURE OF L LOW LEG, SUBS FOR CLOS FX W ROUTHN HEAL  | Surgery, Orthopedic             |                    | 1                | 1               |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE /3.75 MG                                       | OTHER GENERAL SYMPTOMS AND SIGNS  | Surgery, General                | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE 1 MG/0.2ML KIT                                 |   | Endocrinology                   | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE 1 MG/0.2ML KIT                                 |   | Obstetrics/Gynecology           | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE 1 MG/0.2ML KIT                                 |   | Other                           | 25                 | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| LEUPROLIDE ACETATE 1 MG/0.2ML KIT  |   | Reproductive Endocrinology/Infertility | 5                  |                  |                 |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE INJECITON   | FEMALE INFERTILITY, UNSPECIFIED   | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE INJECITON   | FEMALE INFERTILITY, UNSPECIFIED   | Reproductive Endocrinology/Infertility | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE SUSPNSION   | OTHER GENERAL SYMPTOMS AND SIGNS  | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE SUSPNSION   | OTHER GENERAL SYMPTOMS AND SIGNS  | Hospital                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| LEUPROLIDE ACETATE SUSPNSION   | OTHER GENERAL SYMPTOMS AND SIGNS  | Urology                                | 6                  |                  |                 |  |                          |                        |                      |                 |
| Level 3.5: Clinically Managed High-Intensity Residential Services (Adult Criteria) | Alcohol dependence, uncomplicated   | Behavioral Health                      |                    |                  |                 |  |                          | 2                      | 2                    |                 |
| LEVEMIR FLEXTOUCH 100/ML (3) INSULN PEN  |   | Other                                  | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| LEVEMIR FLEXTOUCH 100/ML (3) INSULN PEN  |   | PCP/Pediatrician                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| LEVOTHYROXINE 112 MCG CAPSULE  |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEVOTHYROXINE 125 MCG CAPSULE  |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| LEVOTHYROXINE 25 MCG CAPSULE   |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEXAPRO 10 MG TABLET   |   | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| LEXETTE 0.05 % FOAM  |   | Dermatology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| LEXETTE 0.05 % FOAM  |   | Other                                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Ligamentous reconstruction (augmentation), knee; extra-articular                   | EFFUSION LEFT KNEE, LATERAL DISLOCATION LT PATELLA INITIAL ENCOUNTER  | ORTHOPEDIC SURGERY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Ligamentous reconstruction (augmentation), knee; extra-articular                   | OTHER INSTABILITY LEFT KNEE   | SURGERY-ORTHOPEDIC                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Ligamentous reconstruction (augmentation), knee; extra-articular                   | PAIN IN LEFT KNEE, OTHER INSTABILITY LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC | SURGERY-ORTHOPEDIC                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Ligamentous reconstruction (augmentation), knee; extra-articular                   | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL | SURGERY-ORTHOPEDIC                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Ligamentous reconstruction (augmentation), knee; extra-articular                   | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC, SPRAIN LAT COLLATERAL LIGAMENT RT KNEE INITIAL | SURGERY-ORTHOPEDIC                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| LINEZOLID 100 MG/5ML SUSP RECON  |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| LINEZOLID 600 MG TABLET  |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| LINEZOLID 600 MG TABLET  |   | Pediatric Pulmonology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| LINZESS 145 MCG CAPSULE  |   | Gastroenterology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| LINZESS 145 MCG CAPSULE  |   | Other                                  | 6                  | 3                | 3               |  |                          |                        |                      |                 |
| LINZESS 145 MCG CAPSULE  |   | PCP/Pediatrician                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| LINZESS 290 MCG CAPSULE  |   | Gastroenterology                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| LINZESS 290 MCG CAPSULE  |   | Other                                  | 4                  | 4                | 4               |  |                          |                        |                      |                 |
| LINZESS 72 MCG CAPSULE   |   | Other                                  | 4                  | 5                | 5               |  |                          |                        |                      |                 |
| LINZESS 72 MCG CAPSULE   |   | PCP/Pediatrician                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| LIVALO   | Other   | Family Medicine                        |                    |                  |                 |  |                          | 1                      |                      |                 |

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| LIVALO 2 MG TABLET               |  | Other                           | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| LIVALO 2 MG TABLET               |  | PCP/Pediatrician                |                    | 1                | 1               |  |                          |                        |                      |                 |
| LIVALO 4 MG TABLET               |  | Cardiology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| LIVALO 4 MG TABLET               |  | Other                           | 3                  |                  |                 |  |                          |                        |                      |                 |
| LOREEV XR 3 MG CAP ER 24H        |  | Other                           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| LOVENOX 40MG/0.4ML SYRINGE       |  | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOW BACK DISK SURGERY            | FOOT DROP, LEFT FOOT   | Surgery, Orthopedic             | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOW BACK DISK SURGERY            | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION   | Surgery, Neurological           | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOW BACK DISK SURGERY            | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION   | Surgery, Orthopedic             | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOW BACK DISK SURGERY            | LOW BACK PAIN  | Surgery, Neurological           | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOW BACK DISK SURGERY            | MONOPLÉGIA OF LOWER LIMB AFFECTING UNSPECIFIED SIDE            | Surgery, Orthopedic             | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOW BACK DISK SURGERY            | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION          | Neurology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOW BACK DISK SURGERY            | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION          | Surgery, Orthopedic             | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| LOW BACK DISK SURGERY            | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION    | Surgery, Neurological           | 2                  |                  |                 |  |                          |                        |                      |                 |
| LOWER JAW BONE GRAFT             | UNSPECIFIED CYST OF JAW  | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOWER LIMB PROS VACUUM PUMP      | COMPLETE TRAUM AMP AT LEV BETW KN AND ANKL, R LOW LEG, SUBS    | Orthotics                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOWR EXTREMITY PROSTHES NOS      | ACQUIRED ABSENCE OF LEFT LEG ABOVE KNEE                        | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| LOWR EXTREMITY PROSTHES NOS      | ACQUIRED ABSENCE OF RIGHT LEG BELOW KNEE                       | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| LUBIPROSTONE 24MCG CAPSULE       |  | Other                           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| LUBIPROSTONE 8 MCG CAPSULE       |  | Other                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| LUMAKRAS 120 MG TABLET           |  | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| LUMBAR SPINE FUSION              | Spinal stenosis, lumbar region without neurogenic claudication | Neurosurgery                    |                    |                  |                 |  |                          |                        |                      | 1               |
| LUMIGAN 0.01 % DROPS             |  | Ophthalmology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| LUMIGAN 0.01 % DROPS             |  | Other                           | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| LUMIZYME INJECTION               | POMPE DISEASE  | Neurology                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| LUNG TRANSPLANT DOUBLE           | BRONCHIECTASIS WITH (ACUTE) EXACERBATION                       | Pulmonary Disease               | 2                  |                  |                 |  |                          |                        |                      |                 |
| LUNG TRANSPLANT DOUBLE           | CHRONIC OBSTRUCTIVE PULMONARY DISEASE, UNSPECIFIED             | Pulmonary Disease               | 1                  |                  |                 |  |                          |                        |                      |                 |
| LUNG TRANSPLANT WITH BYPASS      | HYPOXEMIA  | Pulmonary Disease               | 1                  |                  |                 |  |                          |                        |                      |                 |
| LUPRON DEPOT                     | endometriosis  | Obstetrics/Gynecology           |                    |                  |                 |  |                          | 1                      |                      |                 |
| LUPRON DEPOT 11.25 MG SYRINGEKIT |  | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| LUPRON DEPOT 3.75 MG SYRINGEKIT  |  | Obstetrics/Gynecology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| LYNPARZA                         | BREAST CANCER  | Hematology                      |                    |                  |                 |  |                          |                        |                      | 1               |
| LYNPARZA 150 MG TABLET           |  | Oncology/Radiation              |                    | 1                | 1               |  |                          |                        |                      |                 |
| LYNPARZA 150 MG TABLET           |  | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |

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| LYRICA 100 MG CAPSULE   |   | Other                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance (eg, vibration) elastography   | FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance (eg, vibration) elastography   | HEREDITARY HEMOCHROMATOSIS, Unknown   | HEPATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance (eg, vibration) elastography   | LIVER TRANSPLANT STATUS   | HEPATOLOGY              |                    | 2                | 2               |  |                          |                        |                      |                 |
| Magnetic resonance imaging without contrast followed by with contrast, breast; bilateral  | MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST, PRESENCE OF OTHER SPECIFIED DEVICES             | SURGERY- PLASTIC        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | , Unspecified lump in the left breast, unspecified quadrant                                       | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | , Unspecified lump in the right breast, unspecified quadrant                                      | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST | SURGEON - BREAST        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | DIFFUSE CYSTIC MASTOPATHY OF UNSPECIFIED BREAST, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | DISORDER OF BREAST UNSPECIFIED  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | ENCOUNTER F/U EXAM AFTER CMPL TX MALIG NEOPLASM   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST   | NURSE PRACTITIONER      | 3                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST   | OBSTETRICS & GYNECOLOGY | 3                  | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                                     | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                                     | ONCOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | FAMILY PRACTICE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | OBSTETRICS & GYNECOLOGY | 5                  | 3                | 3               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                                       | Surgery, Plastic        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | GENETIC CARRIER OF OTHER DISEASE, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST  | Gynecology (No OB)      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST  | OBSTETRICS & GYNECOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST  | Surgery, Orthopedic     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST  | SURGERY-GENERAL         |                    | 2                | 2               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | GENETIC SUSCEPTIBILITY OTHER MALIGNANT NEOPLASM, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST | PLASTIC SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INCONCLUSIVE MAMMOGRAM  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INCONCLUSIVE MAMMOGRAM  | OB/GYN                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INCONCLUSIVE MAMMOGRAM, BREAST IMPLANT STATUS   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INCONCLUSIVE MAMMOGRAM, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                            | OBSTETRICS & GYNECOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INCONCLUSIVE MAMMOGRAM, OTHER SPECIFIED PERSONAL RISK FACTORS NEC  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INCONCLUSIVE MAMMOGRAM, PERSONAL HISTORY OF IRRADIATION, PERSONAL HISTORY OF HODGKIN LYMPHOMA, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INTRADUCTAL CARCINOMA IN SITU OF LEFT BREAST   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INTRADUCTAL CARCINOMA IN SITU OF RIGHT BREAST  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | INTRADUCTAL CARCINOMA SITU OF UNSPECIFIED BREAST   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | LEAKAGE BREAST PROSTHESIS & IMPLANT INITIAL ENC  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | LEAKAGE BREAST PROSTHESIS & IMPLANT INITIAL ENC  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | LEAKAGE BREAST PROSTHESIS & IMPLANT SUBSQT ENC   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | LOBULAR CARCINOMA IN SITU OF LEFT BREAST   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED, PERSONAL HISTORY OTHER MALIGNANT NEOPLASM KIDNEY, PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN | ONCOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIG NEOPLASM CENTRAL PORTION LT FEMALE BREAST  | SURGEON - BREAST   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIG NEOPLASM CENTRAL PORTION LT FEMALE BREAST  | SURGERY-GENERAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS  | SURGERY-GENERAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST   | ONCOLOGY           | 3                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST   | SURGERY- PLASTIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST, PRESENCE OF OTHER SPECIFIED DEVICES  | SURGERY- PLASTIC   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST   | SURGERY-GENERAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS  | SURGERY-GENERAL    | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST                                    | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST                                    | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST                                      | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST                                      | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST                                      | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST                                     | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST                                     | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST     | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST     | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | PLASTIC SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | SURGERY-GENERAL         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MASTODYNIA  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | MASTODYNIA, OTHER SPECIFIED PERSONAL RISK FACTORS NEC, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | NIPPLE DISCHARGE  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST                                  | FAMILY PRACTICE         | 3                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST                                  | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST                                  | OBSTETRICS & GYNECOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST                                  | RADIOLOGY - DIAGNOSTIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST                                  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTHER GENERAL SYMPTOMS AND SIGNS, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTHER SPECIFIED PERSONAL RISK FACTORS NEC   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTHER SPECIFIED PERSONAL RISK FACTORS NEC   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTHER SPECIFIED PERSONAL RISK FACTORS NEC, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | OTHER SPECIFIED PERSONAL RISK FACTORS NEC, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | Other specified postprocedural states  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST   | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST   | SURGEON - BREAST        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST   | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | SOLITARY CYST OF LEFT BREAST   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | UNSPECIFIED BENIGN MAMMARY DYSPLASIA LEFT BREAST   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty          | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | UNSPECIFIED BENIGN MAMMARY DYSPLASIA RT BREAST  | Neurology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral | UNSPECIFIED BENIGN MAMMARY DYSPLASIA RT BREAST  | SURGERY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without contrast material; bilateral  | LEAKAGE BREAST PROSTHESIS & IMPLANT INITIAL ENC   | FAMILY PRACTICE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without contrast material; bilateral  | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST                     | HEMATOLOGY AND ONCOLOGY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without contrast material; bilateral  | MASTODYNIA  | FAMILY PRACTICE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without contrast material; bilateral  | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST  | FAMILY PRACTICE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without contrast material; bilateral  | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST  | PLASTIC SURGERY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| Magnetic resonance imaging, breast, without contrast material; bilateral  | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST, BREAST IMPLANT STATUS, ENCOUNTER BREAST RECONSTRUCTION FLW MASTECTOMY | SURGERY- PLASTIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MAKENA 275 MG/1.1 AUTO INJCT  |   | Other                       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MAKENA, 10 MG   | PERSONAL HISTORY OF PRE-TERM LABOR  | Obstetrics/Gynecology       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MAKENA, 10 MG   | SUPRVSN OF PREG W HISTORY OF PRE-TERM LABOR, SECOND TRI   | Maternal And Fetal Medicine |                    | 1                | 1               |  |                          |                        |                      |                 |
| MAKENA, 10 MG   | SUPRVSN OF PREG W HISTORY OF PRE-TERM LABOR, UNSP TRIMESTER   | Obstetrics/Gynecology       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MAN W/C PUSH-RIM POWR SYSTEM  | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED  | Physical Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)  | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | SURGERY- ORTHOPEDIC         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)   | ADHESIVE CAPSULITIS OF LEFT SHOULDER  | SURGERY- ORTHOPEDIC         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)   | ADHESIVE CAPSULITIS OF LEFT SHOULDER, UNS DISORDER SYNOVIUM & TENDON LT UPPER ARM                                     | SURGERY- ORTHOPEDIC         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)   | ADHESIVE CAPSULITIS OF RIGHT SHOULDER   | SURGERY- ORTHOPEDIC         |                    | 1                | 1               |  |                          |                        |                      |                 |
| Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)   | ADHESIVE CAPSULITIS OF RIGHT SHOULDER, ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE                               | SURGERY- ORTHOPEDIC         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MANUAL THERAPY 1/> REGIONS  | PAIN IN RIGHT HIP   | Family Medicine             |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MANUAL THERAPY 1/> REGIONS   | PRESENCE OF LEFT ARTIFICIAL KNEE JOINT                       | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MAST SIMPLE COMPLETE   | GENDER IDENTITY DISORDER, UNSPECIFIED                        | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MAST SIMPLE COMPLETE   | INTRADUCTAL CARCINOMA IN SITU OF RIGHT BREAST                | Surgery, General                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MAST SIMPLE COMPLETE   | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, General                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| MAYZENT 2 MG TABLET  |  | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MEMANTINE HCL ER 28 MG CAP SPR 24                                    |  | Neurology                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MENOPUR 75 UNIT VIAL   |  | Endocrinology                          | 7                  |                  |                 |  |                          |                        |                      |                 |
| MENOPUR 75 UNIT VIAL   |  | Obstetrics/Gynecology                  | 8                  |                  |                 |  |                          |                        |                      |                 |
| MENOPUR 75 UNIT VIAL   |  | Other                                  | 31                 | 1                | 1               |  |                          |                        |                      |                 |
| MENOPUR 75 UNIT VIAL   |  | Reproductive Endocrinology/Infertility | 10                 |                  |                 |  |                          |                        |                      |                 |
| Mental Health Inpatient  | Disruptive mood dysregulation disorder                       | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Mental Health Inpatient  | Major depressive disorder, single episode, unspecified       | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Mental Health Inpatient  | Major depressv disord, single epsd, sev w/o psych features   | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Mental Health Inpatient  | Major depressv disorder, recurrent severe w/o psych features | Behavioral Health                      | 4                  |                  |                 |  |                          |                        |                      |                 |
| Mental Health Inpatient  | Unspecified mood [affective] disorder                        | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Mental health partial hospitalization, treatment, less than 24 hours | Anorexia nervosa, restricting type                           | Behavioral Health                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| Mental health partial hospitalization, treatment, less than 24 hours | Major depressive disorder, single episode, unspecified       | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Mental health partial hospitalization, treatment, less than 24 hours | Major depressv disorder, recurrent severe w/o psych features | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Mental health partial hospitalization, treatment, less than 24 hours | Other reactions to severe stress                             | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Mental Health Residential  | Generalized anxiety disorder                                 | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MESALAMINE 1.2 G TABLET DR   |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MESALAMINE 1000 MG SUPP.RECT   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MESALAMINE DR 400 MG CAP(DRTAB)                                      |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| METFORMIN ER OSMOTIC 1000 MG TAB ER 24                               |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| METFORMIN ER OSMOTIC 1000 MG TAB ER 24                               |  | Physiatry/Rehabilitative               |                    | 1                | 1               |  |                          |                        |                      |                 |
| METHADONE  | chronic pain   | Family Medicine                        |                    |                  |                 |  |                          |                        | 1                    |                 |
| METHADONE HCL 10 MG TABLET   |  | Family Medicine                        |                    | 3                | 3               |  |                          |                        |                      |                 |
| METHYLPHENIDATE ER 15 MG CSBP 40-60                                  |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| METHYLPHENIDATE ER 18 MG TAB ER 24                                   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| METHYLPHENIDATE ER 36 MG TAB ER 24                                   |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| METHYLPHENIDATE ER 54 MG TAB ER 24                                   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| METHYLPHENIDATE HCL 10 MG TABLET                                     |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| METHYLPHENIDATE HCL 20 MG TABLET                                     |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| METHYLPHENIDATE HCL 5 MG TABLET                                      |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| METHYLPHENIDATE HCL CD 10 MG CPBP 30-70                              |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| METHYLPHENIDATE LA 20 MG CPBP 50-50  |  | Other                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| MICARDIS 80 MG TABLET                |  | Other                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MICARDIS HCT 80 MG-25MG TABLET       |  | Other                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MICARDIS HCT 80 MG-25MG TABLET       |  | PCP/Pediatrician      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MICRODISSECTION MANUAL               | MALIG NEOPLASM OF UPPER-OUTER QUADRANT OF LEFT FEMALE BREAST | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MICROSLIDE CONSULTATION              | MALIGNANT NEOPLASM OF PANCREATIC DUCT                        | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MICROSURGERY ADD-ON                  | ARTHRODESIS STATUS   | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MINOCYCLINE ER 90 MG CAP ER 24H      |  | Dermatology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MINOCYCLINE HCL ER 105 MG TAB ER 24H |  | Other                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MIRCERA 100MCG/0.3 SYRINGE           |  | Nephrology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MITOXANTRONE HYDROCHL / 5 MG         | MYELOID SARCOMA, NOT HAVING ACHIEVED REMISSION               | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MLH1 GENE DUP/DELETE VARIANT         | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE DUP/DELETE VARIANT         | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MLH1 GENE DUP/DELETE VARIANT         | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                     | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MLH1 GENE DUP/DELETE VARIANT         | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE DUP/DELETE VARIANT         | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | BURKITT LYMPHOMA, LYMPH NODES OF AXILLA AND UPPER LIMB       | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | GASTROINTESTINAL STROMAL TUMOR, UNSPECIFIED SITE             | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | INTRAHEPATIC BILE DUCT CARCINOMA                             | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | MALIGNANT MELANOMA OF LEFT LOWER LIMB, INCLUDING HIP         | Internal Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | MALIGNANT MELANOMA OF SKIN, UNSPECIFIED                      | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                     | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Internal Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX       | Hematology            |                    | 2                | 2               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTH PRT UTERUS     | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MLH1 GENE FULL SEQ                   | SOLITARY PULMONARY NODULE                                    | Surgery, Thoracic     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MODAFINIL 100 MG TABLET              |  | Neurology             | 2                  |                  |                 |  |                          |                        |                      |                 |

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| MODAFINIL 100 MG TABLET              |  | Other                        | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| MODAFINIL 200 MG TABLET              |  | Neurology                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| MODAFINIL 200 MG TABLET              |  | Other                        | 13                 | 8                | 8               |  |                          |                        |                      |                 |
| MODAFINIL 200 MG TABLET              |  | PCP/Pediatrician             | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MONOVISC                             | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE                 | Orthopedic Surgery           |                    |                  |                 |  |                          | 1                      |                      |                 |
| MONOVISC 88 MG/4 ML SYRINGE          |  | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MONOVISC INJ PER DOSE                | AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY                | Rheumatology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MONOVISC INJ PER DOSE                | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                     | Physical Medicine            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MONOVISC INJ PER DOSE                | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                     | Physician Assistant          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MONOVISC INJ PER DOSE                | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                     | Rheumatology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MONOVISC INJ PER DOSE                | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                     | Surgery, Orthopedic          | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| MONOVISC INJ PER DOSE                | UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, RIGHT KNEE         | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MONOVISC INJ PER DOSE                | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE                 | Surgery, Orthopedic          | 10                 | 2                | 1               | 1                                      |                          |                        |                      |                 |
| MONOVISC INJ PER DOSE                | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE                | Surgery, Orthopedic          | 7                  | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 2             | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Hematology                   |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 5             | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Hematology                   |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 8             | ABSENCE EPILEPTIC SYNDROME, NOT INTRACTABLE, W/O STAT EPI    | Pediatric Neurology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 8             | GALACTOSEMIA   | Pediatrics                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 8             | GENERALIZED IDIOPATHIC EPILEPSY, INTRACTABLE, W/O STAT EPI   | Neurology                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 8             | PARVOVIRUS AS THE CAUSE OF DISEASES CLASSIFIED ELSEWHERE     | Allergy/Immunology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 8             | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 8             | SUPERVISION OF ELDERLY MULTIGRAVIDA, FIRST TRIMESTER         | Genetics                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 9             | ABSENCE EPILEPTIC SYNDROME, NOT INTRACTABLE, W/O STAT EPI    | Pediatric Neurology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 9             | NEUROFIBROMATOSIS, TYPE 1                                    | Pediatrics                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 9             | OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM  | Pediatric Nurse Practitioner | 1                  |                  |                 |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 9             | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MOPATH PROCEDURE LEVEL 9             | UNSP SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM | Clinical Genetics            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MORPHINE SULFATE 15 MG TABLET        |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MORPHINE SULFATE ER 15 MG TABLET SA  |  | Other                        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MORPHINE SULFATE ER 30 MG TABLET SA  |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MORPHINE SULFATE ER 60 MG CAP ER PEL |  | Pain Management              | 1                  |                  |                 |  |                          |                        |                      |                 |



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|--|--|--------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MOTEGRITY  | Slow transit constipation  | Gastroenterology               |                    |                  |                 |  |                          | 1                      |                      |                 |
| MOTEGRITY 2 MG TABLET  |  | Other                          | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| MOTOFEN 1-0.025MG TABLET   |  | Gastroenterology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MOVANTIK 12.5 MG TABLET  |  | Other                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MOVANTIK 25 MG TABLET  |  | Other                          | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRA ABDOMEN, with or without contrast material(s)                      | ACUTE EMBO THROMB UNS DEEP VEINS LT LOWER EXTREM, OTHER SPECIFIED SOFT TISSUE DISORDERS  | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA ABDOMEN, with or without contrast material(s)                      | COARCTATION OF AORTA   | CARDIOLOGIST                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA ABDOMEN, with or without contrast material(s)                      | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, TOURETTES DISORDER  | Pediatrics                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA ABDOMEN, with or without contrast material(s)                      | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST   | SURGEON - BREAST               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | AORTIC ECTASIA UNSPECIFIED SITE, NONRHEUMATIC AORTIC VALVE INSUFFICIENCY   | Rheumatology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | COARCTATION OF AORTA   | CARDIOLOGIST                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | CONGENITAL INSUFFICIENCY OF AORTIC VALVE   | CARDIOVASCULAR DISEASE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, TOURETTES DISORDER  | Pediatrics                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | MARFANS SYNDROME UNSPECIFIED, THORACIC AORTIC ECTASIA, Unknown   | CARDIOVASCULAR DISEASE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | OTH CONGENITAL MALFORMATIONS MUSCULOSKELETAL SYS, CONGENITAL INSUFFICIENCY OF AORTIC VALVE, THORACIC AORTIC ECTASIA, AORTIC ECTASIA UNSPECIFIED SITE, OTHER SPECIFIED COUNSELING | PEDIATRIC CARDIOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | OTHER SPECIFIED DISORDERS ARTERIES & ARTERIOLES  | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE   | CARDIOLOGY & INTERNAL MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA CHEST (excluding myocardium), with or without contrast material(s) | THORACIC AORTIC ECTASIA  | CARDIOLOGIST                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; with contrast material(s)                                    | CEREBRAL ANEURYSM NONRUPTURED  | RADIOLOGY                      |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRA Head; with contrast material(s)                                    | TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED   | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)                                 |  | FAMILY PRACTICE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)                                 |  | NEUROLOGY                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)                                 |  | PEDIATRIC NEUROLOGIST          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)                                 | ALTERED MENTAL STATUS UNSPECIFIED, CEREBRAL INFARCTION UNSPECIFIED, CEREBRAL ANEURYSM NONRUPTURED  | Pediatric Pulmonology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)                                 | ANEURYSM OF CAROTID ARTERY, CHRONIC MIGRAINE W/O AURA INTRACT W/STAT MIGR, Unknown   | NEUROLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)                                 | ANEURYSM OF UNSPECIFIED SITE   | NEUROSURGERY                   | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRA Head; without contrast material(s) | BENIGN NEOPLASM OF MENINGES UNSPECIFIED, CEREBRAL ANEURYSM NONRUPTURED  | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | CEREBRAL ANEURYSM NONRUPTURED   | FAMILY PRACTICE        | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | CEREBRAL ANEURYSM NONRUPTURED   | NEUROSURGERY           | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | CEREBRAL ANEURYSM NONRUPTURED   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | CEREBRAL CYSTS  | SURGERY-NEUROLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | CEREBROVASCULAR DISEASE UNSPECIFIED   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | DEVELOPMENTAL DISORDER SPEECH AND LANGUAGE UNS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | DISORDER OF TRIGEMINAL NERVE UNSPECIFIED  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | DISORIENTATION UNSPECIFIED, TENSION-TYPE HEADACHE UNSPECIFIED INTRACTABLE   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | DIZZINESS AND GIDDINESS   | NEUROLOGY              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY, RADICULOPATHY SITE UNSPECIFIED, CERVICALGIA, PARESTHESIA OF SKIN, ESSENTIAL PRIMARY HYPERTENSION                     | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY, RADICULOPATHY SITE UNSPECIFIED, CERVICALGIA, PARESTHESIA OF SKIN, OTHER CHRONIC PAIN, ESSENTIAL PRIMARY HYPERTENSION | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | HEADACHE ASSOCIATED WITH SEXUAL ACTIVITY  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | INTRACRANL & INTRASPINL PHLEBIT & THROMBOPHLEBIT  | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAIN, CEREBRAL ANEURYSM NONRUPTURED   | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | OTHER AMNESIA   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | OTHER VISUAL DISTURBANCES, ANEURYSM OF CAROTID ARTERY, CHRONIC MIGRAINE W/O AURA INTRACT W/STAT MIGR, Unknown   | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | OTHER VISUAL DISTURBANCES, PRIMARY THUNDERCLAP HEADACHE, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | PAPILLEDEMA WITH INCREASED INTRACRANIAL PRESSURE  | OPHTHALMOLOGY          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | PERSONAL HX TIA & CEREB INFARCT NO RESID DEFICIT  | UROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s) | POLYCYSTIC KIDNEY UNSPECIFIED, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | NEPHROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRA Head; without contrast material(s)   | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, OTHER CHRONIC PAIN, Unknown  | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | SYNCOPE AND COLLAPSE, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE, MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS, ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE, PRIMARY EXERTIONAL HEADACHE  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | TINNITUS UNSPECIFIED EAR  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | TINNITUS UNSPECIFIED EAR  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | TRIGEMINAL NEURALGIA  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | UNSPECIFIED PAPILLEDEMA, BENIGN INTRACRANIAL HYPERTENSION   | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | UNSPECIFIED VISUAL DISTURBANCE  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s)   | UNSPECIFIED VISUAL FIELD DEFECTS, UNSPECIFIED PAPILLEDEMA, BENIGN INTRACRANIAL HYPERTENSION, Unknown  | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences |   | INTERNAL MEDICINE      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences |   | NEUROLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | BENIGN INTRACRANIAL HYPERTENSION  | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | COARCTATION OF AORTA  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, CERVICALGIA  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, TOURETTES DISORDER   | Pediatrics             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | OCCLUSION & STENOSIS BILATERAL VERTEBRAL ART  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Head; without contrast material(s), followed by contrast material(s) and further sequences | PAPILLEDEMA WITH INCREASED INTRACRANIAL PRESSURE  | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; with contrast material(s)  |   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Neck; with contrast material(s)  | HEADACHE ASSOCIATED WITH SEXUAL ACTIVITY  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRA Neck; with contrast material(s)  | OCCCLUSION & STENOSIS BILATERAL VERTEBRAL ART   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; with contrast material(s)  | Pulsatile tinnitus, right ear   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s)   | DISORDER OF ARTERIES AND ARTERIOLES UNSPECIFIED   | SURGERY-THORACIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s)   | DIZZINESS AND GIDDINESS   | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s)   | DIZZINESS AND GIDDINESS   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s)   | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE, MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS, ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s)   | TINNITUS UNSPECIFIED EAR  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s)   | UNSPECIFIED VISUAL DISTURBANCE  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences |   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | COARCTATION OF AORTA  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | DEVELOPMENTAL DISORDER SPEECH AND LANGUAGE UNS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | NEUROLOGY              |                    | 3                |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, CERVICALGIA  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY, RADICULOPATHY SITE UNSPECIFIED, CERVICALGIA, PARESTHESIA OF SKIN, ESSENTIAL PRIMARY HYPERTENSION                         | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY, RADICULOPATHY SITE UNSPECIFIED, CERVICALGIA, PARESTHESIA OF SKIN, OTHER CHRONIC PAIN, ESSENTIAL PRIMARY HYPERTENSION     | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, TOURETTES DISORDER   | Pediatrics             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA Neck; without contrast material(s), followed by contrast material(s) and further sequences | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, OTHER CHRONIC PAIN, Unknown  | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRA PELVIS, with or without contrast material(s)   | COARCTATION OF AORTA  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA PELVIS, with or without contrast material(s)   | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, TOURETTES DISORDER   | Pediatrics             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRA PELVIS, with or without contrast material(s)   | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | SURGEON - BREAST       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                         | Diagnosis Code Description   | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRCP (Magnetic Resonance Cholangiopancreatography) | ABNORMAL LEVELS OF OTHER SERUM ENZYMES, HEPATIC FAILURE UNSPECIFIED WITHOUT COMA, Unknown  | HEPATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRCP (Magnetic Resonance Cholangiopancreatography) | Biliary acute pancreatitis without necrosis or infection   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN W/O & W/DYE                            | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | Surgery, Thoracic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; with contrast material(s)             | GEN INTRA-ABD & PELVIC SWELLING MASS & LUMP  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; with contrast material(s)             | GEN INTRA-ABD & PELVIC SWELLING MASS & LUMP  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; with contrast material(s)             | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED  | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; with contrast material(s)             | LIVER DISEASE UNSPECIFIED  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; with contrast material(s)             | LIVER DISEASE UNSPECIFIED, FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; with contrast material(s)             | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; with contrast material(s)             | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF LIVER  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; with contrast material(s)             | UNSPECIFIED ABDOMINAL PAIN   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          |  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT, UNSPECIFIED ABDOMINAL PAIN   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | ABNORMAL LEVELS OF OTHER SERUM ENZYMES   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | ACQUIRED ABSENCE OTH SPEC PARTS DIGESTIVE TRACT  | PHYSICIAN ASSISTANT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | CYST OF KIDNEY ACQUIRED  | NEPHROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED   | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS, MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | OTHER DISORDERS OF PLASMA-PROTEIN METABOLISM NEC, OTHER DISORDERS OF BILIRUBIN METABOLISM, ALCOHOLIC CIRRHOSIS OF LIVER WITH ASCITES, HEPATIC FAILURE UNSPECIFIED WITHOUT COMA | HEPATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER, OTHER SPECIFIED DISEASES OF BILIARY TRACT  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)          | PAIN UNSPECIFIED, CYSTIC DISEASE OF LIVER  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI ABDOMEN; without contrast material(s)  | POLYCYSTIC KIDNEY ADULT TYPE   | NEPHROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)  | RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN  | SPORTS MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)  | RIGHT LOWER QUADRANT PAIN, PAIN IN RIGHT HIP, OTHER CHRONIC PAIN, PAIN IN RIGHT LEG    | SPORTS MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)  | RIGHT UPPER QUADRANT PAIN, BARRETTS ESOPHAGUS WITHOUT DYSPLASIA                        | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s)  | UNSPECIFIED ABDOMINAL PAIN   | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences |  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences |  | GASTROENTEROLOGY        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | , Unsp intestnl obst, unsp as to partial versus complete obst                          | SURGERY-COLON/RECTAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABDOMINAL DISTENSION GASEOUS, UNSPECIFIED ABDOMINAL PAIN                               | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM                                       | Gastroenterology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM                                       | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORM FIND ON DX IMAG OTH PARTS DIGESTIVE TRACT                                       | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT   | GASTROENTEROLOGY        | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT, ABNORMAL LEVELS OF OTHER SERUM ENZYMES | PHYSICIAN ASSISTANT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT, UNSPECIFIED ABDOMINAL PAIN             | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | Abnormal radiologic findings on diagnostic imaging of unspecified kidney               | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORMAL RESULTS OF LIVER FUNCTION STUDIES   | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORMAL RESULTS OF LIVER FUNCTION STUDIES   | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ABNORMAL RESULTS OF LIVER FUNCTION STUDIES, ABNORM FIND ON DX IMAG OTH PARTS DIGESTIVE TRACT | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | Acute pancreatitis without necrosis or infection, unspecified                                | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | Alcohol induced acute pancreatitis without necrosis or infection                             | PEDIATRICS         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ALCOHOLIC CIRRHOSIS OF LIVER WITHOUT ASCITES   | NURSE PRACTITIONER |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ALCOHOLIC HEPATITIS WITHOUT ASCITES  | HEPATOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ARTERIOVENOUS MALFORMATION OF RENAL VESSEL   | UROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED   | UROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | BENIGN NEOPLASM OF LIVER   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | Biliary acute pancreatitis without necrosis or infection                                     | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CONGENITAL MULTIPLE RENAL CYSTS  | UROLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CROHNS DISEASE SMALL & LARGE INTEST W/UNS COMP   | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CROHNS DISEASE SMALL & LARGE INTESTINE W/FIST  | GASTROENTEROLOGY   | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CROHNS DISEASE SMALL INTESTINE W/O COMP  | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CROHNS DISEASE SMALL INTESTINE W/O COMP, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM    | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CROHNS DISEASE UNS WITHOUT COMPLICATIONS  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CROHNS DISEASE UNS WITHOUT COMPLICATIONS  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CYST OF KIDNEY ACQUIRED   | SURGERY- UROLOGICAL     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CYST OF KIDNEY ACQUIRED, PERSONAL HISTORY OF URINARY CALCULI                      | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CYST OF PANCREAS  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CYST OF PANCREAS  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | CYST OF PANCREAS, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED                   | PEDIATRICS              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | DIARRHEA UNSPECIFIED  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | DISEASE OF PANCREAS UNSPECIFIED   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | DISEASE OF PANCREAS UNSPECIFIED, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | DISEASE OF PANCREAS UNSPECIFIED, MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | DISORDER OF ADRENAL GLAND UNSPECIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | DISORDER OF IRON METABOLISM UNSPECIFIED   | CARDIOLOGIST            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | DISORDER OF KIDNEY AND URETER UNSPECIFIED, DISEASE OF PANCREAS UNSPECIFIED        | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | DISORDER OF KIDNEY AND URETER UNSPECIFIED, OTHER SPECIFIED DISEASES OF LIVER      | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ECTOPIC KIDNEY, BENIGN NEOPLASM CNCTV & OTHER SOFT TISSUE UNS                     | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |



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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ELEVATED C-REACTIVE PROTEIN CRP, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM                                   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ENDOMETRIOSIS UNSPECIFIED   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | EPIGASTRIC PAIN, NAUSEA WITH VOMITING UNSPECIFIED   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | FOLLICULAR LYMPHOMA UNSPEC UNSPEC SITE  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | HEMANGIOMA OF INTRA-ABDOMINAL STRUCTURES  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | HEMANGIOMA UNSPECIFIED SITE   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | HEMOCHROMATOSIS UNSPECIFIED   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED   | INTERNAL MEDICINE       | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED, ABNORMALITY OF ALPHAFETOPROTEIN, ENCOUNTER FOR PREPROCEDURAL LABORATORY EXAM | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | HYPERALDOSTERONISM UNSPECIFIED, CYST OF KIDNEY ACQUIRED   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE  | NURSE PRACTITIONER      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, MALIGNANT NEOPLASM OF PROSTATE                                    | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | INTRAHEPATIC BILE DUCT CARCINOMA  | HEMATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | INTRAHEPATIC BILE DUCT CARCINOMA  | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | INTRAHEPATIC BILE DUCT CARCINOMA   | SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | INTRAHEPATIC BILE DUCT CARCINOMA, Unknown  | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LEIOMYOMA OF UTERUS UNSPECIFIED  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER CELL CARCINOMA   | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER CELL CARCINOMA   | HEPATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER CELL CARCINOMA, LIVER TRANSPLANT STATUS, ENCOUNTER AFTERCARE FOLLOWING LIVER TRANSPLANT                          | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER DISEASE UNSPECIFIED  | FAMILY PRACTICE         | 4                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER DISEASE UNSPECIFIED  | GASTROENTEROLOGY        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER DISEASE UNSPECIFIED  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER DISEASE UNSPECIFIED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER DISEASE UNSPECIFIED  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER DISEASE UNSPECIFIED  | Urology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER DISEASE UNSPECIFIED, OTHER SPECIFIED DISEASES OF LIVER   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LIVER TRANSPLANT STATUS  | HEPATOLOGY              | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | LOCALIZED ENLARGED LYMPH NODES, SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM CONN SOFT TISS HEAD FACE NECK   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OF ANAL CANAL  | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OF ASCENDING COLON   | SURGERY-COLON/RECTAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OF COLON UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OF NASOPHARYNX UNSPECIFIED   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OF TONSILLAR FOSSA, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNSITE RIGHT FEMALE BREAST | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | HEMATOLOGY AND ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | MALIGNANT NEOPLASM UNSITE LEFT FEMALE BREAST  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | NEOPLASM OF UNS BEHAVIOR DIGESTIVE SYSTEM   | INTERNAL MEDICINE       |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | NEOPLASM OF UNS BEHAVIOR DIGESTIVE SYSTEM   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | NEOPLASM UNCERTAIN BHV LIVER GALLBLADDER & BD   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | NEOPLASM UNCERTAIN BHV LIVER GALLBLADDER & BD   | GASTROENTEROLOGY        | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | NEOPLASM UNCERTAIN BHV LIVER GALLBLADDER & BD  | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | NONALCOHOLIC STEATOHEPATITIS   | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | NONALCOHOLIC STEATOHEPATITIS, UNSPECIFIED CIRRHOSIS OF LIVER   | HEPATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | NONINFECTIVE GASTROENTERITIS & COLITIS UNS, OTHER CONSTIPATION   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OBSTRUCTIVE AND REFLUX UROPATHY UNSPECIFIED  | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTH SPEC SX & SIGNS INVLV THE DIGESTV SYS & ABD  | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER ASCITES  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER ASCITES, NONALCOHOLIC STEATOHEPATITIS, UNSPECIFIED CIRRHOSIS OF LIVER  | HEPATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER BENIGN NEOPLASM OF UTERUS UNSPECIFIED  | OBSTETRICS & GYNECOLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER BENIGN NEUROENDOCRINE TUMORS   | RADIATION ONCOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER BENIGN NEUROENDOCRINE TUMORS, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS  | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER CHRONIC PANCREATITIS   | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER DISORDERS OF PLASMA-PROTEIN METABOLISM NEC, OTHER DISORDERS OF BILIRUBIN METABOLISM, ALCOHOLIC CIRRHOSIS OF LIVER WITH ASCITES, HEPATIC FAILURE UNSPECIFIED WITHOUT COMA | HEPATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER FATIGUE, OTHER SPECIFIED DISORDERS OF ADRENAL GLAND, CYST OF KIDNEY ACQUIRED   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER MALIGNANT NEUROENDOCRINE TUMORS  | RADIOLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER SPECIFIED DISEASES OF ANUS AND RECTUM                       | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER SPECIFIED DISEASES OF GALLBLADDER                           | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER SPECIFIED DISEASES OF LIVER                                 | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER SPECIFIED DISEASES OF LIVER                                 | INTERNAL MEDICINE       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | Other specified diseases of pancreas                              | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | Other specified diseases of pancreas                              | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND                        | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER                    | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER                    | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | PAIN UNSPECIFIED, CYSTIC DISEASE OF LIVER                         | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | PELVIC AND PERINEAL PAIN  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | PERIUMBILICAL PAIN, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF LIVER                   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | PERSONAL HISTORY OF URINARY TRACT INFECTIONS                      | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | POLYCYSTIC KIDNEY UNSPECIFIED                                     | NEPHROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | RIGHT UPPER QUADRANT PAIN   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | SOLITARY PULMONARY NODULE, CYST OF PANCREAS, NEOPLASM OF UNS BEHAVIOR DIGESTIVE SYSTEM                             | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | SPLENOMEGALY NOT ELSEWHERE CLASSIFIED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ULCERATIVE CHRONIC PANCOLITIS W/O COMPLICATIONS  | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ULCERATIVE CHRONIC PANCOLITIS WITH UNS COMP, Unknown   | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ULCERATIVE CHRONIC RECTOSIGMOIDITIS W/O COMP   | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | ULCERATIVE COLITIS UNS W/UNS COMPLICATIONS   | GASTROENTEROLOGY        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | UNSPECIFIED ABDOMINAL PAIN   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | UNSPECIFIED ABDOMINAL PAIN, DISEASE OF GALLBLADDER UNSPECIFIED   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | UNSPECIFIED ABDOMINAL PAIN, SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | UNSPECIFIED ABDOMINAL PAIN, SPLENOMEGALY NOT ELSEWHERE CLASSIFIED, SECONDARY POLYCYTHEMIA                          | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | UNSPECIFIED CIRRHOSIS OF LIVER   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI ABDOMEN; without contrast material(s), followed by with contrast material(s) and further sequences | Unspecified ovarian cyst, unspecified side   | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s)  |  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s)  | APHASIA, ABNORMAL REFLEX   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s)  | BENIGN PAROXYSMAL VERTIGO UNSPECIFIED EAR, Unknown   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s)  | CEREBRAL ANEURYSM NONRUPTURED  | RADIOLOGY               |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s)  | DISORDER OF BRAIN UNSPECIFIED  | SURGERY-NEUROLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s)  | MAJ DEPRESS D/O SINGLE EPIS SEV W/O PSYCH FEATUR   | PHYSIATRY               |                    | 2                | 2               |  |                          |                        |                      |                 |

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|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); with contrast material(s) | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS, PROGRESSIVE EXTERNAL OPHTHALMOPLEGIA BILATERAL, BENIGN NEOPLASM OF MENINGES UNSPECIFIED | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s) | OTHER AMNESIA, OTH SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS, NEW DAILY PERSISTENT HEADACHE   | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s) | OTHER AMNESIA, OTHER ABNORMALITIES OF GAIT AND MOBILITY   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s) | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s) | PRIMARY THUNDERCLAP HEADACHE  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); with contrast material(s) | SURG PROCEDURE UNS ABNORMAL REACTION/LATER COMP, DISORDER OF BRAIN UNSPECIFIED  | SURGERY-NEUROLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | FAMILY PRACTICE                    | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | INTERNAL MEDICINE                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | NEUROLOGY                          | 10                 | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | OTOLARYNGOLOGIST (ENT)             | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | PCP/Pediatrician                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | PEDIATRIC NEUROLOGIST              | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | PEDIATRICS                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material |   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | ABNORMAL FINDING OF BLOOD CHEMISTRY UNSPECIFIED, NEOPLASM OF UNCERTAIN BEHAVIOR PITUITARY GLAND   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | AGE-RELATED COGNITIVE DECLINE   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | ANESTHESIA OF SKIN  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | ANESTHESIA OF SKIN, ESSENTIAL PRIMARY HYPERTENSION, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS                                    | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | ARNOLD-CHIARI SYNDROME WITH HYDROCEPHALUS   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | ATTENTION AND CONCENTRATION DEFICIT, CHRONIC MIGRAINE W/O AURA INTRACT W/STAT MIGR  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | BELLS PALS  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | BENIGN INTRACRANIAL HYPERTENSION  | OPHTHALMOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | BRAIN STEM STROKE SYNDROME  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | CEREBRAL CYSTS  | SURGERY-NEUROLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | CEREBRAL INFARCTION UNSPECIFIED   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material | CEREBRAL INFARCTION UNSPECIFIED, OCCLUSION & STENOSIS UNS VERTEBRAL ARTERY  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | COARCTATION OF AORTA  | CARDIOLOGIST              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DISORDER OF BRAIN UNSPECIFIED   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DISORIENTATION UNSPECIFIED  | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DISORIENTATION UNSPECIFIED  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS   | CARDIOVASCULAR DISEASE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS   | CHIROPRACTOR              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS   | FAMILY PRACTICE           | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS   | INTERNAL MEDICINE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS   | NEUROLOGY                 | 6                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS, LESION LATERAL POPLITEAL NERVE RIGHT LOWER LIMB, LESION OF SCIATIC NERVE LEFT LOWER LIMB | NEPHROLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS, Unknown                                | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS, OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS, OTHER MALFORMATIONS OF CEREBRAL VESSELS  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DIZZINESS AND GIDDINESS, UNSPECIFIED VISUAL DISTURBANCE, HISTORY OF FALLING, Unknown                              | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | DYSPHAGIA UNSPECIFIED, SPINAL STENOSIS CERVICAL REGION  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS   | NEUROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | EXTRAPYRAMIDAL AND MOVEMENT DISORDER UNSPECIFIED  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | FACIAL WEAKNESS, PARESTHESIA OF SKIN  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | FASCICULATION   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | FM HX EPILEPSY & OTHER DISEASES NERVOUS SYSTEM  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | HYPNIC HEADACHE   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | HYPOPIUITARISM  | PEDIATRIC ENDOCRINOLOGIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | INJURY TRIGEMINAL NERVE RT SIDE INITIAL ENCNR   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | LOC-REL SX EPILEPSY W/CPS NOT INTRACT W/O SE  | PEDIATRIC NEUROLOGIST     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MACROCEPHALY, ACUTE SUPPURATIVE OM W/O RUPT EAR DRUM LT EAR   | PEDIATRICS                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, Unknown  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |



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|---|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS  | FAMILY PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS  | NEUROLOGY             | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MIGRAINE W/AURA INTRACT W/STATUS MIGRAINOSUS   | PAIN MANAGEMENT       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS   | FAMILY PRACTICE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MIGRAINE W/AURA NOT INTRACT W/STATUS MIGRAINOSUS   | INTERNAL MEDICINE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAIN   | INTERNAL MEDICINE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MIGRAINE W/O AURA NOT INTRACT W/STAT MIGRAINOSUS   | INTERNAL MEDICINE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MILD COGNITIVE IMPAIRMENT SO STATED  | NEUROLOGY             | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MONOPLÉGIA UPPER LIMB LEFT NONDOMINANT SIDE  | NEUROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MULTIPLE SCLEROSIS   | NEUROLOGY             | 9                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MULTIPLE SCLEROSIS   | PSYCHIATRY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MULTIPLE SCLEROSIS   | RADIOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | MUSCLE WEAKNESS GENERALIZED  | INTERNAL MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | NEW DAILY PERSISTENT HEADACHE  | INTERNAL MEDICINE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | NEW DAILY PERSISTENT HEADACHE  | NEUROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | NEW DAILY PERSISTENT HEADACHE  | NURSE PRACTITIONER    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTH TRANSIENT CERBRAL ISCHEMIC ATTACKS & REL SYND  | CARDIOLOGIST          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER ABNORMAL INVOLUNTARY MOVEMENTS   | PEDIATRICS            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER ABNORMAL INVOLUNTARY MOVEMENTS, ABNORMAL REFLEX  | PEDIATRIC NEUROLOGIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER ABNORMALITIES OF GAIT AND MOBILITY   | FAMILY PRACTICE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER ABNORMALITIES OF GAIT AND MOBILITY, TREMOR UNSPECIFIED, UNSPECIFIED FALL INITIAL ENCOUNTER | NEUROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER ADRENOCORTICAL OVERACTIVITY  | GENERAL PRACTICE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER AMNESIA  | FAMILY PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER AMNESIA  | INTERNAL MEDICINE     | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER AMNESIA  | NEUROLOGY             | 5                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER AMNESIA, ANXIETY DISORDER UNSPECIFIED, Unknown   | NEUROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER AMNESIA, ANXIETY DISORDER UNSPECIFIED, Unknown   | NURSE PRACTITIONER    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER AMNESIA, DIZZINESS AND GIDDINESS   | INTERNAL MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER AMNESIA, PERSONAL HISTORY OF TRAUMATIC BRAIN INJURY  | NEUROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRI BRAIN (head); without contrast material | OTHER COMPLICATED HEADACHE SYNDROME   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER DISORDERS OF PITUITARY GLAND  | NURSE PRACTITIONER     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER GENERAL SYMPTOMS AND SIGNS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER GENERAL SYMPTOMS AND SIGNS, ANESTHESIA OF SKIN, Unknown   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER MALFORMATIONS OF CEREBRAL VESSELS   | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER SPECIFIED DISORDERS OF BRAIN  | RADIOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER TICS OF ORGANIC ORIGIN  | PSYCHIATRY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | OTHER VISUAL DISTURBANCES, POSTCONCUSSIONAL SYNDROME, Unknown   | PCP/Pediatrician       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | PAPILLEDEMA WITH INCREASED INTRACRANIAL PRESSURE  | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | PARALYSIS OF VOCAL CORDS AND LARYNX UNSPECIFIED   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | PARKINSONS DISEASE  | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | POSTCONCUSSIONAL SYNDROME   | NEUROLOGY              | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | PRETERM NEWBORN GESTATIONAL AGE 32 CMPL WEEKS, OTH NEONATAL ASPIRATION W/RESPIRATORY SYMPTOMS   | PEDIATRICS             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | QUADRIPLEGIA UNSPECIFIED  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | RADICULOPATHY SITE UNSPECIFIED, PARESTHESIA OF SKIN   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | SENSORINEURAL HEARING LOSS BILATERAL, UNS PERFORATION OF TYMPANIC MEMBRANE LT EAR   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | SUDDEN IDIOPATHIC HEARING LOSS RIGHT EAR  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | SYRINGOMYELIA AND SYRINGOBULBIA   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE, MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS, ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE, PRIMARY EXERTIONAL HEADACHE  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | TINNITUS BILATERAL  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | TINNITUS BILATERAL  | NURSE PRACTITIONER     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | TINNITUS LEFT EAR   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | TINNITUS UNSPECIFIED EAR  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material | TINNITUS UNSPECIFIED EAR, POSTCONCUSSIONAL SYNDROME   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material   | TRAUMATIC SUBDURAL HEMORRHAGE W/LOC UNS DUR INIT  | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | TREMOR UNSPECIFIED  | FAMILY PRACTICE         |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | TREMOR UNSPECIFIED  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | TRIGEMINAL NEURALGIA  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | UNS DISORDER VESTIBULAR FUNCTION LEFT EAR   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | UNSPECIFIED CONVULSIONS   | NEUROLOGY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | UNSPECIFIED CONVULSIONS   | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | UNSPECIFIED VISUAL DISTURBANCE, NAUSEA, Unknown   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | UNSTEADINESS ON FEET, ORTHOSTATIC HYPOTENSION   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | UNSTEADINESS ON FEET, OTHER PERIPHERAL VERTIGO RIGHT EAR  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | VISUAL HALLUCINATIONS   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | VITAMIN D DEFICIENCY UNSPECIFIED, MULTIPLE SCLEROSIS  | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | WEAKNESS, DIZZINESS AND GIDDINESS   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material   | WHITE MATTER DISEASE UNSPECIFIED, ABNORMAL IMMUNOLOGICAL FIND IN CEREBROSPINAL FL, MULTIPLE SCLEROSIS | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences |   | FAMILY PRACTICE         | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences |   | GENERAL PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences |   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences |   | INTERNAL MEDICINE       | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences |   | NEUROLOGY               | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences |   | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences |   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences |   | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ABN LEVEL HORMONES IN SPEC OTH ORGAN SYS & TISS   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ABNORMAL BRAIN SCAN   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ABNORMAL BRAIN SCAN, DIFFUSE LARGE B-CELL LYMPHOMA UNSPECIFIED SITE   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ABNORMAL FINDING OF BLOOD CHEMISTRY UNSPECIFIED, AUTISTIC DISORDER, EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ABNORMAL FINDING OF BLOOD CHEMISTRY UNSPECIFIED, AUTISTIC DISORDER, MALIGNANT NEOPLASM OF FRONTAL LOBE, MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED, Unknown  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ABNORMAL FINDING OF BLOOD CHEMISTRY UNSPECIFIED, MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED, PERSONAL HISTORY OF IRRADIATION, ENCOUNTER F/U EXAM AFTER CMPL TX MALIG NEOPLASM                              | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ALTERED MENTAL STATUS UNSPECIFIED, AGORAPHOBIA WITH PANIC DISORDER  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ALTERED MENTAL STATUS UNSPECIFIED, CEREBRAL INFARCTION UNSPECIFIED, CEREBRAL ANEURYSM NONRUPTURED   | Pediatric Pulmonology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN  | NEUROLOGY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN  | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, HEMIPLEGIA UNS AFFECTING LEFT NONDOMINANT SIDE  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, OTHER ABNORMALITIES OF GAIT AND MOBILITY, OCCLUSION & STENOSIS UNSPECIFIED CAROTID ARTERY, Unknown  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description                                    | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN                       | PEDIATRIC NEUROLOGIST  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN, TRIGEMINAL NEURALGIA | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ANOSMIA   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | APHASIA   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | APHASIA, ABNORMAL REFLEX                                      | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ARNOLD-CHIARI SYND W/O SPINA BIFIDA/HYDROCEPHLUS              | SURGERY-NEUROLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | AUDITORY HALLUCINATIONS, TINNITUS BILATERAL                   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BELLS Palsy   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF BRAIN UNSPECIFIED                          | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF CEREBRAL MENINGES                          | FAMILY PRACTICE        | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF CRANIAL NERVES                             | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF CRANIAL NERVES                             | OTOLARYNGOLOGIST (ENT) | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF MENINGES UNSPECIFIED                       | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF MENINGES UNSPECIFIED                       | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF MENINGES UNSPECIFIED                       | NEUROSURGERY           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF MENINGES UNSPECIFIED                       | SURGERY-NEUROLOGY      | 2                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF MENINGES UNSPECIFIED, CEREBRAL ANEURYSM NONRUPTURED                 | NEUROSURGERY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF MENINGES UNSPECIFIED, MALIGNANT NEOPLASM OF UNSPECIFIED OPTIC NERVE | RADIATION ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF PITUITARY GLAND   | ENDOCRINOLOGY      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF PITUITARY GLAND   | FAMILY PRACTICE    | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF PITUITARY GLAND   | INTERNAL MEDICINE  | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF PITUITARY GLAND   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF PITUITARY GLAND   | NEUROSURGERY       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF PITUITARY GLAND   | RADIATION ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF PITUITARY GLAND, NEOPLASM OF UNS BHV ENDOCRN GLAND & OTH PART NS    | ENDOCRINOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | BENIGN NEOPLASM OF PITUITARY GLAND, NEOPLASM OF UNS BHV ENDOCRN GLAND & OTH PART NS    | SURGERY-NEUROLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CEREBRAL ANEURYSM NONRUPTURED  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CEREBRAL ANEURYSM NONRUPTURED  | RADIOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CEREBRAL CYSTS   | Surgery, Plastic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CEREBRAL INFARCTION UNSPECIFIED  | CHIROPRACTOR       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CEREBRAL INFARCTION UNSPECIFIED  | GASTROENTEROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CERVICALGIA, PARESTHESIA OF SKIN, ATYPICAL FACIAL PAIN                                 | NEUROLOGY          |                    |                  | 1               | 1                                      |                          |                        |                      |                 |

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|---|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CHRONIC CLUSTER HEADACHE NOT INTRACTABLE  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CHRONIC FATIGUE UNSPECIFIED, OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS                                       | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG                   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM  | NEUROLOGY          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | COMPRESSION OF BRAIN, SYRINGOMYELIA AND SYRINGOBULBIA, Unknown  | SURGERY-NEUROLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | CONGENITAL MALFORMATION OF INNER EAR  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS   | NEUROLOGY          | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DEVELOPMENTAL DISORDER SPEECH AND LANGUAGE UNS  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIPLOPIA  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIPLOPIA, HYPOPITUITARISM, Unknown  | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DISORDER OF BONE UNSPECIFIED, MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS | HEMATOLOGY         | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DISORDER OF BRAIN UNSPECIFIED   | HEMATOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DISORDER OF BRAIN UNSPECIFIED   | INTERNAL MEDICINE  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DISORDER OF BRAIN UNSPECIFIED   | NEUROSURGERY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DISORDER OF PITUITARY GLAND UNSPECIFIED   | FAMILY PRACTICE    | 2                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DISORDER OF PUBERTY UNSPECIFIED   | PEDIATRIC ENDOCRINOLOGIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DISORIENTATION UNSPECIFIED  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | CHIROPRACTOR              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | FAMILY PRACTICE           | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | INTERNAL MEDICINE         | 6                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | NEUROLOGY                 | 9                  | 5                | 5               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | OTOLARYNGOLOGIST (ENT)    | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | PEDIATRICS                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, BENIGN NEOPLASM OF MENINGES UNSPECIFIED, OTHER COMPLICATED HEADACHE SYNDROME   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY, RADICULOPATHY SITE UNSPECIFIED, CERVICALGIA, PARESTHESIA OF SKIN, OTHER CHRONIC PAIN, ESSENTIAL PRIMARY HYPERTENSION | NEUROLOGY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, POST-TRAUMATIC HEADACHE UNSPECIFIED INTRACTABLE  | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, RADICULOPATHY LUMBAR REGION, Unknown   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, SENSORINURL HL UNI RT EAR UNRESTRCT CNTRLAT SIDE   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, UNSPECIFIED VISUAL DISTURBANCE   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, UNSPECIFIED VISUAL DISTURBANCE, FAMILY HX MALIGNANT NEOPLASM OTH ORGANS/SYSTEMS, Unknown | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, UNSPECIFIED VISUAL DISTURBANCE, HISTORY OF FALLING, Unknown                              | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, WHITE MATTER DISEASE UNSPECIFIED, MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAINE        | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | EPIDEMIC VERTIGO  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS   | PEDIATRIC NEUROLOGIST  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, MALIGNANT NEOPLASM OF FRONTAL LOBE                               | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | EPISODIC PAROXYSMAL HEMICRANIA NOT INTRACTABLE, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM                      | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | EPISODIC TENSION-TYPE HEADACHE NOT INTRACTABLE  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | ESSENTIAL PRIMARY HYPERTENSION, BELLS PALS, TOBACCO ABUSE COUNSELING  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | FACIAL MYOKYMIA   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | FACIAL WEAKNESS   | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | FASCICULATION, MAJOR DEPRESSIVE D/O SINGLE EPIS FULL REMISSION, GENERALIZED ANXIETY DISORDER                      | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | HETERONYMOUS BILATERAL FIELD DEFECTS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | HORNERS SYNDROME  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | HYPERACUSIS LEFT EAR, OTALGIA LEFT EAR, TINNITUS LEFT EAR   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | HYPERFUNCTION OF PITUITARY GLAND UNSPECIFIED  | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | HYPERPROLACTINEMIA   | ENDOCRINOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | HYPERPROLACTINEMIA   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | HYPOPIUITARISM   | PEDIATRIC ENDOCRINOLOGIST | 5                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | INJURY TRIGEMINAL NERVE RT SIDE INITIAL ENCNR  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | INTRACRANIAL ABSCESS AND GRANULOMA   | NEUROSURGERY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOCALIZED ENLARGED LYMPH NODES, DIZZINESS AND GIDDINESS, SARCOIDOSIS UNSPECIFIED, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST      | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP HEAD  | SURGERY-NEUROLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOC-REL IDIO EPI W/SEIZ LOC ONSET INTRCT W/O SE  | NEUROSURGERY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOC-REL IDIO EPI W/SZ LOC ONSET NOT INTRACT W/SE   | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOC-REL IDIO EPI W/SZ LOC ONSET NOT INTRCT NO SE   | NEUROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOC-REL IDIO EPI W/SZ LOC ONSET NOT INTRCT NO SE, Unknown,   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOC-REL SX EPILEPSY W/CPS INTRACT W/O STAT EPI, MALIGNANT NEOPLASM OF TEMPORAL LOBE, ENCOUNTER FOR THERAPEUTIC DRUG LEVEL MONITORING | NEURO & ONCOLOGY          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOC-REL SX EPILEPSY W/CPS INTRACT W/O STAT EPI, MALIGNANT NEOPLASM OF TEMPORAL LOBE, RADIATION SICKNESS UNSPECIFIED SEQUELA          | NEURO & ONCOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | LOC-REL SX EPILEPSY W/CPS NOT INTRACT W/O SE   | PEDIATRIC NEUROLOGIST     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT MELANOMA LEFT UP LIMB INCL SHOULDER                                | HEMATOLOGY AND ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT MELANOMA OF OTHER PART OF TRUNK, OTHER DISEASES OF SALIVARY GLANDS | PLASTIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT MELANOMA OF SKIN UNSPECIFIED                                       | INTERNAL MEDICINE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS                              | OTOLARYNGOLOGIST (ENT)          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG                               | HEMATOLOGY AND ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG                               | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED                                      | NEUROLOGY                       | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED                                      | NEUROSURGERY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED                                      | ONCOLOGY                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED                                      | PEDIATRIC HEMATOLOGY - ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED                                      | PEDIATRIC NEUROLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED                                      | PHYSICIAN ASSISTANT             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED                                      | RADIATION ONCOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF FRONTAL LOBE   | NEUROLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF FRONTAL LOBE   | ONCOLOGY                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF FRONTAL LOBE   | PHYSICIAN ASSISTANT             | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF BRAIN   | ONCOLOGY                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF PROSTATE   | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF TONSILLAR FOSSA  | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS  | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG   | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | HEMATOLOGY AND ONCOLOGY   | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, SECONDARY MALIGNANT NEOPLASM OF SKIN, ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST | RADIATION ONCOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, Unknown   | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG   | RADIATION ONCOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MENSTRUAL MIGRAINE INTRACT W/O STAT MIGRAINOSUS, CHRONIC MIGRAINE W/O AURA INTRACT W/O STAT MIGR   | NEUROLOGY                 | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS  | INTERNAL MEDICINE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS                              | PEDIATRIC NEUROLOGIST              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE W/O AURA INTRACT W/O STAT MIGRAINOSUS                                | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE W/O AURA INTRACT W/STAT MIGRAINOSUS                                  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAIN, CEREBRAL ANEURYSM NONRUPTURED | NEUROLOGY                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MIX HEAR LOSS UNI RT EAR UNRESTRCT CONTRLAT SIDE, TINNITUS RIGHT EAR          | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | NEUROLOGY                          | 18                 | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | NURSE PRACTITIONER                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS, OTHER LONG TERM CURRENT DRUG THERAPY                      | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MUSCLE WEAKNESS GENERALIZED   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | MUSCLE WEAKNESS GENERALIZED   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNCERTAIN BEHAVIOR BRAIN UNSPECIFIED                              | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNCERTAIN BEHAVIOR CEREBRAL MENINGES                              | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNCERTAIN BEHAVIOR UNSPECIFIED                                    | Neurology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNS BHV ENDOCRN GLAND & OTH PART NS                               | ENDOCRINOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNS BHV ENDOCRN GLAND & OTH PART NS   | NEUROSURGERY           | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEUROFIBROMATOSIS TYPE 1  | PEDIATRICS             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEUROFIBROMATOSIS UNSPECIFIED   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEW DAILY PERSISTENT HEADACHE   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEW DAILY PERSISTENT HEADACHE   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEW DAILY PERSISTENT HEADACHE   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NEW DAILY PERSISTENT HEADACHE   | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | NONTRAUMATIC SUBARACHNOID HEMORRHAGE UNSPECIFIED, CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OBSTRUCTIVE SLEEP APNEA ADULT PEDIATRIC   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OCCLUSION & STENOSIS BILATERAL VERTEBRAL ART  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OCULAR HYPERTENSION BILATERAL, BENIGN INTRACRANIAL HYPERTENSION   | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OCULAR PAIN RIGHT EYE, CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OCULAR PAIN RIGHT EYE, DIZZINESS AND GIDDINESS, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM, Unknown                                   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTALGIA UNSPECIFIED EAR, OTH MIGRAINE NOT INTRACT W/O STATUS MIGRAINOSUS  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS, PROGRESSIVE EXTERNAL OPHTHALMOPLERIA BILATERAL, BENIGN NEOPLASM OF MENINGES UNSPECIFIED | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTH SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS   | NEUROLOGY           | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTH SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS   | PSYCHIATRY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS   | NEUROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, OTHER CHRONIC PAIN, Unknown                  | INTERNAL MEDICINE   | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER ABNORMALITIES OF GAIT AND MOBILITY  | Family Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER ABNORMALITIES OF GAIT AND MOBILITY, PARESTHESIA OF SKIN, MULTIPLE SCLEROSIS             | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER AMNESIA   | INTERNAL MEDICINE   | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER AMNESIA   | NEUROLOGY           | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER AMNESIA, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS                                    | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER AMNESIA, OTH SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS                                | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER AMNESIA, OTH SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS, NEW DAILY PERSISTENT HEADACHE | PHYSICIAN ASSISTANT |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER AMNESIA, OTHER ABNORMALITIES OF GAIT AND MOBILITY                                       | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER AMNESIA, TRANSIENT GLOBAL AMNESIA, Unknown  | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER CHRONIC PAIN  | NEUROLOGY           | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER DISORDERS OF OPTIC NERVE NEC LEFT EYE   | OPHTHALMOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER DISORDERS OF PITUITARY GLAND  | ENDOCRINOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER DISORDERS OF PITUITARY GLAND   | PEDIATRIC ENDOCRINOLOGIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER DISORDERS OF PITUITARY GLAND, BENIGN NEOPLASM OF PITUITARY GLAND                         | OBSTETRICS & GYNECOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER DISORDERS OF PITUITARY GLAND, HYPERPROLACTINEMIA   | ENDOCRINOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER HALLUCINATIONS   | OTOLARYNGOLOGIST (ENT)    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER HEADACHE SYNDROME  | INTERNAL MEDICINE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER MUSCLE SPASM   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER MUSCLE SPASM, TREMOR UNSPECIFIED, PARESTHESIA OF SKIN                                    | NEUROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER PERIPHERAL VERTIGO UNSPECIFIED EAR   | OTOLARYNGOLOGIST (ENT)    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY, WEAKNESS   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER SPEC CONGENITAL MALFORMATIONS NS, EPILEPSY UNS INTRACTABLE W/O STATUS EPILEPTICUS        | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER SPECIFIED CONGENITAL MALFORMATIONS BRAIN, LOC-REL SX EPILEPSY W/CPS INTRACT W/O STAT EPI | SURGERY-NEUROLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER SPECIFIED HEARING LOSS LEFT EAR  | OTOLARYNGOLOGIST (ENT)    | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER SPECIFIED HEARING LOSS UNSPECIFIED EAR   | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER SPECIFIED HEARING LOSS UNSPECIFIED EAR, TINNITUS LEFT EAR                                | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER SPECIFIED NONPSYCHOTIC MENTAL DISORDERS  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | Other specified postprocedural states   | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER VISUAL DISTURBANCES   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER VISUAL DISTURBANCES   | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER VISUAL DISTURBANCES   | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTHER VISUAL DISTURBANCES, TINNITUS LEFT EAR, PERSONAL HISTORY OF TRAUMATIC BRAIN INJURY                            | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | OTITIS MEDIA UNSPECIFIED LEFT EAR   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PAPILLEDEMA WITH INCREASED INTRACRANIAL PRESSURE  | OPHTHALMOLOGY          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PARESTHESIA OF SKIN   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PARESTHESIA OF SKIN   | NEUROLOGY              | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PARESTHESIA OF SKIN   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PARESTHESIA OF SKIN, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS, CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PERSONAL HISTORY OF TRAUMATIC BRAIN INJURY  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PERSONAL HX TIA & CEREB INFARCT NO RESID DEFICIT  | UROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | POLYNEUROPATHY UNSPECIFIED  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | POSTVIRAL FATIGUE SYNDROME, Unknown   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PRIMARY EXERTIONAL HEADACHE   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | PRIMARY THUNDERCLAP HEADACHE  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | RETROBULBAR NEURITIS RIGHT EYE  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, HISTORY OF FALLING   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BONE, SECONDARY MALIGNANT NEOPLASM OF BRAIN, HYPHEMA RIGHT EYE, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BRAIN   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BRAIN   | RADIATION ONCOLOGY      | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BRAIN, MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BRAIN, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BRAIN, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BRAIN, OTHER SPECIFIED DISORDERS OF BRAIN   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SENSORINEURAL HEARING LOSS BILATERAL  | OTOLARYNGOLOGIST (ENT)  | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | Sensorineural hearing loss, unilateral, right ear, with restricted hearing on the contralateral side  | Surgery, General        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SENSORINURL HL UNI LT EAR UNRESTRCT CNTRLAT SIDE  | OTOLARYNGOLOGIST (ENT)  | 5                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SENSORINURL HL UNI LT EAR UNRESTRCT CNTRLAT SIDE  | Surgery, General        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SENSORINURL HL UNI LT EAR UNRESTRCT CNTRLAT SIDE, TINNITUS BILATERAL  | OTOLOGIST               | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SENSORINURL HL UNI RT EAR UNRESTRCT CNTRLAT SIDE, TINNITUS RIGHT EAR        | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SLURRED SPEECH  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | STUPOR, ORTHOSTATIC HYPOTENSION, UNS DISORDER VESTIBULAR FUNCTION RIGHT EAR | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SUDDEN IDIOPATHIC HEARING LOSS RIGHT EAR                                    | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SYNCOPE AND COLLAPSE  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SYNCOPE AND COLLAPSE  | NEUROLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, OTHER CHRONIC PAIN, Unknown  | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SYNCOPE AND COLLAPSE, ESSENTIAL PRIMARY HYPERTENSION                        | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SYNCOPE AND COLLAPSE, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS      | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | SYNCOPE AND COLLAPSE, PERSONAL HX TIA & CERE B INFARCT NO RESID DEFICIT     | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TESTICULAR HYPOFUNCTION   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TINNITUS BILATERAL, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST         | RADIATION ONCOLOGY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TINNITUS LEFT EAR   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TINNITUS LEFT EAR   | OTOLARYNGOLOGIST (ENT) | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TINNITUS UNSPECIFIED EAR  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TINNITUS UNSPECIFIED EAR  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TINNITUS UNSPECIFIED EAR, OTHER PERIPHERAL VERTIGO UNSPECIFIED EAR, UNSPECIFIED SENSORINEURAL HEARING LOSS   | INTERNAL MEDICINE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TRANSIENT ALTERATION OF AWARENESS  | NEUROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED   | NEUROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TREMOR UNSPECIFIED   | NEUROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TRIGEMINAL NEURALGIA   | INTERNAL MEDICINE               |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | TRIGEMINAL NEURALGIA   | NEUROLOGY                       | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNIFOCA L LANGERHANS-CELL HISTIOCYTOSIS  | PEDIATRIC HEMATOLOGY - ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNQUALIFIED VISUAL LOSS LT EYE NORM VIS RT EYE   | Rheumatology                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNS SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS, DIZZINESS AND GIDDINESS, UNSPECIFIED VISUAL DISTURBANCE, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS | NEUROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED CONVULSIONS  | INTERNAL MEDICINE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED CONVULSIONS  | NEUROLOGY                       | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED CONVULSIONS  | NURSE PRACTITIONER              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED DISTURBANCES OF SKIN SENSATION, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS  | NEUROLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED DISTURBANCES OF SKIN SENSATION, PARESTHESIA OF SKIN  | INTERNAL MEDICINE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED HEARING LOSS LEFT EAR  | Other                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED HEARING LOSS RIGHT EAR   | NEUROSURGERY                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED HEARING LOSS UNSPECIFIED EAR                                 | NEUROLOGY                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED HEARING LOSS UNSPECIFIED EAR                                 | OTOLARYNGOLOGIST (ENT)       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER                             | FAMILY PRACTICE              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED OPTIC NEURITIS   | NEUROLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED OPTIC NEURITIS, OTHER COMPLICATED HEADACHE SYNDROME          | NEUROLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED OPTIC NEURITIS, UNSPECIFIED PAPILLEDEMA, Unknown             | OPHTHALMOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED PAPILLEDEMA  | OPHTHALMOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED PAPILLEDEMA, BENIGN INTRACRANIAL HYPERTENSION                | OPHTHALMOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED SENSORINEURAL HEARING LOSS                                   | FAMILY PRACTICE              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED SENSORINEURAL HEARING LOSS                                   | OTOLARYNGOLOGIST (ENT)       | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED SENSORINEURAL HEARING LOSS                                   | OTORHINOLARYNGOLOGIST (EENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED SENSORINEURAL HEARING LOSS                                   | PHYSICIAN ASSISTANT          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED SENSORINEURAL HEARING LOSS, TINNITUS RIGHT EAR               | OTOLARYNGOLOGIST (ENT)       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED VISUAL DISTURBANCE   | INTERNAL MEDICINE            | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED VISUAL DISTURBANCE, ANESTHESIA OF SKIN, CERVICALGIA          | INTERNAL MEDICINE            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED VISUAL DISTURBANCE, OTHER ABNORMALITIES OF GAIT AND MOBILITY | FAMILY PRACTICE              | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences   | UNSPECIFIED VISUAL LOSS, ISCHEMIC OPTIC NEUROPATHY LEFT EYE, OTHER DISORDERS OF OPTIC NERVE NEC LEFT EYE   | OPHTHALMOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences   | VESTIBULAR NEURONITIS BILATERAL  | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences   | VOMITING UNSPECIFIED, MALIGNANT NEOPLASM UNSITE RIGHT FEMALE BREAST, Unknown   | ONCOLOGY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences   | WEAKNESS, PARESTHESIA OF SKIN  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences   | WHITE MATTER DISEASE UNSPECIFIED   | NEUROLOGY                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences   | WHITE MATTER DISEASE UNSPECIFIED, SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN (head); without contrast material, followed by contrast material(s) and further sequences   | WHITE MATTER DISEASE UNSPECIFIED, UNSPECIFIED OPTIC NEURITIS   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN STEM W/O & W/DYE  | MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED   | Neurology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN STEM W/O & W/DYE  | OTH TYPES OF NON-HODG LYMPH, EXTRNOD AND SOLID ORGAN SITES   | Hematology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI BRAIN STEM W/O & W/DYE  | UNSPECIFIED VISUAL LOSS  | Neurology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Brain, functional MRI; including test selection and administration of repetitive body part movement and/or visual stimulation, not requiring physician or psychologist administration | INTRACRANL & INTRASPINL PHLEBIT & THROMBOPHLEBIT   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Brain, functional MRI; requiring physician or psychologist administration of entire neurofunctional testing   | ABNORMAL BRAIN SCAN, DIFFUSE LARGE B-CELL LYMPHOMA UNSPECIFIED SITE  | HEMATOLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); with contrast material(s)  | MULTIPLE SCLEROSIS   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); with contrast material(s)  | RADICULOPATHY CERVICAL REGION  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material  |  | NEUROLOGY                          | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material  | ANESTHESIA OF SKIN   | NEUROLOGY                          |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material  | ANESTHESIA OF SKIN   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material  | ANESTHESIA OF SKIN, DISEASE OF SPINAL CORD UNSPECIFIED   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material | ANESTHESIA OF SKIN, RADICULOPATHY CERVICAL REGION  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | ARNOLD-CHIARI SYND W/O SPINA BIFIDA/HYDROCEPHLUS   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | ARNOLD-CHIARI SYND W/O SPINA BIFIDA/HYDROCEPHLUS   | NEUROSURGERY                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICAL DISC D/O W/MYELOPATHY UNS CERV REGION   | FAMILY PRACTICE                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICAL DISC D/O W/MYELOPATHY UNS CERV REGION   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICAL DISC D/O W/RADICULOPATHY UNS CERV RGN, CERVICALGIA  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICAL DISC D/O W/RADICULOPATHY UNS CERV RGN, OTH CERVICAL DISC DEGENERATION UNS CERV REGION, Unknown, Unknown                           | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICAL DISC DISORDER UNS UNS CERVICAL REGION   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICAL DISC DISORDER UNS UNS CERVICAL REGION, CERVICALGIA  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICAL RIB, CERVICOBRACHIAL SYNDROME, RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN, OTHER SPECIFIED JOINT DISORDERS RIGHT SHOULDER | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICAL ROOT DISORDERS NOT ELSEWHERE CLASSIFIED   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | ANESTHESIOLOGY                     | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | FAMILY PRACTICE                    | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | INTERNAL MEDICINE                  |                    | 6                | 6               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | NEUROLOGY                          | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | NEUROSURGERY                       |                    | 4                | 4               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | ORTHOPEDIC SURGERY                 | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | PAIN MANAGEMENT                    | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | RHEUMATOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA  | SURGERY- ORTHOPEDIC                | 3                  | 7                | 7               |  |                          |                        |                      |                 |

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|--|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, ARTHRODESIS STATUS   | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, NEURALGIA AND NEURITIS UNSPECIFIED   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION   | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION, OTHER CHRONIC PAIN   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, OTHER CHRONIC PAIN, Unknown  | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, PAIN IN LEFT SHOULDER  | SURGERY-HAND       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, PAIN IN RIGHT SHOULDER   | PAIN MANAGEMENT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, PAIN IN UNSPECIFIED SHOULDER   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CERVICALGIA, PARESTHESIA OF SKIN, ATYPICAL FACIAL PAIN  | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | COMPRESSION OF BRAIN, SYRINGOMYELIA AND SYRINGOBULBIA   | NEUROSURGERY       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | COMPRESSION OF BRAIN, SYRINGOMYELIA AND SYRINGOBULBIA, Unknown  | SURGERY-NEUROLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | CONGEN MALFORMATION SYND PREDOMINANT INVLV LIMBS, OTHER SPEC DISORDERS SKIN & SUBCUTANEOUS TISSUE, Unknown  | NEUROSURGERY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | Congenital sacral dimple  | Neurology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | DISEASE OF SPINAL CORD UNSPECIFIED  | SURGERY-NEUROLOGY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | DIZZINESS AND GIDDINESS, CERVICALGIA  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY, RADICULOPATHY SITE UNSPECIFIED, CERVICALGIA, PARESTHESIA OF SKIN, ESSENTIAL PRIMARY HYPERTENSION                     | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY, RADICULOPATHY SITE UNSPECIFIED, CERVICALGIA, PARESTHESIA OF SKIN, OTHER CHRONIC PAIN, ESSENTIAL PRIMARY HYPERTENSION | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | DYSPHAGIA UNSPECIFIED, SPINAL STENOSIS CERVICAL REGION  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | FUSION OF SPINE CERVICAL REGION   | RADIOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | FUSION OF SPINE LUMBAR REGION, CERVICALGIA  | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | HYDROMYELIA   | SURGERY-NEUROLOGY  |                    | 1                | 1               |  |                          |                        |                      |                 |



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|--|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material | LOCALIZED SWELLING MASS AND LUMP NECK, CERVICALGIA   | SURGERY-NEUROLOGY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, CERVICALGIA   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, PAIN IN THORACIC SPINE, CERVICALGIA   | PAIN MANAGEMENT    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, PAIN IN RIGHT KNEE, CHRONIC PAIN SYNDROME   | PAIN MANAGEMENT    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, SPINAL STENOSIS CERVICAL REGION   | SURGERY-ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA RIGHT SIDE, RADICULOPATHY CERVICAL REGION  | RHEUMATOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | MONOPLÉGIA UPPER LIMB LEFT NONDOMINANT SIDE  | NEUROLOGY          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | MULTIPLE CONGENITAL EXOSTOSES  | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | MULTIPLE SCLEROSIS   | NEUROLOGY          | 4                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | MULTIPLE SCLEROSIS   | NURSE PRACTITIONER |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | MULTIPLE SCLEROSIS   | RADIOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | MUSCLE WASTING & ATROPHY NEC LEFT LOWER LEG, ANESTHESIA OF SKIN, UNSPECIFIED DISTURBANCES OF SKIN SENSATION, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, URGENCY OF URINATION, DISEASE OF SPINAL CORD UNSPECIFIED, MULTIPLE SCLEROSIS | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | MUSCLE WASTING & ATROPHY NEC RIGHT HAND, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS   | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | NERV ROOT & PLEXUS COMPRESSIONS IN DZ CLASS ELSW   | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | NEURALGIA AND NEURITIS UNSPECIFIED   | NURSE PRACTITIONER |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OCCIPITAL NEURALGIA, INTRACRANL & INTRASPINL PHLEBIT & THROMBOPHLEBIT  | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERV DISC DEGEN CERVICOTHORACIC REGION   | CHIROPRACTOR       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | PAIN MANAGEMENT    | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | SURGERY- ORTHOPEDIC   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, PAIN IN LEFT SHOULDER                            | ORTHOPEDIC SURGERY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, RADICULOPATHY CERVICAL REGION                    | GENERAL PRACTICE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, RADICULOPATHY CERVICAL REGION                    | ORTHOPEDIC SURGERY    |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT | ORTHOPEDIC SURGERY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DISORDERS UNS CERVICAL REGION, OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION  | NEUROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION   | ANESTHESIOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION   | CHIROPRACTOR          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT THOR REGION   | NEUROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION  | INTERNAL MEDICINE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION  | SURGERY- ORTHOPEDIC   | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION, OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION   | FAMILY PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, CERVICALGIA, BRACHIAL PLEXUS DISORDERS          | NEUROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER ABNORMAL INVOLUNTARY MOVEMENTS, ABNORMAL REFLEX  | PEDIATRIC NEUROLOGIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER ABNORMALITIES OF GAIT AND MOBILITY   | FAMILY PRACTICE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER ACQUIRED DEFORMITIES OF RIGHT FOOT, OTHER ACQUIRED DEFORMITIES OF LEFT FOOT                | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER AMNESIA  | NEUROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER CHRONIC PAIN   | PEDIATRICS            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER FORMS OF SCOLIOSIS THORACOLUMBAR REGION, SYRINGOMYELIA AND SYRINGOBULBIA                   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER MUSCLE SPASM   | FAMILY PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER SPONDYLOSIS W/MYELOPATHY CERVICAL REGION   | NEUROSURGERY          |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material | OTHER SPONDYLOSIS W/MYELOPATHY CERVICAL REGION   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, CERVICOBRACHIAL SYNDROME, CERVICALGIA, RADICULOPATHY CERVICOTHORACIC REGION, POSTURAL KYPHOSIS THORACIC REGION, SEGMENTAL & SOMATIC DYSFUNCTION CERVICAL REGION, SEGMENTAL AND SOMATIC DYSFUNCTION OF HEAD REGION, Unknown | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, RADICULOPATHY CERVICAL REGION, OTHER CHRONIC PAIN  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | PARESTHESIA OF SKIN  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | PARESTHESIA OF SKIN  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | POST-TRAUMATIC STRESS DISORDER UNSPECIFIED   | SURGERY-GENERAL                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | PRIMARY OSTEOARTHRITIS LEFT SHOULDER, ENCOUNTER SCREENING MAMMO MALIG NEOPLASM BREAST,   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | PRIMARY OSTEOARTHRITIS UNSPECIFIED SHOULDER  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | QUADRIPLEGIA UNSPECIFIED   | CARDIOLOGIST                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | ANESTHESIOLOGY                     | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | CHIROPRACTOR                       | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | FAMILY PRACTICE                    | 2                  | 4                | 4               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | INTERNAL MEDICINE                  | 1                  | 5                | 5               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | NEUROLOGY                          | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | NEUROSURGERY                       | 4                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | ORTHOPEDIC SURGERY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | PAIN MANAGEMENT                    | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | PCP/Pediatrician                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | PHYSICAL MEDICINE & REHABILITATION | 4                  | 5                | 5               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | PHYSICIAN ASSISTANT                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | RADIOLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | Surgery, Thoracic                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION  | SURGERY- ORTHOPEDIC                | 5                  | 6                | 6               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, CERVICALGIA                                   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, CERVICALGIA                                   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, CERVICALGIA                                   | PAIN MANAGEMENT                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, CERVICALGIA                                   | SURGERY- ORTHOPEDIC                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, CERVICALGIA, PARESTHESIA OF SKIN              | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN                           | FAMILY PRACTICE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN                           | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, Unknown                                       | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICAL REGION, Unknown, Unknown                              | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY CERVICOTHORACIC REGION   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION  | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, OTHER SPECIFIED DISEASES OF SPINAL CORD         | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, RADICULOPATHY CERVICAL REGION                   | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | RADICULOPATHY OCCIPITO-ATLANTO-AXIAL REGION, CERVICALGIA                     | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SCIATICA RIGHT SIDE, OTHER SPONDYLOSIS W/MYELOPATHY CERVICAL REGION          | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION  | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION, CERVICALGIA                                 | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION, CERVICALGIA   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION, DEFORMING DORSOPATHY UNSPECIFIED, OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION, MULTIPLE SCLEROSIS  | SURGERY-NEUROLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION, CERVICALGIA, OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION                          | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION, Unknown   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOLYSIS CERVICAL REGION  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN   | PAIN MANAGEMENT                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN   | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, ARTHRODESIS STATUS   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, CERVICALGIA  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, RADICULOPATHY CERVICAL REGION  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, RADICULOPATHY CERVICAL REGION, CERVICALGIA, OTHER CHRONIC PAIN, NEURALGIA AND NEURITIS UNSPECIFIED | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, SPINAL STENOSIS CERVICAL REGION, CERVICALGIA, POSTURAL KYPHOSIS CERVICOTHORACIC REGION             | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, Unknown  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY THOR RGN, OTH CERVICAL DISC DEGENERATION UNS CERV REGION, DISEASE OF SPINAL CORD UNSPECIFIED                 | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | SYRINGOMYELIA AND SYRINGOBULBIA  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material | UNSPECIFIED VISUAL DISTURBANCE, ANESTHESIA OF SKIN, CERVICALGIA  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material   | VITAMIN D DEFICIENCY UNSPECIFIED, MULTIPLE SCLEROSIS  | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material   | WEAKNESS, CERVICALGIA, PAIN IN LEFT ARM, Unknown  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material   | WHITE MATTER DISEASE UNSPECIFIED  | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material   | WHITE MATTER DISEASE UNSPECIFIED, ABNORMAL IMMUNOLOGICAL FIND IN CEREBROSPINAL FL, MULTIPLE SCLEROSIS | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences |   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN  | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, HEMIPLEGIA UNS AFFECTING LEFT NONDOMINANT SIDE                                    | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, MALIGNANT NEOPLASM OF HEAD FACE AND NECK  | ONCOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, MULTIPLE SCLEROSIS  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | ARNOLD-CHIARI SYND W/O SPINA BIFIDA/HYDROCEPHLUS  | SURGERY-NEUROLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | Cervical disc disorder at C6-C7 level with radiculopathy  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | CERVICALGIA   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | CERVICALGIA   | RHEUMATOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | CERVICALGIA, PARESTHESIA OF SKIN  | Speech Therapy     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | CHRONIC FATIGUE UNSPECIFIED, OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS                           | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS   | NEUROLOGY                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | DIFFUSE LARGE B-CELL LYMPHOMA UNSPECIFIED SITE  | HEMATOLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | DORSALGIA UNSPECIFIED   | HEMATOLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | FOOT DROP LEFT FOOT, MULTIPLE SCLEROSIS   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | MALIG NEOPLASM UPPER-INNER QUAD LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS             | HEMATOLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BASE OF TONGUE  | HEMATOLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAIN, CEREBRAL ANEURYSM NONRUPTURED                   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | MONOPLÉGIA UPPER LIMB AFFECTING UNSPECIFIED SIDE  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | NEUROLOGY                          | 9                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | PHYSICIAN ASSISTANT                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | MUSCLE WEAKNESS GENERALIZED   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS, SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | OTHER ABNORMALITIES OF GAIT AND MOBILITY, PARESTHESIA OF SKIN, MULTIPLE SCLEROSIS  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | OTHER CHRONIC OSTEOMYELITIS UNSPECIFIED SITE   | RHEUMATOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | OTHER DISTURBANCES OF SKIN SENSATION   | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | OTHER MUSCLE SPASM, TREMOR UNSPECIFIED, PARESTHESIA OF SKIN  | NEUROLOGY          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | PAIN IN RIGHT HAND   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | PARESTHESIA OF SKIN  | NEUROLOGY          | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | POSTVIRAL FATIGUE SYNDROME, Unknown  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED DISTURBANCES OF SKIN SENSATION, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | UNSPECIFIED DISTURBANCES OF SKIN SENSATION, PARESTHESIA OF SKIN  | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | WEAKNESS   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | WEAKNESS, PARESTHESIA OF SKIN  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | WHITE MATTER DISEASE UNSPECIFIED   | NEUROLOGY          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | WHITE MATTER DISEASE UNSPECIFIED, OTHER SPONDYLOSIS W/MYELOPATHY CERVICAL REGION, OTH ORGAN/SYS INVLV SYSTEMIC LUPUS ERYTHEMATOSUS   | RHEUMATOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences | WHITE MATTER DISEASE UNSPECIFIED, UNSPECIFIED OPTIC NEURITIS, PAIN IN UNSPECIFIED JOINT  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Cervical Spine, (spinal canal and contents); without contrast material, followed by contrast material(s) and further sequences                            | WHITE MATTER DISEASE UNSPECIFIED, UNSPECIFIED URINARY INCONTINENCE, ATAXIA UNSPECIFIED | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); with contrast material(s)  | BRACHIAL PLEXUS DISORDERS  | HEMATOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); with contrast material(s)  | NEOPLASM OF UNCERTAIN BEHAVIOR OF THYMUS   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast   | BRACHIAL PLEXUS DISORDERS  | ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast   | BRACHIAL PLEXUS DISORDERS  | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast   | FRACTURE ONE RIB RIGHT INITIAL ENCINTR CLOSED FX                                       | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast   | MULTIPLE CONGENITAL EXOSTOSES  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast   | PAIN IN RIGHT SHOULDER   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN  | Plastic Surgery     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | BRACHIAL PLEXUS DISORDERS  | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | BRACHIAL PLEXUS DISORDERS  | ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED ENLARGED LYMPH NODES   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP NECK  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP TRUNK   | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BASE OF TONGUE   | HEMATOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | Other diseases of mediastinum, not elsewhere classified  | SURGERY-THORACIC                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | OTHER DISEASES OF THYMUS   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI CHEST (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences | SOLITARY PULMONARY NODULE  | Cardiac Electrophysiology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI JNT OF LWR EXTRE W/O  | Pain in right knee   | Other                              |                    |                  |                 |  |                          |                        | 1                    |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | LEFT LOWER QUADRANT PAIN, RIGHT LOWER QUADRANT PAIN, OTH SPEC ENTHESOPATHIES LT LOW LIMB EXCLUD FOOT | Rheumatology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | NEUROLOGY                          | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | OTHER ARTICULAR CARTILAGE DISORDERS LEFT HIP   | ORTHOPEDIC SURGERY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | OTHER SPRAIN OF LEFT HIP INITIAL ENCOUNTER   | ORTHOPEDIC - NON SURGICAL          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | OTHER SPRAIN OF LEFT HIP INITIAL ENCOUNTER   | SURGERY- ORTHOPEDIC                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN LEFT HIP   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN LEFT HIP   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN LEFT HIP, UNSPECIFIED INJURY LEFT HIP INITIAL ENCOUNTER                                      | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN LEFT KNEE  | SURGERY- ORTHOPEDIC                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN RIGHT HIP  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN RIGHT HIP  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN RIGHT HIP  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN RIGHT HIP  | SURGERY- NEUROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | PAIN IN RIGHT HIP  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)   | STRAIN MUSCLE FASCIA TENDON RT HIP INITIAL ENC   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; with contrast material(s)    | UNI OSTEOARTHRITIS RSLT HIP DYSPLASIA RT HIP   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)    | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT HIP  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)    | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; with contrast material(s)    | UNS INJURY RT LOWER LEG SUBSEQUENT ENCOUNTER   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) |  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | ACHILLES TENDINITIS LEFT LEG   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | ACHILLES TENDINITIS RIGHT LEG  | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | ACTIVITY GYMNASTICS, STIFFNESS OF RIGHT KNEE NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE, SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC | ORTHOPEDIC SURGERY  | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | ANKYLOSIS LEFT KNEE, EFFUSION LEFT KNEE, PAIN IN LEFT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | ANKYLOSIS RIGHT ANKLE, PAIN IN LEFT ANKLE, OTHER ENTHESOPATHY OF RIGHT FOOT, PRIMARY OSTEOARTHRITIS RIGHT ANKLE AND FOOT   | PODIATRY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | ARTHROPATHY UNSPECIFIED  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | BENIGN NEOPLASM CNCTV OTH SOFT TISS LT LOW LIMB  | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | BILATERAL PRIMARY OSTEOARTHRITIS OF HIP  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | BUCKET-HANDLE TEAR LAT MENISC CURR RT KNEE INIT  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT  | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CERVICALGIA, PAIN IN LEFT HIP  | NURSE PRACTITIONER  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CHONDROMALACIA LEFT KNEE   | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CHONDROMALACIA LEFT KNEE, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CHONDROMALACIA PATELLAE LEFT KNEE  | SURGERY- ORTHOPEDIC | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CHONDROMALACIA PATELLAE LEFT KNEE, PAIN IN RIGHT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CHONDROMALACIA PATELLAE LEFT KNEE, STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE INITIAL                             | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | CHONDROMALACIA PATELLAE RIGHT KNEE   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CHONDROMALACIA PATELLAE RIGHT KNEE   | SURGERY- ORTHOPEDIC | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CHONDROMALACIA PATELLAE RIGHT KNEE, SPRAIN MED COLLATERAL LIGAMENT UNS KNEE INITIAL                  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CHRONIC INSTABILITY OF KNEE LEFT KNEE  | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | COMPLEX TEAR MED MENISCUS CURR RT KNEE INIT ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CONTUSION OF LEFT KNEE INITIAL ENCOUNTER   | PHYSICIAN ASSISTANT |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CONTUSION OF LEFT KNEE INITIAL ENCOUNTER   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CONTUSION OF RIGHT KNEE SUBSEQUENT ENCOUNTER   | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | CYSTIC MENISCUS UNS LATERAL MENISCUS RT KNEE   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | DISPL BICONDYLAR FX LT TIBIA INIT ENC CLOS FX  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | DISPL BIMALLEOL FX LT LOW LEG SUBS CLOS RTN HEAL   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT ANKLE, METATARSALGIA LEFT FOOT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE   | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE, CHONDROMALACIA PATELLAE LEFT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE, PAIN IN LEFT KNEE  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE, PAIN IN LEFT KNEE  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE, PAIN IN LEFT KNEE  | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE, PAIN IN LEFT KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION LEFT KNEE, UNS INJURY UNS LOWER LEG INITIAL ENCOUNTER, PAIN IN LEFT KNEE, SPRAIN OTHER SPEC PARTS LEFT KNEE INITIAL ENC, PAIN INTRL ORTHO PROSTH DEVC IMPL GFT INIT ENC | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION RIGHT ANKLE, PAIN IN RIGHT ANKLE  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION RIGHT KNEE  | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION RIGHT KNEE  | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION UNSPECIFIED KNEE, PERSONAL HX OTH HEALED PHYSICAL INJURY & TRAUMA   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | EFFUSION UNSPECIFIED KNEE, SPRAIN ANT CRUCIATE LIGAMENT UNS KNEE INIT ENC  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE   | Rheumatology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | FALLING JUMP/PUSH HI PLACE UNDET INTENT INIT ENC, UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | GLUTEAL TENDINITIS RIGHT HIP   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | HYPERTROPHY OF INFRAPATELLAR FAT PAD   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | IDIOPATHIC ASEPTIC NECROSIS OF LEFT FEMUR  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | IDIOPATHIC ASEPTIC NECROSIS OF RIGHT FEMUR   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | JUVENILE OSTEOCHONDROSIS OF PATELLA LEFT KNEE  | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | LATERAL SUBLUXATION RT PATELLA SUBSEQUENT ENC NTR  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | LOCALIZED SWELLING MASS & LUMP RIGHT LOWER LIMB, PAIN IN RIGHT ANKLE, STRESS FRACTURE RT FOOT INITIAL ENC FOR FRACTURE   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB, PAIN IN LEFT KNEE  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | LOOSE BODY IN KNEE LEFT KNEE   | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | LOW BACK PAIN, PAIN IN RIGHT HIP   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, PAIN IN RIGHT KNEE, CHRONIC PAIN SYNDROME   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description   | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | MUSCLE WEAKNESS GENERALIZED, PAIN IN LEFT ANKLE, PAIN IN RIGHT ANKLE                               | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | NDSPL BIMALLEOLAR FX LT LOW LEG INIT ENC CLOSED  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | NONDISPLACED FX NAVICULAR RT FT INIT ENC CLOS FX   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OSTEOCHONDRITIS DISSECANS LT ANKLE JNTS LT FOOT  | PODIATRY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH CONGEN MALFORM LOW LIMBS INCL PELVIC GIRDLE  | PODIATRY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH FX UPPER & LOWER RT FIBULA INIT ENC CLOS FX  | PODIATRY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH MENISCUS DERANGEMENTS UNS MENISCUS UNS KNEE  | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH MENISCUS DERANGEMNT UNS LAT MENISCUS RT KNEE   | PREVENTIVE MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH MENISCUS DERANGEMNT UNS LAT MENISCUS RT KNEE   | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC  | SURGERY-ORTHOPEDIC        | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR LAT MENISC CURRNT INJ LT KNEE SEQUELA   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR LAT MENISC CURRNT INJ RT KNEE INIT ENC  | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR LAT MENISC CURRNT INJ RT KNEE SBSQT ENC   | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | DERMATOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | SPORTS MEDICINE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | SURGERY-ORTHOPEDIC        | 5                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC   | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ LT KNEE SEQUELA   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC  | SPORTS MEDICINE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC  | SURGERY-ORTHOPEDIC        | 7                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC   | CARDIOVASCULAR DISEASE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description  | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR MED MENISCUS CURR INJ UNS KNEE INIT ENC  | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTH TEAR UNS MENISCUS CURR INJ RT KNEE INIT ENC   | SURGERY-ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER ACQUIRED DEFORMITIES OF UNSPECIFIED FOOT  | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER CHRONIC PAIN  | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY LEFT ANKLE  | PODIATRY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY LEFT KNEE   | CHIROPRACTOR       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY RIGHT ANKLE   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY RIGHT ANKLE   | PODIATRY           | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY RIGHT ANKLE, PAIN IN RIGHT ANKLE, OTHER CHRONIC PAIN, UNSPECIFIED INJURY RIGHT ANKLE SUBSEQUENT ENCNR | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY RIGHT KNEE  | GENERAL PRACTICE   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY RIGHT KNEE  | SURGERY-ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY RIGHT KNEE, DISPL FX MED CONDYLE RT TIBIA INIT ENC CLOS FX  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY UNSPECIFIED ANKLE   | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INSTABILITY UNSPECIFIED KNEE, BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT                                     | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INTERNAL DERANGEMENTS OF LEFT KNEE  | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER INTERNAL DERANGEMENTS OF LEFT KNEE  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER JUVENILE ARTHRITIS UNSPECIFIED SITE   | RHEUMATOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SPEC INJURIES RT LOWER LEG INITIAL ENCNR  | SPORTS MEDICINE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SPECIFIC JOINT DERANGEMENTS RIGHT HIP NEC   | CHIROPRACTOR       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SPECIFIED JOINT DISORDERS LT ANKLE & FOOT   | SURGERY-PODIATRIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP, LESION OF SCIATIC NERVE RIGHT LOWER LIMB                                     | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SPECIFIED JOINT DISORDERS RIGHT KNEE  | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SPECIFIED JOINT DISORDERS RT ANKLE & FOOT   | ORTHOPEDIC SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SPECIFIED JOINT DISORDERS RT ANKLE & FOOT   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SPECIFIED JOINT DISORDERS UNSPECIFIED HIP   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | OTHER SYNOVITIS & TENOSYNOVITIS LT ANKLE & FOOT   | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE  | ORTHOPEDIC SURGERY                 | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE  | PODIATRY                           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE  | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE  | SURGERY- ORTHOPEDIC                | 4                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE, OTHER CHRONIC PAIN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE, OTHER CHRONIC PAIN, PLANTAR FASCIAL FIBROMATOSIS, PAIN IN LEFT FOOT | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE, PAIN IN LEFT FOOT   | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT ANKLE, PERONEAL TENDINITIS LEFT LEG  | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT FOOT   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT FOOT   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP  | EMERGENCY MEDICINE                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP  | INTERNAL MEDICINE                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP  | PSYCHIATRY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP  | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP  | SURGERY- ORTHOPEDIC                | 6                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP, IDIOPATHIC ASEPTIC NECROSIS OF LEFT FEMUR                             | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | FAMILY PRACTICE                    | 4                  | 7                | 7               |  |                          |                        |                      |                 |



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| Procedure Code Description                                   | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | GENERAL PRACTICE                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | INTERNAL MEDICINE                  |                    | 6                | 6               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | NEUROLOGY                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | ORTHOPEDIC - NON SURGICAL          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | ORTHOPEDIC SURGERY                 | 15                 | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | PEDIATRICS                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | PHYSICIAN ASSISTANT                | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | SPORTS MEDICINE                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE   | SURGERY- ORTHOPEDIC                | 35                 | 6                | 6               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | GENERAL SURGERY                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN   | SURGERY-HAND                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN   | SURGERY- ORTHOPEDIC                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN, UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE                                      | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, OTHER INSTABILITY LEFT KNEE, PAIN IN RIGHT KNEE, OTHER INSTABILITY RIGHT KNEE, CHRONIC PAIN SYNDROME | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, PAIN IN LEFT HIP   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, PAIN IN RIGHT KNEE   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, PAIN IN RIGHT KNEE   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, PAIN IN RIGHT KNEE, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQ ENC   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL, COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC  | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, TEAR ARTICULAR CARTILAGE LT KNEE CURR SUBSQ ENC  | PREVENTIVE MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, Unknown  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, Unknown  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, UNS INJURY LT LOWER LEG INITIAL ENCOUNTER  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, UNS INJURY LT LOWER LEG INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, UNS TEAR UNS MENISCUS CURR INJ LT KNEE INIT ENC  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT LOWER LEG, OTHER JUVENILE ARTHRITIS UNSPECIFIED SITE   | RHEUMATOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE   | INTERNAL MEDICINE   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE   | PODIATRY            | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE   | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE   | SURGERY- ORTHOPEDIC | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE, PAIN IN RIGHT FOOT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE, PATHOLOGICAL FX RT ANKLE INITIAL ENC FRACTURE, SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE, SPRAIN CALCANEOFIBULAR LIG RT ANKLE INITIAL ENC  | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE, SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE, SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT FOOT   | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP  | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP  | INTERNAL MEDICINE                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP  | ORTHOPEDIC SURGERY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP  | SURGERY- ORTHOPEDIC                | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP, OTHER CHRONIC PAIN  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP, OTHER SPRAIN OF RIGHT HIP INITIAL ENCOUNTER                           | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP, TROCHANTERIC BURSITIS RIGHT HIP                                       | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | FAMILY PRACTICE                    | 5                  | 8                | 8               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | INTERNAL MEDICINE                  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | ORTHOPEDIC SURGERY                 | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | PHYSICIAN ASSISTANT                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | SPORTS MEDICINE                    | 4                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | SURGERY- ORTHOPEDIC                | 37                 | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE   | URGENT CARE                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE  | SPORTS MEDICINE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE, OTH TEAR LAT MENISC CURRNT INJ RT KNEE INIT ENC | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description   | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE, OTHER CHRONIC PAIN  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, OTHER CHRONIC PAIN   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, OTHER CHRONIC PAIN   | ORTHOPEDIC SURGERY        | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, OTHER CHRONIC PAIN   | SURGERY- ORTHOPEDIC       | 4                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, OTHER INSTABILITY RIGHT KNEE   | SPORTS MEDICINE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, PAIN IN RIGHT LOWER LEG  | NURSE PRACTITIONER        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, SPRAIN UNSPECIFIED SITE RT KNEE INITIAL ENCNTN   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, Unknown  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT KNEE, UNSPECIFIED SUBLUXATION RT PATELLA INITIAL ENC   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN RIGHT LEG  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED ANKLE, PAIN IN LEFT ANKLE, PAIN IN RIGHT ANKLE   | GENERAL PRACTICE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED HIP  | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED HIP  | CHIROPRACTOR              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED HIP  | SURGERY- ORTHOPEDIC       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED HIP, UNSPECIFIED INJURY LEFT HIP INITIAL ENCOUNTER, OTHER SPRAIN OF LEFT HIP INITIAL ENCOUNTER | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED KNEE   | PAIN MANAGEMENT           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED KNEE   | SURGERY- ORTHOPEDIC       | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED KNEE, UNSPECIFIED SUPERFICIAL INJURY LT KNEE INIT ENC  | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PATELLAR TENDINITIS RIGHT KNEE   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PATELLOFEMORAL DISORDERS LEFT KNEE   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PATELLOFEMORAL DISORDERS RIGHT KNEE  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | PERIPHERAL TEAR MED MENISC CURR RT KNEE INIT ENC  | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PERIPHERAL TEAR MED MENISC CURR RT KNEE SUBSQ   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PERONEAL TENDINITIS RIGHT LEG   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PERONEAL TENDINITIS RIGHT LEG   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PERONEAL TENDINITIS RIGHT LEG, SPRAIN TARSOMETATARSAL LIGAMENT UNS FOOT INITIAL   | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PLANTAR FASCIAL FIBROMATOSIS  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PLANTAR FASCIAL FIBROMATOSIS, CALCANEAL SPUR LEFT FOOT  | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | POSTERIOR TIBIAL TENDINITIS LEFT LEG  | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | POSTERIOR TIBIAL TENDINITIS LEFT LEG  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | PRESENCE OF LEFT ARTIFICIAL HIP JOINT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | RADICULOPATHY LUMBAR REGION   | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | RADICULOPATHY SITE UNSPECIFIED, RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN, NONTRAUMATIC HEMATOMA OF SOFT TISSUE   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | RECURRENT DISLOCATION OF PATELLA LEFT KNEE  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | RIGHT LOWER QUADRANT PAIN   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | RIGHT LOWER QUADRANT PAIN, PAIN IN RIGHT HIP, GLUTEAL TENDINITIS RIGHT HIP, Unknown   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPONTANEOUS RUPTURE FLEXOR TENDONS LT ANKLE FOOT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQ ENC  | SURGERY-ORTHOPEDIC  | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQ ENC, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQT ENC, SPRAIN MED COLLATERAL LIGAMENT LT KNEE SUBSQT    | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC                | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE        | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN ANT CRUCIATE LIGAMENT UNS KNEE INIT ENC  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN CALCANEOFIBULAR LIGAMENT LT ANKLE SEQUELA  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN DELTOID LIGAMENT RT ANKLE INITIAL ENC NTR  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN LAT COLLATERAL LIGAMENT RT KNEE INITIAL  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN LAT COLLATERAL LIGAMENT UNS KNEE INITIAL   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN MED COLLATERAL LIGAMENT RT KNEE SUBSQT   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN MED COLLATERAL LIGAMENT RT KNEE SUBSQT, OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN OF OTHER LIGAMENT OF RIGHT ANKLE SEQUELA   | SURGERY-PODIATRIST                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN OTHER SPEC PARTS RIGHT KNEE INITIAL ENC  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN OTHER SPEC PARTS RIGHT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN SUP TIBIOFIBULAR JNT LIG LT KNEE SUBSQT  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN TIBIOFIBULAR LIGAMENT LT ANKLE INIT ENC  | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN UNS LIGAMENT LEFT ANKLE INITIAL ENCOUNTER  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC  | PEDIATRICS                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC, DISPLACED FX NAVICULAR RT FOOT INIT ENC CLOS FX   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN UNSPECIFIED SITE LT KNEE INITIAL ENC NTR  | SURGERY- ORTHOPEDIC       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN UNSPECIFIED SITE RT KNEE INITIAL ENC NTR  | SPORTS MEDICINE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SPRAIN UNSPECIFIED SITE RT KNEE INITIAL ENC NTR  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STIFFNESS OF LEFT KNEE NOT ELSEWHERE CLASSIFIED  | PHYSICIAN ASSISTANT       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN LEFT ACHILLES TENDON SUBSEQUENT ENCOUNTER   | PODIATRY                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN LT QUAD MUSCLE FASCIA TENDON INITIAL ENC  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN MUSC TEND PERONEAL GROUP LOW LT LEG INIT, OTH FRACTURE UNS LOWER LEG INIT ENC CLOS FX | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN MUSC TEND PERONEAL GROUP LOW RT LEG INIT  | PODIATRY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN MUSCLE FASC TEND POST THIGH RT INIT ENC   | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN MUSCLE FASC TEND POST THIGH UNS INIT ENC  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN MUSCLE FASCIA TENDON LEFT HIP INITIAL ENC   | SURGERY- ORTHOPEDIC       | 4                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN MUSCLE FASCIA TENDON RT HIP SUBSQT ENC  | PEDIATRIC ORTHOPEDIST     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN RIGHT ACHILLES TENDON INITIAL ENCOUNTER   | SURGERY- ORTHOPEDIC       | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRAIN RT QUAD MUSCLE FASCIA TENDON INITIAL ENC  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRESS FRACTURE RT FIBULA INITIAL ENC FRACTURE   | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | STRESS FX RT FEMUR SUBSEQUENT ENC FX RTN HEAL  | SPORTS MEDICINE           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SYNOVIAL CYST POPLITEAL SPACE BAKER LEFT KNEE  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SYNOVIAL CYST POPLITEAL SPACE BAKER UNS KNEE   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | SYNOVITIS AND TENOSYNOVITIS UNSPECIFIED  | SURGERY- ORTHOPEDIC       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | TARSAL TUNNEL SYNDROME LEFT LOWER LIMB, PLANTAR FASCIAL FIBROMATOSIS                         | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | TEAR ARTICULAR CARTILAGE RT KNEE CURR INIT ENC   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT HIP   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | ORTHOPEDIC SURGERY        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | RHEUMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description   | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s) | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | SURGERY- ORTHOPEDIC | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT HIP  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE   | ORTHOPEDIC SURGERY  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE   | SURGERY- ORTHOPEDIC | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJ MUSC FASC TEND POST THIGH RT INITIAL ENC   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER  | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER  | ORTHOPEDIC SURGERY  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER  | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY RT LOWER LEG INITIAL ENCOUNTER  | FAMILY PRACTICE     | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY RT LOWER LEG INITIAL ENCOUNTER  | NURSE PRACTITIONER  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY RT LOWER LEG INITIAL ENCOUNTER  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY RT LOWER LEG INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INJURY RT LOWER LEG INITIAL ENCOUNTER, PAIN IN RIGHT KNEE                                    | NURSE PRACTITIONER  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS INTERNAL DERANGEMENT UNSPECIFIED KNEE, PAIN IN RIGHT KNEE                                    | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS TEAR UNS MENISCUS CURR INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS TEAR UNS MENISCUS CURR INJ LT KNEE INIT ENC, UNS TEAR UNS MENISCUS CURR INJ RT KNEE INIT ENC | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS TEAR UNS MENISCUS CURR INJ LT KNEE SUBSQ   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS TEAR UNS MENISCUS CURR INJ RT KNEE SEQUELA   | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNS TEAR UNS MENISCUS CURR INJ UNS KNEE INIT ENC   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNSPECIFIED ACQUIRED DEFORMITY OF LEFT LOWER LEG   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC   | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNSPECIFIED DISLOCATION OF RIGHT PATELLA SEQUELA   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s) | UNSPECIFIED DISLOCATION RT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty                    | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|---------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED DISLOCATION UNS PATELLA INITIAL ENC  | SURGERY-<br>ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INJURY OF RIGHT ANKLE SEQUELA  | INTERNAL MEDICINE                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INJURY RIGHT ANKLE INITIAL ENCOUNTER   | INTERNAL MEDICINE                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE  | FAMILY PRACTICE                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE  | NURSE<br>PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE  | ORTHOPEDIC<br>SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE  | PREVENTIVE<br>MEDICINE                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE  | SURGERY-<br>ORTHOPEDIC                | 4                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE   | FAMILY PRACTICE                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE   | INTERNAL MEDICINE                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE   | ORTHOPEDIC<br>SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE   | SURGERY-<br>ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE,<br>UNSPECIFIED DISLOCATION LT AC JOINT INITIAL ENC | PHYSICAL MEDICINE<br>& REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | INF & INFLAM REACT INTRL LT KNEE PROSTH SUB<br>ENC   | SURGERY-<br>ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS & LUMP RIGHT LOWER<br>LIMB, PAIN IN RIGHT HIP                              | RHEUMATOLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM CONNECTIVE & SOFT<br>TISSUE UNS   | NEUROLOGY                             | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM CONNECTIVE & SOFT<br>TISSUE UNS   | SURGERY-<br>ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | NEOPLASM OF UNS BEHAVIOR BONE SOFT TISSUE &<br>SKIN  | SURGERY-<br>ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | OSTEOLYSIS UNSPECIFIED SITE  | FAMILY PRACTICE                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | OTHER CYST OF BONE LEFT ANKLE AND FOOT   | PODIATRY                              | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, any joint; without contrast material(s), followed by contrast material(s) and further sequences | OTHER ENTHESOPATHY OF LEFT FOOT, POSTERIOR TIBIAL TENDINITIS LEFT LEG, CELLULITIS OF LEFT LOWER LIMB                            | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s), followed by contrast material(s) and further sequences | PAIN IN LEFT ANKLE  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s), followed by contrast material(s) and further sequences | PAIN IN LEFT HIP, OTHER CHRONIC PAIN  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s), followed by contrast material(s) and further sequences | PAIN IN LEFT KNEE, CONTUSION OF LEFT KNEE INITIAL ENCOUNTER   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s), followed by contrast material(s) and further sequences | PAIN IN LEFT TOES   | RHEUMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s), followed by contrast material(s) and further sequences | PAIN UNSPECIFIED  | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s), followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST   | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, any joint; without contrast material(s), followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | ABNORMAL FINDINGS ON DIAGNOSTIC IMAGING OF LIMBS, STRAIN MUSCLE FASC TEND POST THIGH RT INIT ENC, PAIN IN RIGHT THIGH           | SPORTS MEDICINE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | ACHILLES TENDINITIS RIGHT LEG   | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | ANESTHESIA OF SKIN, PAIN IN LEFT FOOT, LESION OF PLANTAR NERVE RIGHT LOWER LIMB, PAIN IN RIGHT FOOT                             | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | BENIGN LIPOMATOUS NEOPLASM SKIN & SUBQ LEFT LEG   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | CALCANEAL SPUR RIGHT FOOT   | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | ENCOUNTER OBSERV OTH SUSPCT DZ & COND RULED OUT   | ORTHOPEDIC SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | FLAT FOOT PES PLANUS ACQUIRED LEFT FOOT, POSTERIOR TIBIAL TENDINITIS LEFT LEG, STRESS FRACTURE LT FOOT INITIAL ENC FOR FRACTURE | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | FOOT DROP LEFT FOOT   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | GANGLION RIGHT ANKLE AND FOOT, Unknown,   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | LESION OF PLANTAR NERVE LEFT LOWER LIMB   | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)  | LESION OF PLANTAR NERVE RIGHT LOWER LIMB  | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, other than joint; without contrast material(s) | METATARSALGIA LEFT FOOT   | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | METATARSALGIA LEFT FOOT   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | METATARSALGIA RIGHT FOOT  | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | MUSCLE WASTING & ATROPHY NEC RIGHT THIGH, PAIN IN RIGHT THIGH   | PAIN MANAGEMENT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | NONDPL FX 5TH METATARSAL LT FT INIT ENC CLOS FX   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | NON-PRSS CHR ULCR OTH PRT UNS FOOT FAT LAY EXPOS, OTHER ACUTE OSTEOMYELITIS UNS ANKLE & FOOT, CUTANEOUS ABSCESS OF RIGHT FOOT | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | OSTEOCHONDROPATHY UNS UNSPECIFIED ANKLE & FOOT  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | OTHER CHRONIC PAIN, PAIN IN LEFT FOOT   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | OTHER SPECIFIED JOINT DISORDERS RT ANKLE & FOOT   | ORTHOPEDIC SURGERY  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | OTHER SPECIFIED MONONEUROPATHIES LT LOWER LIMB  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | OTHER SPECIFIED SOFT TISSUE DISORDERS, PAIN IN RIGHT THIGH  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT ANKLE, OTHER INSTABILITY LEFT ANKLE  | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT ANKLE, PERONEAL TENDINITIS LEFT LEG  | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT ANKLE, STRESS FRACTURE LT FOOT INITIAL ENC FOR FRACTURE  | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT FOOT   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT FOOT   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT FOOT   | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT FOOT   | SURGERY- ORTHOPEDIC | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT FOOT, DISPLACED FX 5TH METATARSAL LT FT SUBSQ FX RTN   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT LEG  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT LEG, STRAIN OTH MUSC TEND POST GROUP LOW UNS LEG INIT, STRAIN OTH MUSCLES TENDON LOW LEG LT LEG INITIAL          | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT LOWER LEG, OTHER JUVENILE ARTHRITIS UNSPECIFIED SITE   | RHEUMATOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT LOWER LEG, PAIN IN RIGHT LOWER LEG   | SPORTS MEDICINE     | 2                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT THIGH  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT THIGH, PAIN IN LEFT LEG, STRESS FRACTURE LT FEMUR INITIAL ENC FRACTURE | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN LEFT THIGH, PAIN IN RIGHT THIGH   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT ANKLE   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT ANKLE   | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT ANKLE, OTHER SPECIFIED DISORDERS OF BONE ANKLE AND FOOT               | GENERAL PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT FOOT  | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT FOOT  | PODIATRY            | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT FOOT  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT FOOT, Unknown   | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT HIP   | SURGERY-ORTHOPEDIC  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT LEG   | PEDIATRICS          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT LOWER LEG   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT LOWER LEG   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT LOWER LEG, BITTEN BY DOG SEQUELA                                      | SPORTS MEDICINE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PAIN IN UNSPECIFIED ANKLE   | SURGERY-GENERAL     |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PERONEAL TENDINITIS RIGHT LEG, SPRAIN TARSOMETATARSAL LIGAMENT UNS FOOT INITIAL     | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PLANTAR FASCIAL FIBROMATOSIS  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | PLANTAR FASCIAL FIBROMATOSIS, PAIN IN LEFT FOOT                                     | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | SPONTANEOUS RUPTURE EXTENSOR TENDONS LT ANK FOOT                                    | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | STRAIN MUSCLE FASC TEND POST THIGH RT INIT ENC                                      | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | STRAIN MUSCLE FASC TEND POST THIGH RT SUB ENC                                       | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | STRAIN OTH MUSC TEND ANK FT LEVL RT INITIAL ENC                                     | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s) | STRAIN OTH MUSC TEND POST GROUP LOW LT LEG INIT                                     | PHYSICIAN ASSISTANT |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, other than joint; without contrast material(s)   | STRAIN UNS MUSCLE FASC TEND THIGH RT INITIAL ENC  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)   | STRAIN UNS MUSCLE TENDON LOW LEG LT LEG INIT ENC  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)   | STRESS FRACTURE LT FEMUR INITIAL ENC FRACTURE   | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)   | STRESS FRACTURE LT FOOT INITIAL ENC FOR FRACTURE  | PODIATRY                           | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)   | STRESS FRACTURE RT FOOT INITIAL ENC FOR FRACTURE  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)   | STRESS FRACTURE RT TIBIA INITIAL ENC FRACTURE   | ORTHOPEDIC - NON SURGICAL          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)   | STRESS FX RT FEMUR SUBSEQUENT ENC FX RTN HEAL   | SPORTS MEDICINE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)   | UNS INJ MUSC FASC TEND POST THIGH LT INITIAL ENC  | SURGERY-ORTHOPEDIC                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s)   | UNSPECIFIED OPEN WOUND UNS LOWER LEG INITIAL ENC  | INFECTIOUS DISEASES                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences |   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB  | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED  | SURGERY-GENERAL                    |                    | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED, LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB          | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS   | HEMATOLOGY AND ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | OSTEOMYELITIS UNSPECIFIED   | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | OTH HYPERTROPHIC OSTEOARTHROPATHY MULTIPLE SITES, PAIN IN LEFT TOES, ARTHROPATHIC PSORIASIS UNSPECIFIED | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | OTHER INFLAMMATORY AND IMMUNE MYOPATHIES NEC  | PEDIATRIC NEUROLOGIST              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | OTHER SPECIFIED SOFT TISSUE DISORDERS, PAIN IN RIGHT THIGH  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences      | PAIN IN LEFT FOOT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences      | PAIN IN LEFT LOWER LEG, PAIN IN RIGHT LOWER LEG   | RHEUMATOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lower Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences      | SOFT TISSUE DISORDER UNSPECIFIED, Unknown   | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI LUMBAR SPINE W/O DYE   | FRACTURE OF FOURTH LUMBAR VERTEBRA  | Imaging             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences |   | Rheumatology        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | , Spinal stenosis, lumbar region without neurogenic claud                                       | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN  | NEUROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | ANKYLOSING SPONDYLITIS SAC & SACROCOCCYGEAL RGN   | RHEUMATOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | ARTHRODESIS STATUS  | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | CHRONIC PAIN DUE TO TRAUMA  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | DIFFUSE LARGE B-CELL LYMPHOMA UNSPECIFIED SITE  | HEMATOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | DIZZINESS AND GIDDINESS, RADICULOPATHY LUMBAR REGION, Unknown                                   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | DORSALGIA UNSPECIFIED   | HEMATOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | FUSION OF SPINE LUMBAR REGION   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | LOW BACK PAIN   | GENERAL PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | LOW BACK PAIN   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | LOW BACK PAIN, MALIGNANT NEOPLASM OF PROSTATE   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | LOW BACK PAIN, OTHER ABNORMALITIES OF GAIT AND MOBILITY, RADICULOPATHY LUMBAR REGION, Unknown   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | LUMBAGO WITH SCIATICA LEFT SIDE, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, OTHER IDIOPATHIC SCOLIOSIS LUMBAR REGION, ARTHRODESIS STATUS | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, Unknown   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF RECTUM  | HEMATOLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | RADIATION ONCOLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG  | HEMATOLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UPPER LOBE UNS BRONCHUS/LUNG   | RADIATION ONCOLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MUSCLE WASTING & ATROPHY NEC RIGHT THIGH, LUMBAGO WITH SCIATICA LEFT SIDE, LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MUSCLE WEAKNESS GENERALIZED   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | Family Medicine                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTHER CHRONIC OSTEOMYELITIS UNSPECIFIED SITE  | RHEUMATOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTHER CHRONIC PAIN  | RHEUMATOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTHER SPECIFIED DISEASES OF SPINAL CORD   | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | RADICULOPATHY LUMBAR REGION   | CHIROPRACTOR        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | RADICULOPATHY LUMBAR REGION   | Family Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | RADICULOPATHY LUMBAR REGION   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | RADICULOPATHY LUMBAR REGION   | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | RADICULOPATHY LUMBAR REGION   | PAIN MANAGEMENT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | RADICULOPATHY LUMBAR REGION   | SURGERY- ORTHOPEDIC |                    | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | RADICULOPATHY LUMBAR REGION, ARTHRODESIS STATUS   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | SACROILITIS NOT ELSEWHERE CLASSIFIED  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | SCIATICA RIGHT SIDE, WEDGE COMPRS FRACTURE 5TH LUMBAR VERT SEQUELA, MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | WEDGE COMPRS FX 1ST LUMBAR VERT INIT ENC CLOS FX, WEDGE COMPRS FX T11-T12 VERT INIT ENC CLOS FX   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | WEDGE COMPRS FX T9-T10 VERT INIT ENC CLOS FX  | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); with contrast material(s)   |   | EMERGENCY MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); with contrast material(s)   | LOW BACK PAIN   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); with contrast material(s)   | LOW BACK PAIN   | PAIN MANAGEMENT     |                    | 1                | 1               |  |                          |                        |                      |                 |



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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); with contrast material(s) | LUMBAGO WITH SCIATICA RIGHT SIDE   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); with contrast material(s) | PERSONAL HX OTH DZ MUSCULOSKEL SYS&CONECTV TISS  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material |  | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material |  | FAMILY PRACTICE                    | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material |  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material |  | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material |  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material |  | SURGERY- ORTHOPEDIC                | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region with neurogenic claudication                                    | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region with neurogenic claudication                                    | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region with neurogenic claudication                                    | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region without neurogenic claudication                                 | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region without neurogenic claudication                                 | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region without neurogenic claudication                                 | NEUROLOGY                          | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region without neurogenic claudication                                 | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region without neurogenic claudication                                 | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | , Spinal stenosis, lumbar region without neurogenic claudication                                 | RHEUMATOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | ABN FIND ON DX IMAG OTH PART MUSCULOSKELETAL SYS, LOCALIZED HYPERTRICHOSIS                       | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | ANESTHESIA OF SKIN, LUMBAGO WITH SCIATICA RIGHT SIDE   | ORTHOPEDIC - NON SURGICAL          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | ANESTHESIA OF SKIN, LUMBAGO WITH SCIATICA RIGHT SIDE, PARESTHESIA OF SKIN, OTHER CHRONIC PAIN    | NEUROLOGY                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN  | Cardiac Electrophysiology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | ANESTHESIA OF SKIN, RADICULOPATHY LUMBAR REGION, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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| MRI Lumbar Spine, (spinal canal and contents); without contrast material | ANESTHESIA OF SKIN, RETENTION OF URINE UNSPECIFIED  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | ARTHRODESIS STATUS  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | CERVICALGIA   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | CERVICALGIA   | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | CERVICALGIA   | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | CERVICALGIA, PAIN IN LEFT HIP   | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | CHRONIC PAIN DUE TO TRAUMA  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | CNCTV TISS DISC STENOS IV FORAMINA ABD OTH RGNs   | FAMILY PRACTICE                    | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | COLLAPSED VERT NEC LUMB RGN INIT ENC FX   | FAMILY PRACTICE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | COLLAPSED VERT NEC LUMB RGN INIT ENC FX   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | COLLAPSED VERT NEC LUMB SUBSQT ENC FX W/HEALING   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | COLLAPSED VERT NEC THOR RGN INIT ENC FX   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | CONGEN MALFORMATION SYND PREDOMINANT INVLV LIMBS, OTHER SPEC DISORDERS SKIN & SUBCUTANEOUS TISSUE, Unknown                  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | Congenital sacral dimple  | Neurology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | DORSALGIA UNSPECIFIED, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | DORSALGIA UNSPECIFIED, OTHER SYMPTOMS & SIGNS INVOLVING THE NS, RADICULOPATHY LUMBAR REGION, RADICULOPATHY SITE UNSPECIFIED | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | DORSALGIA UNSPECIFIED, RADICULOPATHY LUMBAR REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | DORSALGIA UNSPECIFIED, RADICULOPATHY LUMBAR REGION  | ORTHOPEDIC SURGERY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | FOOT DROP UNSPECIFIED FOOT  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | FULL INCONTINENCE OF FECES, UNSPECIFIED URINARY INCONTINENCE, RADICULOPATHY LUMBAR REGION                                   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | HYDROMYELIA   | SURGERY-NEUROLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INFLAMMATORY POLYARTHROPATHY  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LS RGN   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, RADICULOPATHY LUMBAR REGION                      | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, SEGMENTAL & SOMATIC DYSFUNCTION OF LUMBAR REGION | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, TROCHANTERIC BURSITIS LEFT HIP                   | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | CARDIOVASCULAR DISEASE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | FAMILY PRACTICE                    | 5                  | 5                | 5               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | GENERAL PRACTICE                   | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | INTERNAL MEDICINE                  |                    | 7                | 7               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | NEUROLOGY                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | NEUROSURGERY                       | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | ORTHOPEDIC SURGERY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | PAIN MANAGEMENT                    | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | PEDIATRIC ORTHOPEDIST              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN  | PHYSICAL MEDICINE & REHABILITATION | 5                  | 2                | 2               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN   | PHYSICIAN ASSISTANT                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN   | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN   | SURGERY-NEUROLOGY                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN   | SURGERY-ORTHOPEDIC                 | 7                  | 8                | 8               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, ANORECTAL FISTULA  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, CERVICALGIA  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, CERVICALGIA, OTHER CHRONIC PAIN  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, LUMBAGO WITH SCIATICA LEFT SIDE  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, LUMBAGO WITH SCIATICA LEFT SIDE  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, LUMBAGO WITH SCIATICA LEFT SIDE, RADICULOPATHY LUMBOSACRAL REGION, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION, LUMBAR SPINA BIFIDA WITHOUT HYDROCEPHALUS, SCOLIOSIS UNSPECIFIED, POSTLAMINECTOMY SYNDROME NEC                        | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS  | SURGERY-NEUROLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, OTHER CHRONIC PAIN  | Rheumatology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, OTHER CHRONIC PAIN   | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, OTHER CHRONIC PAIN   | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, PAIN IN RIGHT HIP  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, PAIN IN THORACIC SPINE   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, PAIN IN THORACIC SPINE   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, PAIN IN THORACIC SPINE, CERVICALGIA  | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, PAIN IN UNSPECIFIED JOINT  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | NEUROSURGERY                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | SURGERY- ORTHOPEDIC                | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, RADICULOPATHY LUMBOSACRAL REGION, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN                                 | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, RADICULOPATHY SITE UNSPECIFIED   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, RADICULOPATHY THORACIC REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SACROCOCCYGEAL DISORDERS NEC   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SACROILIITIS NOT ELSEWHERE CLASSIFIED  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SACROILIITIS NOT ELSEWHERE CLASSIFIED  | SPORTS MEDICINE                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SCIATICA UNSPECIFIED SIDE, RADICULOPATHY LUMBAR REGION   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SPINA BIFIDA OCCULTA, SPONDYLOLYSIS SITE UNSPECIFIED   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SPONDYLOLISTHESIS LUMBAR REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, PAIN IN RIGHT KNEE, CHRONIC PAIN SYNDROME                        | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY THOR RGN, PAIN IN THORACIC SPINE, OTHER SPONDYLOSIS LUMBAR REGION, Unknown | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LOW BACK PAIN, UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE   | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE   | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE   | FAMILY PRACTICE                    | 3                  | 4                | 4               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE   | INTERNAL MEDICINE                  |                    | 6                | 6               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE   | ORTHOPEDIC SURGERY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE   | PAIN MANAGEMENT                    |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE   | PHYSICAL MEDICINE & REHABILITATION |                    |                  | 2               | 2                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE   | SPORTS MEDICINE                    |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, ANESTHESIA OF SKIN, LUMBAGO WITH SCIATICA RIGHT SIDE   | SURGERY- ORTHOPEDIC                |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, LUMBAGO WITH SCIATICA RIGHT SIDE   | INTERNAL MEDICINE                  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, LUMBAGO WITH SCIATICA RIGHT SIDE   | SURGERY- ORTHOPEDIC                |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, OTH CERVICAL DISC DEGENERATION UNS CERV REGION, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION, Unknown | FAMILY PRACTICE                    |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | INTERNAL MEDICINE                  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION, OTHER CHRONIC PAIN                                      | FAMILY PRACTICE                    |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION, OTHER CHRONIC PAIN                                      | INTERNAL MEDICINE                  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA LEFT SIDE, SPINAL STENOSIS CERVICAL REGION  | SURGERY- ORTHOPEDIC                |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA RIGHT SIDE  | FAMILY PRACTICE                    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA RIGHT SIDE  | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA RIGHT SIDE  | RHEUMATOLOGY                       |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA RIGHT SIDE  | SPORTS MEDICINE                    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE   | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE   | EMERGENCY MEDICINE                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE   | FAMILY PRACTICE                    |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE   | INTERNAL MEDICINE                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE, OTHER CHRONIC PAIN   | INTERNAL MEDICINE                  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | MULTIPLE CONGENITAL EXOSTOSES  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | MUSCLE SPASM OF BACK, LOW BACK PAIN, RADICULOPATHY LUMBAR REGION   | SURGERY- ORTHOPEDIC                |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | MUSCLE SPASM OF BACK, LOW BACK PAIN, SCIATICA RIGHT SIDE, ABNORMAL REFLEX, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LS RGN, OTHER SPECIFIC ARTHROPATHIES NEC OTHER SPEC SITE, Unknown | FAMILY PRACTICE                    |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | MUSCLE SPASM OF BACK, OTHER CHRONIC PAIN   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | MUSCLE WASTING & ATROPHY NEC LEFT LOWER LEG, UNSPECIFIED DISTURBANCES OF SKIN SENSATION  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | MUSCLE WASTING & ATROPHY NEC RIGHT THIGH, RADICULOPATHY LUMBAR REGION, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION   | PAIN MANAGEMENT                    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | PAIN MANAGEMENT                    |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DISORDERS UNS CERVICAL REGION, OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION  | NEUROLOGY                          |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | ANESTHESIOLOGY                     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | INTERNAL MEDICINE                  |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | NURSE PRACTITIONER                 |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | ORTHOPEDIC SURGERY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | PAIN MANAGEMENT                    | 2                  | 2                | 2               |  |                          |                        |                      |                 |

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|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION   | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DEGEN LUMBOSACRAL REGION, SPONDYLOLISTHESIS SITE UNSPECIFIED, OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION  | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | FAMILY PRACTICE                    |                    | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | ORTHOPEDIC SURGERY                 | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | PREVENTIVE MEDICINE                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION  | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION, PAIN IN RIGHT LEG                                 | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, STRESS FRACTURE PELVIS INITIAL ENC FOR FRACTURE                                | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT THOR REGION, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN                               | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION, OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION                                  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH SPONDYLOSIS W/RADICULOPATHY LUMBOSACRAL RGN, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LS RGN                                 | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |



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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, PAIN IN RIGHT LEG   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER ACQUIRED DEFORMITIES OF RIGHT FOOT, OTHER ACQUIRED DEFORMITIES OF LEFT FOOT  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER CHRONIC PAIN   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER CHRONIC PAIN   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER CHRONIC PAIN   | PEDIATRICS                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER CHRONIC PAIN   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER CHRONIC PAIN   | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED  | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER FORMS OF SCOLIOSIS THORACOLUMBAR REGION, SYRINGOMYELIA AND SYRINGOBULBIA   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER SPECIFIED DORSOPATHIES LUMBAR REGION   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER SPONDYLOSIS LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | OTHER SPONDYLOSIS WITH MYELOPATHY LUMBAR REGION  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | PAIN IN LEFT LEG, PAIN IN RIGHT LEG  | INTERNAL MEDICINE                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | PAIN IN RIGHT HIP  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | PAIN IN RIGHT HIP  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, RADICULOPATHY CERVICAL REGION, OTHER CHRONIC PAIN  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | PAIN UNSPECIFIED, LUMBAGO WITH SCIATICA LEFT SIDE, LUMBAGO WITH SCIATICA RIGHT SIDE, PAIN IN LEFT LEG, PAIN IN RIGHT LEG | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | PARESTHESIA OF SKIN  | INTERNAL MEDICINE                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | PARESTHESIA OF SKIN, MULTIPLE SCLEROSIS  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | POLYNEUROPATHY UNSPECIFIED   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | POSTLAMINECTOMY SYNDROME NEC   | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | POSTLAMINECTOMY SYNDROME NEC   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | QUADRIPLÉGIA UNSPECIFIED  | CARDIOLOGIST                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | ANESTHESIOLOGY                     | 2                  | 5                | 5               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | CHIROPRACTOR                       |                    | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | FAMILY PRACTICE                    | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | INTERNAL MEDICINE                  | 6                  | 6                | 6               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | NEUROLOGY                          |                    | 3                | 3               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | NEUROSURGERY                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | ORTHOPEDIC SURGERY                 | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | PAIN MANAGEMENT                    | 6                  | 8                | 8               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | PHYSICAL MEDICINE & REHABILITATION | 5                  | 7                | 7               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | SURGERY-NEUROLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION   | SURGERY-ORTHOPEDIC                 | 14                 | 16               | 16              |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS      | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, OTHER SPECIFIED DISEASES OF SPINAL CORD              | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, PAIN IN RIGHT HIP                                    | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, PAIN IN THORACIC SPINE                               | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, PAIN IN THORACIC SPINE                               | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, PARESTHESIA OF SKIN                                  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, RADICULOPATHY CERVICAL REGION                             | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, RADICULOPATHY THORACIC REGION                             | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, SPONDYLOLISTHESIS CERVICAL REGION                         | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, SPONDYLOLISTHESIS LUMBAR REGION                           | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, SPONDYLOLISTHESIS LUMBAR REGION                           | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN          | SURGERY- ORTHOPEDIC                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBOSACRAL REGION   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBOSACRAL REGION   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBOSACRAL REGION   | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBOSACRAL REGION   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBOSACRAL REGION, PARESTHESIA OF SKIN                                  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBOSACRAL REGION, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN       | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY SITE UNSPECIFIED   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RADICULOPATHY SITE UNSPECIFIED, RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN, Unknown | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RETENTION OF URINE UNSPECIFIED   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RIGHT LOWER QUADRANT PAIN  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | RIGHT LOWER QUADRANT PAIN, PAIN IN RIGHT HIP, GLUTEAL TENDINITIS RIGHT HIP, Unknown    | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SACROCOCCYGEAL DISORDERS NEC, UNSPECIFIED INJURY LOWER BACK INITIAL ENCOUNTER          | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SACROILIITIS NOT ELSEWHERE CLASSIFIED  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA LEFT SIDE   | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA LEFT SIDE   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA LEFT SIDE   | INTERNAL MEDICINE                  |                    | 3                | 3               |  |                          |                        |                      |                 |

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|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA LEFT SIDE, LOW BACK PAIN   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA LEFT SIDE, LOW BACK PAIN   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA LEFT SIDE, RADICULOPATHY LUMBAR REGION   | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA LEFT SIDE, SCIATICA RIGHT SIDE, RADICULOPATHY LUMBAR REGION  | NEUROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA RIGHT SIDE   | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA RIGHT SIDE   | INTERNAL MEDICINE   | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA RIGHT SIDE, OTHER SPONDYLOSIS W/MYELOPATHY CERVICAL REGION   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA RIGHT SIDE, SPONDYLOLISTHESIS LUMBOSACRAL REGION   | CHIROPRACTOR        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA RIGHT SIDE, WEDGE COMPRS FRACTURE 5TH LUMBAR VERT SEQUELA, MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA UNSPECIFIED SIDE   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SCIATICA UNSPECIFIED SIDE   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS LUMBOSACRAL REGION  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS LUMBOSACRAL REGION, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN                     | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOLISTHESIS LUMBAR REGION   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOLISTHESIS LUMBAR REGION   | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOLISTHESIS LUMBAR REGION   | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOLISTHESIS LUMBOSACRAL REGION  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOLYSIS LUMBAR REGION   | PREVENTIVE MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOLYSIS SITE UNSPECIFIED  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, Unknown   | PAIN MANAGEMENT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | ANESTHESIOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, OTHER CHRONIC PAIN, Unknown, Unknown  | SURGERY-NEUROLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LS RGN  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | STRAIN MUSCLE FASCIA & TENDON LOW BACK SUBSQT   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | UNS THOR THORACOLUMBAR LUMBOSACRAL IV DISC D/O  | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | UNS THOR THORACOLUMBAR LUMBOSACRAL IV DISC D/O, RADICULOPATHY LUMBAR REGION, RADICULOPATHY THORACIC REGION, LONG TERM CURRENT USE OF OPIATE ANALGESIC | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | UNSPECIFIED DISTURBANCES OF SKIN SENSATION, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | UNSTEADINESS ON FEET, RADICULOPATHY LUMBAR REGION   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | WEDGE COMPRS FX 1ST LUMBAR VERT INIT ENC CLOS FX, WEDGE COMPRS FX T11-T12 VERT INIT ENC CLOS FX   | PEDIATRICS                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Lumbar Spine, (spinal canal and contents); without contrast material  | WEDGE COMPRS FX UNS LUMBAR VERT INIT ENC CLOS FX  | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI NECK SPINE W/O & W/DYE  | OTHER SYMPTOMS AND SIGNS INVOLVING THE NERVOUS SYSTEM   | General Practice                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck without contrast  | UNSPECIFIED PAPILDEMA   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; with contrast material(s)  | MALIGNANT NEOPLASM OF NASOPHARYNX UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences |   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | ALVEOLITIS OF JAWS  | CARDIOVASCULAR                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | ATYPICAL FACIAL PAIN  | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | CERVICALGIA, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|---|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | DISORDER OF PARATHYROID GLAND UNSPECIFIED   | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | GLAUCOMA SEC OTH EYE D/O RT EYE MODERATE STAGE, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | HEMANGIOMA OF SKIN AND SUBCUTANEOUS TISSUE  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | HORNERS SYNDROME  | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | HYPERPROLACTINEMIA  | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP HEAD   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP NECK   | OPTOMETRY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP NECK, PAIN IN RIGHT SHOULDER                                 | SPORTS MEDICINE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT MELANOMA OF OTHER PART OF TRUNK, OTHER DISEASES OF SALIVARY GLANDS                  | PLASTIC SURGERY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS   | SURGERY, ORAL & MAXILLOFACIAL | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF MOUTH UNSPECIFIED   | RADIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF PAROTID GLAND   | RADIATION ONCOLOGY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | HEMATOLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, MALIGNANT NEOPLASM OF TONGUE UNSPECIFIED              | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | NEOPLASM OF UNCERTAIN BEHAVIOR CEREBRAL MENINGES                           | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | NEOPLASM OF UNCERTAIN BEHAVIOR PITUITARY GLAND, HYPOTHYROIDISM UNSPECIFIED | ENDOCRINOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | NEUROFIBROMATOSIS TYPE 1   | PEDIATRICS             | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | OCULAR HYPERTENSION BILATERAL, BENIGN INTRACRANIAL HYPERTENSION            | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | OCULAR PAIN RIGHT EYE  | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | OTHER DISEASES OF SALIVARY GLANDS  | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | OTHER DISORDERS OF OPTIC NERVE NEC LEFT EYE                                | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | OTHER DISORDERS OPTIC NERVE NEC UNSPECIFIED EYE                            | PSYCHIATRY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | OTHER VISUAL DISTURBANCES, UNSPECIFIED EXOPHTHALMOS                        | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | Pulsatile tinnitus, right ear  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | TESTICULAR HYPOFUNCTION  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | UNQUALIFIED VISUAL LOSS BOTH EYES  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | UNSPECIFIED HEARING LOSS RIGHT EAR   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | UNSPECIFIED OPTIC NEURITIS   | NEUROLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | UNSPECIFIED OPTIC NEURITIS, UNSPECIFIED PAPILEDEMA, Unknown                | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | UNSPECIFIED PAPILLEDEMA   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | UNSPECIFIED PAPILLEDEMA   | OPHTHALMOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Orbit, Face, and Neck; without contrast material(s), followed by contrast material(s) and further sequences | UNSPECIFIED VISUAL LOSS, ISCHEMIC OPTIC NEUROPATHY LEFT EYE, OTHER DISORDERS OF OPTIC NERVE NEC LEFT EYE                                    | OPHTHALMOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; with contrast material(s)   | Elevated prostate specific antigen [PSA]  | UROLOGY                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; with contrast material(s)   | FX UNS PART NECK LT FEMUR INITIAL ENC CLOS FX, PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OVARY, AGE-RELATED OSTEOPOROSIS W/O CURRNT PATH FX | RHEUMATOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; with contrast material(s)   | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | HEMATOLOGY AND ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; with contrast material(s)   | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY AND ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; with contrast material(s)   | UNSPECIFIED ABDOMINAL PAIN, STRAIN MUSCLE FASCIA & TENDON ABD INITIAL ENCNR   | SURGERY-COLON/RECTAL               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  |   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | ABN FIND ON DX IMAG OTH PART MUSCULOSKELETAL SYS, LOCALIZED HYPERTRICHOSIS  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | ACUTE STRESS REACTION   | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | CONSTIPATION UNSPECIFIED  | SURGERY-GENERAL                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | IDIOPATHIC ASEPTIC NECROSIS OF UNSPECIFIED FEMUR  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | INFLAMMATORY POLYARTHROPATHY  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | LEIOMYOMA OF UTERUS UNSPECIFIED   | OBSTETRICS & GYNECOLOGY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | LOW BACK PAIN   | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | LOW BACK PAIN   | GENERAL PRACTICE                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | LOW BACK PAIN, SACROILIITIS NOT ELSEWHERE CLASSIFIED  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS  | ONCOLOGY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | MALIGNANT NEOPLASM OF PROSTATE  | ONCOLOGY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS, MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS  | HEMATOLOGY AND ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)  | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, STRESS FRACTURE PELVIS INITIAL ENC FOR FRACTURE  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |



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| MRI PELVIS; without contrast material(s)   | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP  | SURGERY-GENERAL                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | OTHER ACQUIRED DEFORMITIES OF RIGHT FOOT, OTHER ACQUIRED DEFORMITIES OF LEFT FOOT                                  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | OTHER DORSALGIA  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS                 | HEMATOLOGY AND ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | OTHER SPECIFIED MONONEUROPATHIES   | PSYCHIATRY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | PAIN IN RIGHT HIP  | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | PAIN IN UNSPECIFIED HIP  | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | PAIN IN UNSPECIFIED HIP, UNSPECIFIED INJURY LEFT HIP INITIAL ENCOUNTER, OTHER SPRAIN OF LEFT HIP INITIAL ENCOUNTER | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | PELVIC AND PERINEAL PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | PELVIC AND PERINEAL PAIN, MALIGNANT NEOPLASM PELVIC BONES SACRUM & COCCYX  | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | PLACENTA ACCRETA SECOND TRIMESTER, MALFORMATION PLACENTA UNS UNSPECIFIED TRIMESTER                                 | OBSTETRICS & GYNECOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | PSORIASIS UNSPECIFIED  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | RADICULOPATHY LUMBAR REGION  | ANESTHESIOLOGY                     | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | RADICULOPATHY LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | SACROCOCCYGEAL DISORDERS NEC   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | SACROCOCCYGEAL DISORDERS NEC   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | SACROCOCCYGEAL DISORDERS NEC, UNSPECIFIED INJURY LOWER BACK INITIAL ENCOUNTER                                      | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | SACROILIITIS NOT ELSEWHERE CLASSIFIED  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | STRAIN MUSCLE FASC TEND POST THIGH RT SUB ENC  | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s)   | UNSPECIFIED URINARY INCONTINENCE   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences |  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences |  | OBSTETRICS & GYNECOLOGY            | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | , Unsp intestnl obst, unsp as to partial versus complete obst  | SURGERY-COLON/RECTAL               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ABDOMINAL DISTENSION GASEOUS, UNSPECIFIED ABDOMINAL PAIN   | GASTROENTEROLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM   | Gastroenterology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, LEIOMYOMA OF UTERUS UNSPECIFIED              | OBSTETRICS & GYNECOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ABNORMAL UTERINE & VAGINAL BLEEDING UNSPECIFIED, BENIGN NEOPLASM CNCTV & OTHER SOFT TISSUE UNS | OBSTETRICS & GYNECOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | AGENESIS AND APLASIA OF CERVIX   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ANAL ABSCESS   | SURGERY-COLON/RECTAL      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ANAL ABSCESS, ANAL FISTULA   | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ANAL FISTULA   | SURGERY-COLON/RECTAL      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ANAL FISTULA   | SURGERY-GENERAL           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ANESTHESIA OF SKIN   | NEUROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ANKYLOSING SPONDYLITIS SAC & SACROCOCCYGEAL RGN  | RHEUMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ANORECTAL FISTULA  | SURGERY-COLON/RECTAL      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ARTERIOVENOUS MALFORMATION OF RENAL VESSEL   | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | Atypical small acinar proliferation of prostate  | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | BENIGN NEOPLASM CNCTV & OTHER SOFT TISSUE UNS  | OBSTETRICS & GYNECOLOGY   | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | COUGH, MALIGNANT NEOPLASM OF RECTUM  | HEMATOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE OF LARGE INTESTINE WITH FISTULA   | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE OF LARGE INTESTINE WITH FISTULA   | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE OF LARGE INTESTINE WITH FISTULA   | SURGERY-COLON/RECTAL      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE SMALL & LARGE INTEST W/UNS COMP   | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE SMALL & LARGE INTESTINE W/FIST  | GASTROENTEROLOGY          | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE SMALL INTESTINE W/O COMP  | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE SMALL INTESTINE W/O COMP, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM      | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE UNS W/OTHER COMPLICATION, OTHER PSORIASIS                                       | DERMATOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE UNS WITHOUT COMPLICATIONS   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | CROHNS DISEASE UNS WITHOUT COMPLICATIONS  | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | DIARRHEA UNSPECIFIED  | Rheumatology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ELEVATED C-REACTIVE PROTEIN CRP, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM   | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | Elevated prostate specific antigen [PSA]  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | Elevated prostate specific antigen [PSA]  | Surgery, Plastic              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | Elevated prostate specific antigen [PSA]  | UROLOGY                       | 15                 | 6                | 6               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | Elevated prostate specific antigen [PSA], Abnormal findings on diagnostic imaging of other specified body structures                        | UROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ENCOUNTER SCREENING MALIGNANT NEOPLASM PROSTATE   | UROLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ENLARGED PROSTATE W/O LOWER URINARY TRACT SX, MALIGNANT NEOPLASM OF PROSTATE  | SURGERY- ORTHOPEDIC           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | EPIGASTRIC PAIN, NAUSEA WITH VOMITING UNSPECIFIED   | GASTROENTEROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | FAMILY HISTORY OF MALIGNANT NEOPLASM OF PROSTATE, Unknown   | UROLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | FX UNS PART NECK LT FEMUR INITIAL ENC CLOS FX, PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OVARY, AGE-RELATED OSTEOPOROSIS W/O CURRNT PATH FX | RHEUMATOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | INDURATION PENIS PLASTICA   | UROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE  | FAMILY PRACTICE               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE  | OBSTETRICIAN AND GYNECOLOGIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, CHRONIC SALPINGITIS, Unknown  | REPRODUCTIVE ENDOCRINOLOGY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, MALIGNANT NEOPLASM OF PROSTATE  | UROLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, OTHER SPEC ABNORMAL UTERINE & VAGINAL BLEEDING  | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | INTRAHEPATIC BILE DUCT CARCINOMA  | SURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | LEIOMYOMA OF UTERUS UNSPECIFIED   | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | LEIOMYOMA OF UTERUS UNSPECIFIED   | OBSTETRICS & GYNECOLOGY       | 4                  | 2                | 2               |  |                          |                        |                      |                 |

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| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | LEIOMYOMA OF UTERUS UNSPECIFIED   | RADIOLOGY               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | LEIOMYOMA OF UTERUS UNSPECIFIED   | RADIOLOGY - DIAGNOSTIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | LIVER TRANSPLANT STATUS   | HEPATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | LOW BACK PAIN, ELEVATED ERYTHROCYTE SEDIMENTATION RATE, PAIN IN UNSPECIFIED JOINT, VITAMIN D DEFICIENCY UNSPECIFIED, OTHER CHRONIC PAIN, PAIN IN RIGHT FOOT | RHEUMATOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | LUMBAGO WITH SCIATICA RIGHT SIDE, GENETIC SUSCEPTIBILITY TO OTHER DISEASE   | RHEUMATOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN  | Speech Therapy          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF ANAL CANAL  | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF LATERAL WALL OF BLADDER   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF VULVA  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF PROSTATE  | RADIATION ONCOLOGY      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF PROSTATE  | RADIOLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF PROSTATE  | UROLOGY                 | 7                  | 4                | 4               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OF VULVA UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | HEMATOLOGY AND ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | NEOPLASM OF UNCERTAIN BEHAVIOR OF PROSTATE, NODULAR PROS W/O LOWER URINARY TRACT SYMPTOMS, Unknown  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | NEOPLASM OF UNS BEHAVIOR BONE SOFT TISSUE & SKIN  | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | Neoplasm of unspecified behavior of other genitourinary organ   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | NOCTURIA, ENLARGED PROSTATE W/LOWER URINARY TRACT SUMPTOMS  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | NODULAR PROS W/O LOWER URINARY TRACT SYMPTOMS   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | NODULAR PROSTATE W/ LOWER URINARY TRACT SYMPTOMS, Unknown   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | NONINFECTIVE GASTROENTERITIS & COLITIS UNS, OTHER CONSTIPATION  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OBSTRUCTIVE AND REFLUX UROPATHY UNSPECIFIED   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL, ABNORMAL UTERINE & VAGINAL BLEEDING UNSPECIFIED | Pediatric Surgery       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTH NONINFLAMM D/O OVARY FALLOP TUBE & BROAD LIG   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTH SLEEP D/O NOT DUE SBSTNC/KNOWN PHYSIOLG COND   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTHER BENIGN NEOPLASM OF UTERUS UNSPECIFIED  | OBSTETRICS & GYNECOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTHER BENIGN ENDOCRINE TUMORS  | RADIATION ONCOLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTHER RETENTION OF URINE, Unknown  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTHER SPECIFIED DISEASES OF ANUS AND RECTUM  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTHER SPECIFIED DISEASES OF ANUS AND RECTUM, RECTAL ABSCESS                                    | SURGERY-COLON/RECTAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | OTHER SPECIFIED NONINFLAMMATORY DISORDERS UTERUS   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | PELVIC AND PERINEAL PAIN   | OBSTETRICS & GYNECOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | PELVIC AND PERINEAL PAIN, MALIGNANT NEOPLASM PELVIC BONES SACRUM & COCCYX                      | SURGERY-ORTHOPEDIC      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | PELVIC AND PERINEAL PAIN, PERSONAL HISTORY OF HODGKIN LYMPHOMA, Unknown                        | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | PELVIC AND PERINEAL PAIN, POLYCYSTIC OVARIAN SYNDROME  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | POLYP OF CERVIX UTERI, LEIOMYOMA OF UTERUS UNSPECIFIED   | GYNECOLOGY ONCOLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | POLYP OF CORPUS UTERI, Unknown   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | SACROCOCCYGEAL DISORDERS NEC   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST         | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | SOLITARY BONE CYST LEFT PELVIS   | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ULCERATIVE CHRONIC PANCOLITIS W/O COMPLICATIONS  | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences | ULCERATIVE CHRONIC RECTOSIGMOIDITIS W/O COMP   | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |

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| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences                                   | ULCERATIVE COLITIS UNS W/UNS COMPLICATIONS  | GASTROENTEROLOGY             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences                                   | UNI OSTEOARTHRITIS RSLT HIP DYSPLASIA RT HIP  | PREVENTIVE MEDICINE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences                                   | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT HIP  | SURGERY- ORTHOPEDIC          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences                                   | Unspecified ovarian cyst, left side   | OBSTETRICS & GYNECOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences                                   | Unspecified ovarian cyst, right side  | OBSTETRICS & GYNECOLOGY      | 4                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences                                   | Unspecified ovarian cyst, unspecified side  | OBSTETRICS & GYNECOLOGY      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences                                   | URETHRAL DIVERTICULUM   | UROLOGY                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI PELVIS; without contrast material(s), followed by contrast material(s) and further sequences                                   | WEAKNESS  | PEDIATRIC NEUROLOGIST        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Temporomandibular joint(s), TMJ  | ABNORMAL JAW CLOSURE  | DENTIST- ANESTHESIOLOGIST    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Temporomandibular joint(s), TMJ  | Articular disc disorder of bilateral temporomandibular joint                                    | ORAL / MAXILLOFACIAL SURGERY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Temporomandibular joint(s), TMJ  | ATYPICAL FACIAL PAIN  | DENTISTRY                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Temporomandibular joint(s), TMJ  | LOCALIZED SWELLING MASS AND LUMP NECK   | SURGERY- ORTHOPEDIC          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Temporomandibular joint(s), TMJ  | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | ABN FIND ON DX IMAG OTH PART MUSCULOSKELETAL SYS  | COLON AND RECTAL SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | CHRONIC FATIGUE UNSPECIFIED, OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS                     | NEUROLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG | NEUROLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | DIFFUSE LARGE B-CELL LYMPHOMA UNSPECIFIED SITE  | HEMATOLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | DORSALGIA UNSPECIFIED   | HEMATOLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED   | INTERNAL MEDICINE            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | FOOT DROP LEFT FOOT, MULTIPLE SCLEROSIS   | NEUROSURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | HEMANGIOMA UNSPECIFIED SITE   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP TRUNK  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MALIGNANT NEOPLASM UPPER LOBE UNS BRONCHUS/LUNG   | RADIATION ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAIN, CEREBRAL ANEURYSM NONRUPTURED                   | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MULTIPLE SCLEROSIS  | NEUROLOGY          | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | MUSCLE WEAKNESS GENERALIZED   | NEUROSURGERY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS  | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS, PARESTHESIA OF SKIN                             | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTHER ABNORMALITIES OF GAIT AND MOBILITY, PARESTHESIA OF SKIN, MULTIPLE SCLEROSIS               | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTHER CHRONIC OSTEOMYELITIS UNSPECIFIED SITE  | RHEUMATOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | OTHER CHRONIC PAIN  | RHEUMATOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | PARESTHESIA OF SKIN   | NEUROLOGY          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | WEDGE COMPRS FX 1ST LUMBAR VERT INIT ENC CLOS FX, WEDGE COMPRS FX T11-T12 VERT INIT ENC CLOS FX | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | WEDGE COMPRS FX T9-T10 VERT INIT ENC CLOS FX  | NEUROSURGERY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | WHITE MATTER DISEASE UNSPECIFIED  | NEUROLOGY          | 2                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Thoracic Spine, (spinal canal and contents), without contrast material, followed by contrast material(s) and further sequences | WHITE MATTER DISEASE UNSPECIFIED, UNSPECIFIED URINARY INCONTINENCE, ATAXIA UNSPECIFIED   | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); with contrast material(s)   | LOCALIZED SWELLING MASS AND LUMP TRUNK   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | ABN FIND ON DX IMAG OTH PART MUSCULOSKELETAL SYS, MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS      | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | CERVICAL RIB, CERVICOBRACHIAL SYNDROME, RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN, OTHER SPECIFIED JOINT DISORDERS RIGHT SHOULDER | CHIROPRACTOR        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | COLLAPSED VERT NEC THOR RGN INIT ENC FX  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | COLLAPSED VERT NEC THOR RGN INIT ENC FX  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | COLLAPSED VERTEBRA NEC SITE UNS INIT ENC FX  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | CONGEN MALFORMATION SYND PREDOMINANT INVLV LIMBS, OTHER SPEC DISORDERS SKIN & SUBCUTANEOUS TISSUE, Unknown                                 | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | Congenital sacral dimple   | Neurology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | DORSALGIA UNSPECIFIED, OTH INTERVERTEBRAL DISC DEGEN THORACIC REGION   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | DORSALGIA UNSPECIFIED, PAIN IN THORACIC SPINE  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | DORSALGIA UNSPECIFIED, RADICULOPATHY LUMBAR REGION   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION  | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | HYDROMYELIA  | SURGERY- NEUROLOGY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | LOW BACK PAIN  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | LOW BACK PAIN, PAIN IN THORACIC SPINE  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | LOW BACK PAIN, PAIN IN THORACIC SPINE  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | LOW BACK PAIN, PAIN IN THORACIC SPINE, CERVICALGIA   | PAIN MANAGEMENT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | LOW BACK PAIN, RADICULOPATHY THORACIC REGION   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material   | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY THOR RGN, PAIN IN THORACIC SPINE, OTHER SPONDYLOSIS LUMBAR REGION, Unknown          | PAIN MANAGEMENT     | 1                  |                  |                 |  |                          |                        |                      |                 |



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|--|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | ANESTHESIOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | MULTIPLE CONGENITAL EXOSTOSES  | ORTHOPEDIC SURGERY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | MULTIPLE SCLEROSIS   | NEUROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | MUSCLE WASTING & ATROPHY NEC LEFT LOWER LEG, ANESTHESIA OF SKIN, UNSPECIFIED DISTURBANCES OF SKIN SENSATION, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, URGENCY OF URINATION, DISEASE OF SPINAL CORD UNSPECIFIED, MULTIPLE SCLEROSIS | NEUROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION   | ANESTHESIOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTH FRACTURE T11-T12 VERT INIT ENC CLOS FRACTURE   | SURGERY- ORTHOPEDIC   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT THOR REGION   | NEUROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTH INTERVERTEBRAL DISC DISPLACEMENT THOR REGION, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | ORTHOPEDIC SURGERY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTH SPONDYLOSIS W/RADICULOPATHY THORACIC REGION, RADICULOPATHY THORACIC REGION   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTHER ABNORMAL INVOLUNTARY MOVEMENTS, ABNORMAL REFLEX  | PEDIATRIC NEUROLOGIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTHER ABNORMALITIES OF GAIT AND MOBILITY   | FAMILY PRACTICE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTHER ABNORMALITIES OF GAIT AND MOBILITY   | Rheumatology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTHER ACQUIRED DEFORMITIES OF RIGHT FOOT, OTHER ACQUIRED DEFORMITIES OF LEFT FOOT  | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTHER CHRONIC PAIN   | PEDIATRICS            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | OTHER FORMS OF SCOLIOSIS THORACOLUMBAR REGION, SYRINGOMYELIA AND SYRINGOBULBIA   | SURGERY- ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE   | ANESTHESIOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE   | FAMILY PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE   | INTERNAL MEDICINE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE   | NEUROLOGY             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE   | NURSE PRACTITIONER    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE   | PAIN MANAGEMENT       | 2                  | 2                | 2               |  |                          |                        |                      |                 |

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|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, CERVICALGIA  | SURGERY-NEUROLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, CERVICOBRACHIAL SYNDROME, CERVICALGIA, RADICULOPATHY CERVICOTHORACIC REGION, POSTURAL KYPHOSIS THORACIC REGION, SEGMENTAL & SOMATIC DYSFUNCTION CERVICAL REGION, SEGMENTAL AND SOMATIC DYSFUNCTION OF HEAD REGION, Unknown | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, PERSONAL HISTORY OTHER MALIGNANT NEOPLASM KIDNEY, PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN   | ONCOLOGY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, RADICULOPATHY CERVICAL REGION, OTHER CHRONIC PAIN  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | PAIN IN THORACIC SPINE, RADICULOPATHY THORACIC REGION, CYST OF KIDNEY ACQUIRED   | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | QUADRIPLEGIA UNSPECIFIED   | CARDIOLOGIST                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, OTHER SPECIFIED DISEASES OF SPINAL CORD   | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, PAIN IN THORACIC SPINE  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, PAIN IN THORACIC SPINE  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY LUMBAR REGION, RADICULOPATHY THORACIC REGION   | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY THORACIC REGION  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY THORACIC REGION  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY THORACIC REGION  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY THORACIC REGION  | PAIN MANAGEMENT                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY THORACIC REGION  | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY THORACIC REGION  | SURGERY-NEUROLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | RADICULOPATHY THORACOLUMBAR REGION   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | SPINAL STENOSIS CERVICAL REGION, DEFORMING DORSOPATHY UNSPECIFIED, OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY THOR RGN  | NURSE PRACTITIONER        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY THOR RGN  | SURGERY- ORTHOPEDIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY THOR RGN, OTH CERVICAL DISC DEGENERATION UNS CERV REGION, DISEASE OF SPINAL CORD UNSPECIFIED                  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | STRAIN MUSCLE & TENDON BACK WALL THORAX INIT ENC  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | UNS THOR THORACOLUMBAR LUMBOSACRAL IV DISC D/O, RADICULOPATHY LUMBAR REGION, RADICULOPATHY THORACIC REGION, LONG TERM CURRENT USE OF OPIATE ANALGESIC | PAIN MANAGEMENT           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | WEDGE COMPRS FX 1ST LUMBAR VERT INIT ENC CLOS FX, WEDGE COMPRS FX T11-T12 VERT INIT ENC CLOS FX   | PEDIATRICS                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | WEDGE COMPRS FX UNS THOR VERT INIT ENC CLOS FX  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Thoracic Spine, (spinal canal and contents); without contrast material | WHITE MATTER DISEASE UNSPECIFIED, ABNORMAL IMMUNOLOGICAL FIND IN CEREBROSPINAL FL, MULTIPLE SCLEROSIS   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | BRACHIAL PLEXUS DISORDERS   | HEMATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | DISEASE OF SPINAL CORD UNSPECIFIED  | SURGERY- ORTHOPEDIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | IMPINGEMENT SYNDROME OF LEFT SHOULDER   | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | IMPINGEMENT SYNDROME OF RIGHT SHOULDER  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | OTH INJ MUSC TEND ROTAT CUFF LT SHLDR INIT ENC  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | OTHER ARTICULAR CARTILAGE DISORDERS RT SHOULDER   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | OTHER INSTABILITY LEFT SHOULDER   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | OTHER INSTABILITY RIGHT SHOULDER  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | OTHER INSTABILITY RIGHT SHOULDER  | SURGERY- ORTHOPEDIC       |                    | 3                |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | OTHER SHOULDER LESIONS LEFT SHOULDER, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BURSITIS OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER            | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | OTHER SPRAIN OF RIGHT ELBOW INITIAL ENCOUNTER   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)                  | PAIN IN LEFT SHOULDER   | FAMILY PRACTICE           |                    | 2                | 2               |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description   | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN LEFT SHOULDER  | ORTHOPEDIC SURGERY        | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN LEFT SHOULDER  | SURGERY-ORTHOPEDIC        | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN LEFT SHOULDER, PAIN IN RIGHT SHOULDER  | SURGERY-ORTHOPEDIC        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN LEFT WRIST   | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT ELBOW, ULNAR COLLATERAL LIG SPRAIN RT ELBOW INITIAL, UNSPECIFIED DISLOC RT ULNOHUMERAL JOINT INITIAL, DSPL FX MEDIAL EPICONDYLE RT HUMERUS SEQUELA | SPORTS MEDICINE           | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT SHOULDER   | FAMILY PRACTICE           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT SHOULDER   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT SHOULDER   | SPORTS MEDICINE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT SHOULDER   | SURGERY-ORTHOPEDIC        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT SHOULDER, UNS DISORDER SYNOVIUM & TENDON RT SHOULDER, UNS INJURY RT SHOULDER UPPER ARM INITIAL ENCNR   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT SHOULDER, UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT WRIST  | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | PAIN IN RIGHT WRIST  | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | RECURRENT DISLOCATION UNSPECIFIED SHOULDER   | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER   | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT  | SURGERY-ORTHOPEDIC        | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | TRAUMATIC RUPTURE UNS ULNAR COLLATERAL LIG INIT  | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; with contrast material(s)    | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | ABNORMAL FINDINGS ON DIAGNOSTIC IMAGING OF LIMBS, DISORDER OF BONE UNSPECIFIED   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | ADHESIVE CAPSULITIS OF LEFT SHOULDER   | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | ADHESIVE CAPSULITIS OF LEFT SHOULDER, UNS DISORDER SYNOVIUM & TENDON LT UPPER ARM  | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | ANTERIOR DISLOCATION RT HUMERUS INITIAL ENC  | SURGERY-ORTHOPEDIC        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s) | ANTERIOR DISLOCATION RT ULNOHUMERAL JOINT INIT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | BICIPITAL TENDINITIS LEFT SHOULDER  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | BICIPITAL TENDINITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | BICIPITAL TENDINITIS RIGHT SHOULDER   | SURGERY-ORTHOPEDIC  |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | BRACHIAL PLEXUS DISORDERS   | ONCOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | BURSITIS OF LEFT SHOULDER, UNS DISORDER SYNOVIUM & TENDON LT SHOULDER   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | BURSITIS OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | CERVICALGIA, PAIN IN LEFT SHOULDER  | SURGERY-HAND        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | CHONDROMALACIA PATELLAE LEFT KNEE, STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE INITIAL            | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | CHRONIC PAIN SYNDROME   | CHIROPRACTOR        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT  | SURGERY-ORTHOPEDIC  | 5                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | CHIROPRACTOR        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | SURGERY-ORTHOPEDIC  | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | CRAMP AND SPASM, PAIN IN LEFT SHOULDER  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | DSPLCD FX BDY SCAPULA RT SHLDR INIT ENC CLOS FX   | SURGERY-HAND        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | EPIDERMAL CYST  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | FX UNS PART UNS CLAV INIT ENC CLOS FRACTURE, FX UNS PART RT CLAV SUBSEQUENT ENC FX W/RTN HLNG, STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF LEFT SHOULDER   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF LEFT SHOULDER   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF LEFT SHOULDER, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT   | Surgery, Orthopedic | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description   | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF LEFT SHOULDER, MEDIAL EPICONDYLITIS LEFT ELBOW                           | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF LEFT SHOULDER, SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER          | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | ORTHOPEDIC SURGERY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | Surgery, Vascular                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | SURGERY- ORTHOPEDIC                | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | IMPINGEMENT SYNDROME OF UNSPECIFIED SHOULDER, UNS DISORDER SYNOVIUM & TENDON UNS UPPER ARM       | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LAC MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LATERAL EPICONDYLITIS LEFT ELBOW   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LATERAL EPICONDYLITIS RIGHT ELBOW  | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LATERAL EPICONDYLITIS RIGHT ELBOW  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LATERAL EPICONDYLITIS RIGHT ELBOW  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LESION OF ULNAR NERVE RIGHT UPPER LIMB   | HAND SURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LOCALIZED EDEMA, ADHESIVE CAPSULITIS OF LEFT SHOULDER, PAIN IN LEFT ARM, PAIN IN LEFT UPPER ARM  | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LOCALIZED SWELLING MASS & LUMP RIGHT UPPER LIMB  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB, PAIN IN LEFT FINGERS                           | SURGERY-HAND                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | MEDIAL EPICONDYLITIS RIGHT ELBOW   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | NDSPLC FX DIST POLE NVICLR BN RT WRST INT CLO FX   | ORTHOPEDIC - NON SURGICAL          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | NEURALGIA AND NEURITIS UNSPECIFIED   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTH INJURY M&T OTH PART BICPS LT ARM INIT ENC  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s) | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS LEFT SHOULDER, MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED, ENCOUNTER SCREENING MAMMO MALIG NEOPLASM BREST | FAMILY PRACTICE        |                    |                  | 1               | 1                                      |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, RADICULOPATHY CERVICAL REGION, PAIN IN LEFT SHOULDER  | PREVENTIVE MEDICINE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER INSTABILITY RIGHT ELBOW  | Cardiovascular Disease | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SHOULDER LESIONS LEFT SHOULDER   | SPORTS MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SHOULDER LESIONS LEFT SHOULDER   | SURGERY-HAND           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SHOULDER LESIONS LEFT SHOULDER, BURSITIS OF LEFT SHOULDER  | SURGERY-HAND           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SHOULDER LESIONS RIGHT SHOULDER  | ORTHOPEDIC SURGERY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SPEC INJURIES LT WRIST HAND FINGERS INIT   | SURGERY-HAND           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SPEC INJURIES LT WRIST HAND FINGERS INIT, PAIN IN LEFT WRIST   | SURGERY-HAND           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SPEC INJURIES RT WRIST HAND FINGERS INIT   | HAND SURGERY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SPECIFIC ARTHROPATHIES NEC LEFT SHOULDER   | ORTHOPEDIC SURGERY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SPECIFIED DISORDERS TENDON RIGHT SHOULDER  | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SPECIFIED DORSOPATHIES CERVICAL REGION, RADICULOPATHY CERVICAL REGION, OTHER INSTABILITY LEFT SHOULDER, EFFUSION UNSPECIFIED JOINT, STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, BURSITIS OF LEFT SHOULDER       | CHIROPRACTOR           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SPECIFIED SPRAIN OF RIGHT WRIST SUBSQT ENC   | SURGERY-HAND           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | OTHER SPRAIN UNS ELBOW SUBSEQUENT ENCOUNTER, SPRAIN INTERPHALANGEAL JOINT RT THUMB INITIAL, UNS FX LOWER END RT RADIUS INITIAL ENC CLOSED FX   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT ELBOW   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT ELBOW   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT ELBOW   | RHEUMATOLOGY           |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT ELBOW   | SPORTS MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT ELBOW, OTHER CHRONIC PAIN   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT HIP   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER  | EMERGENCY MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER  | FAMILY PRACTICE     | 1                  | 6                | 6               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER  | INTERNAL MEDICINE   | 1                  | 5                | 5               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER  | Nephrology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER  | ORTHOPEDIC SURGERY  | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER  | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER  | SPORTS MEDICINE     | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER  | SURGERY- ORTHOPEDIC | 14                 | 6                | 6               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, OTHER CHRONIC PAIN  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, OTHER CHRONIC PAIN  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, OTHER CHRONIC PAIN  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, OTHER CHRONIC PAIN, UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, OTHER SHOULDER LESIONS LEFT SHOULDER, OTHER CHRONIC PAIN, ADHESIVE CAPSULITIS OF LEFT SHOULDER, ANTERIOR SUBLUXATION LT HUMERUS INITIAL ENCNT | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, PAIN IN RIGHT SHOULDER  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, PAIN IN RIGHT SHOULDER  | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, UNS INJURY RT SHOULDER UPPER ARM INITIAL ENCNT  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT SHOULDER, UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT WRIST   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT WRIST   | SURGERY-GENERAL     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN LEFT WRIST   | SURGERY- ORTHOPEDIC | 3                  |                  |                 |  |                          |                        |                      |                 |



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|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ANKLE, SPRAIN CALCANEOFIBULAR LIG RT ANKLE INITIAL ENC | PODIATRY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ARM  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ELBOW  | ANESTHESIOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ELBOW  | HAND SURGERY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ELBOW  | INTERNAL MEDICINE         |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ELBOW  | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ELBOW  | ORTHOPEDIC SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ELBOW  | PHYSICIAN ASSISTANT       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ELBOW  | SPORTS MEDICINE           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT ELBOW  | SURGERY- ORTHOPEDIC       | 6                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT HIP, OTHER BURSITIS OF HIP RIGHT HIP                   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER   | CHIROPRACTOR              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER   | GASTROENTEROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER   | INTERNAL MEDICINE         | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER   | NURSE PRACTITIONER        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER   | ORTHOPEDIC SURGERY        | 4                  | 3                | 3               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER   | PREVENTIVE MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER   | SURGERY- ORTHOPEDIC       | 15                 | 6                | 6               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, ADHESIVE CAPSULITIS OF RIGHT SHOULDER        | ORTHOPEDIC SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, ADHESIVE CAPSULITIS OF RIGHT SHOULDER        | SURGERY- ORTHOPEDIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, BICIPITAL TENDINITIS RIGHT SHOULDER          | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, CALCIFIC TENDINITIS OF LEFT SHOULDER         | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, IMPINGEMENT SYNDROME OF UNSPECIFIED SHOULDER | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description  | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, OTHER CHRONIC PAIN  | Family Medicine           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, OTHER CHRONIC PAIN  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, OTHER CHRONIC PAIN  | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, OTHER CHRONIC PAIN  | PEDIATRICS                |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, OTHER CHRONIC PAIN  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, PAIN IN LEFT ELBOW  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, PAIN IN RIGHT ARM, UNS FX RT FOREARM INITIAL ENC CLOS FRACTURE                        | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER NEC   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC                                      | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, UNS DISORDER SYNOVIUM & TENDON RT SHOULDER  | ORTHOPEDIC SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, UNS INJ MUSC TEND ROTAT CUFF RT SHLDR INIT ENC, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER | INTERNAL MEDICINE         |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT SHOULDER, UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT                                      | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT WRIST   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT WRIST   | HAND SURGERY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT WRIST   | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT WRIST   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT WRIST   | Pediatrics                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT WRIST   | Rheumatology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT WRIST   | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN RIGHT WRIST   | SURGERY- ORTHOPEDIC       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED ELBOW   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED SHOULDER  | FAMILY PRACTICE           |                    | 2                | 2               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED SHOULDER  | SPORTS MEDICINE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PAIN IN UNSPECIFIED SHOULDER  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                                   | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s) | PARESTHESIA OF SKIN, OTHER SPECIFIED SOFT TISSUE DISORDERS, PAIN IN UNSPECIFIED LIMB              | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PARESTHESIA OF SKIN, PAIN IN RIGHT WRIST, PAIN IN RIGHT HAND                                      | PEDIATRICS          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | PRIMARY OSTEOARTHRITIS RIGHT WRIST  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | RADIAL COLLATERAL LIG SPRAIN RT ELBOW INITIAL   | SURGERY-HAND        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | RADIAL STYLOID TENOSYNOVITIS DE QUERVAIN  | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | RADICULOPATHY CERVICAL REGION, CERVICALGIA  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | SPONTANEOUS RUPTURE OF FLEXOR TENDONS RIGHT HAND  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | SPRAIN RADIOCARPAL JOINT LT WRIST INITIAL ENC   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | STRAIN MUSC & TEND ROTATOR CUFF LT SHLDR SUB ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | STRAIN MUSC & TEND ROTATOR CUFF LT SHLDR SUB ENC  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | STRAIN MUSC FASC TEND OTH PART BICPS LA INIT ENC  | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC   | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | STRN MUSC FASC TEND LNG HD BICPS RT ARM INIT ENC, IMPINGEMENT SYNDROME OF RIGHT SHOULDER          | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, UNS INJURY RT SHOULDER UPPER ARM INITIAL ENCNT  | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | TRAUMATIC RUPTURE RT ULNAR COLLATERAL LIG INIT  | SURGERY-HAND        | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s) | TRAUMATIC RUPTURE RT ULNAR COLLATERAL LIG INIT   | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | ULNAR COLLATERAL LIG SPRAIN RT ELBOW INITIAL   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | ULNAR COLLATERAL LIG SPRAIN RT ELBOW INITIAL   | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE  | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS INJ MUSC TEND ROTAT CUFF LT SHLDR INIT ENC   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS INJURY LT SHOULDER UPPER ARM SUBSEQUENT ENC  | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS INJURY M&T OTH PART BICPS LT ARM INIT ENC  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS INJURY RT SHOULDER UPPER ARM INITIAL ENCNT   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS INJURY RT SHOULDER UPPER ARM INITIAL ENCNT   | SURGERY-<br>ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | ORTHOPEDIC<br>SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | SURGERY-<br>ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT | PREVENTIVE<br>MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | HAND SURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | ORTHOPEDIC<br>SURGERY  | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | PREVENTIVE<br>MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | SURGERY-<br>ORTHOPEDIC | 3                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT, OTHER SPECIFIC ARTHROPATHIES NEC RIGHT SHOULDER  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT UNS SHOULDER NOT TRAUMAT  | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s) | UNS ROT CUFF TEAR/RUPT UNS SHOULDER NOT TRAUMAT  | SURGERY-<br>ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty                    | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|---------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, any joint; without contrast material(s)  | UNSPECIFIED DISLOCATION LT AC JOINT INITIAL ENC  | SURGERY-<br>ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s)  | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE,<br>UNSPECIFIED DISLOCATION LT AC JOINT INITIAL ENC | PHYSICAL MEDICINE<br>& REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s)  | UNSPECIFIED SPRAIN LEFT ELBOW INITIAL ENCOUNTER  | SURGERY-<br>ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s)  | UNSPECIFIED SPRAIN LEFT WRIST INITIAL ENCOUNTER  | ORTHOPEDIC<br>SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s)  | UNSPECIFIED SPRAIN LT WRIST SUBSEQUENT ENCOUNTER   | ORTHOPEDIC<br>SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s)  | UNSPECIFIED SPRAIN RIGHT WRIST INITIAL ENCOUNTER   | INTERNAL MEDICINE                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s)  | UNSPECIFIED SPRAIN RT SHOULDER JOINT INITIAL ENC   | RADIOLOGY -<br>DIAGNOSTIC             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | ABNORMAL FINDINGS ON DIAGNOSTIC IMAGING OF<br>LIMBS, PAIN IN RIGHT SHOULDER                        | FAMILY PRACTICE                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | BRACHIAL PLEXUS DISORDERS  | ONCOLOGY                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | EFFUSION RIGHT ELBOW   | ORTHOPEDIC<br>SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB   | EMERGENCY<br>MEDICINE                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | MALIGNANT MELANOMA LEFT UP LIMB INCL SHOULDER  | HEMATOLOGY AND<br>ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | OTHER SPECIFIED SOFT TISSUE DISORDERS  | GENERAL SURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | PAIN IN RIGHT SHOULDER   | INTERNAL MEDICINE                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | PAIN UNSPECIFIED   | INTERNAL MEDICINE                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | RA W/RHEUMATOID FCT MX SITE W/O ORGAN/SYS INVLV  | RHEUMATOLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, any joint; without contrast material(s),<br>followed by contrast material(s) and further sequences | SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER   | INTERNAL MEDICINE                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; with contrast<br>material(s)   | OSTEOMYELITIS UNSPECIFIED  | INTERNAL MEDICINE                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast<br>material(s)  | BOUTONNIERE DEFORMITY OF LEFT FINGERS  | SURGERY-HAND                          | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, other than joint; without contrast material(s) | LAC MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | LOCALIZED EDEMA, ADHESIVE CAPSULITIS OF LEFT SHOULDER, PAIN IN LEFT ARM, PAIN IN LEFT UPPER ARM | SPORTS MEDICINE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB, PAIN IN LEFT FINGERS                          | HAND SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | OTH INJURY FLEX M&T LT LF WRIST HAND LEVEL INIT   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | OTH INJURY FLEX M&T RT LF WRIST HAND LEVEL INIT, DSPL FX DIST PHAL RT LTL FNGR INIT ENC CLOS FX | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | OTH NONDSPLCD FX UP END LT HUM INIT ENC CLOS FX   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | OTHER CHRONIC OSTEOMYELITIS RIGHT HAND  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | OTHER INJ OTH SPEC M&T WRIST HAND RT HAND INIT  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PAIN IN LEFT FINGERS  | HAND SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PAIN IN LEFT HAND   | RHEUMATOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PAIN IN LEFT HAND   | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PAIN IN LEFT UPPER ARM  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT FINGERS   | SURGERY-HAND        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT HAND  | RHEUMATOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT HAND  | Surgery, Orthopedic |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PAIN IN RIGHT HAND  | SURGERY- ORTHOPEDIC | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | PARESTHESIA OF SKIN, PAIN IN RIGHT WRIST, PAIN IN RIGHT HAND                                    | PEDIATRICS          |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | SPRAIN METACARPOPHALANGEAL JNT RT MID FINGER INT  | HAND SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | SPRAIN METACARPOPHALANGEAL JOINT RT THUMB INIT  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | SPRAIN METACARPOPHALANGEAL JOINT RT THUMB INIT  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | STRAIN MUSC FASC TEND OTH PART BICPS LA INIT ENC  | Family Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s) | UNSPECIFIED INJURY RT WRIST HAND FINGERS INITIAL  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description  | Diagnosis Code Description   | Provider Specialty    | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MRI Upper Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | CELLULITIS OF LEFT UPPER LIMB  | FAMILY PRACTICE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | GANGLION LEFT HAND   | SURGERY-ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB                       | SURGERY-ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB, PAIN IN LEFT FINGERS | SURGERY-ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | OSTEOMYELITIS UNSPECIFIED  | INTERNAL MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | OTHER DISTURBANCES OF SKIN SENSATION                                   | NEUROLOGY             |                    | 1                | 1               |  |                          |                        |                      |                 |
| MRI Upper Extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences | PAIN IN LEFT ARM   | FAMILY PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE DUP/DELETE VARIANT  | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS           | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE DUP/DELETE VARIANT  | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS           | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH2 GENE DUP/DELETE VARIANT  | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                               | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH2 GENE DUP/DELETE VARIANT  | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST           | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE DUP/DELETE VARIANT  | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY                 | Oncology              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | BURKITT LYMPHOMA, LYMPH NODES OF AXILLA AND UPPER LIMB                 | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS           | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS           | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | GASTROINTESTINAL STROMAL TUMOR, UNSPECIFIED SITE                       | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | INTRAHEPATIC BILE DUCT CARCINOMA                                       | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | MALIGNANT MELANOMA OF LEFT LOWER LIMB, INCLUDING HIP                   | Internal Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | MALIGNANT MELANOMA OF SKIN, UNSPECIFIED                                | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                               | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                              | Internal Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX                 | Hematology            |                    | 2                | 2               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ  | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG               | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| MSH2 GENE FULL SEQ   | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ   | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTH PRT UTERUS     | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ   | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH2 GENE FULL SEQ   | SOLITARY PULMONARY NODULE                                    | Surgery, Thoracic     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE DUP/DELETE VARIANT   | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE DUP/DELETE VARIANT   | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH6 GENE DUP/DELETE VARIANT   | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                     | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH6 GENE DUP/DELETE VARIANT   | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE DUP/DELETE VARIANT   | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | BURKITT LYMPHOMA, LYMPH NODES OF AXILLA AND UPPER LIMB       | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | GASTROINTESTINAL STROMAL TUMOR, UNSPECIFIED SITE             | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | INTRAHEPATIC BILE DUCT CARCINOMA                             | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | MALIGNANT MELANOMA OF LEFT LOWER LIMB, INCLUDING HIP         | Internal Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | MALIGNANT MELANOMA OF SKIN, UNSPECIFIED                      | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                     | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Internal Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX       | Hematology            |                    | 2                | 2               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Nurse Practitioner    |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTH PRT UTERUS     | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology              |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSH6 GENE FULL SEQ   | SOLITARY PULMONARY NODULE                                    | Surgery, Thoracic     |                    | 1                | 1               |  |                          |                        |                      |                 |
| MSLT   | PARASOMNIA, UNSPECIFIED                                      | Respiratory Therapy   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Multiple Sleep Latency Test (MSLT), facility based test to see the amount of sleepiness or to test the ability to stay awake | Hypersomnia, unspecified                                     | Internal Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Multiple Sleep Latency Test (MSLT), facility based test to see the amount of sleepiness or to test the ability to stay awake | Hypersomnia, unspecified                                     | Neurology             | 1                  |                  |                 |  |                          |                        |                      |                 |



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|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Multiple Sleep Latency Test (MSLT), facility based test to see the amount of sleepiness or to test the ability to stay awake   | Hypersomnia, unspecified   | Nurse Practitioner     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Multiple Sleep Latency Test (MSLT), facility based test to see the amount of sleepiness or to test the ability to stay awake   | Narcolepsy without cataplexy   | Pulmonology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Multiple Sleep Latency Test (MSLT), facility based test to see the amount of sleepiness or to test the ability to stay awake   | Narcolepsy without cataplexy   | Sleep Medicine         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Multiple Sleep Latency Test (MSLT), facility based test to see the amount of sleepiness or to test the ability to stay awake   | Obstructive sleep apnea (adult) (pediatric)  | Cardiovascular Disease | 1                  |                  |                 |  |                          |                        |                      |                 |
| Multiple Sleep Latency Test (MSLT), facility based test to see the amount of sleepiness or to test the ability to stay awake   | Obstructive sleep apnea (adult) (pediatric)  | Respiratory Therapy    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Multiple Sleep Latency Test (MSLT), facility based test to see the amount of sleepiness or to test the ability to stay awake   | Snoring  | Allergy/Immunology     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MUSC TEST DONE W/N TEST COMP   | PAIN IN RIGHT LEG  | Physical Medicine      |                    | 1                | 1               |  |                          |                        |                      |                 |
| MYDAYIS 25 MG CPTP 24HR  |  | Other                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MYDAYIS 37.5 MG CPTP 24HR  |  | Other                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MYDAYIS 50 MG CPTP 24HR  |  | Other                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MYFEMBREE 40-1-0.5MG TABLET  |  | Other                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| MYFORTIC 180 MG TABLET DR  |  | Other                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) a | HYPERLIPIDEMIA UNSPECIFIED, ABNORMAL ELECTROCARDIOGRAM, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, UNSPECIFIED COMBINED SYSTOLIC & DIASTOLIC CHF, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or |  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE, TOBACCO USE   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM   | CARDIOVASCULAR         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM   | CARDIOVASCULAR DISEASE | 3                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM   | INTERNAL MEDICINE      | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, ANGINA PECTORIS UNSPECIFIED  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PRESENCE OF CORONARY ANGIOPLASTY IMPLANT & GRAFT  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, CHEST PAIN UNSPECIFIED   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, CHEST PAIN UNSPECIFIED, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH  | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, DIZZINESS AND GIDDINESS, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, VENTRICULAR PREMATURE DEPOLARIZATION, NONRHEUMATIC MITRAL VALVE PROLAPSE, OTHER CARDIOMYOPATHIES | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, DYSPNEA UNSPECIFIED, OTHER ILL-DEFINED HEART DISEASES, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, DYPSPNEA UNSPECIFIED, SUPRAVENTRICULAR TACHYCARDIA, ATRIAL PREMATURE DEPOLARIZATION, ESSENTIAL PRIMARY HYPERTENSION              | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, EDEMA UNSPECIFIED, CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM, PRESENCE OF CARDIAC PACEMAKER, Unknown   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, ESSENTIAL PRIMARY HYPERTENSION   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, ESSENTIAL PRIMARY HYPERTENSION   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, MIXED HYPERLIPIDEMIA, CHEST PAIN UNSPECIFIED, VENTRICULAR PREMATURE DEPOLARIZATION, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, OTHER CHEST PAIN  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, OTHER CHEST PAIN, DYSPNEA UNSPECIFIED   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, PALPITATIONS, DIZZINESS AND GIDDINESS, OTHER CHEST PAIN, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, PALPITATIONS, DYSPNEA UNSPECIFIED, NONRHEUMATIC MITRAL VALVE INSUFFICIENCY  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, PRECORDIAL PAIN   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, PRECORDIAL PAIN, CARDIAC ARRHYTHMIA UNSPECIFIED   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, PRECORDIAL PAIN, SHORTNESS OF BREATH, ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, SHORTNESS OF BREATH, ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, SHORTNESS OF BREATH, ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS, ESSENTIAL PRIMARY HYPERTENSION | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL ELECTROCARDIOGRAM, Unknown  | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | CARDIOLOGIST           | 2                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, TACHYCARDIA UNSPECIFIED, PALPITATIONS, OTHER SPECIFIED PERSONAL RISK FACTORS NEC, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED                                | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL RESULT CV FUNCTION STUDY UNS, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, ABNORMAL ELECTROCARDIOGRAM, SHORTNESS OF BREATH, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, SYNCOPE AND COLLAPSE, ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM, PERIPHERAL VASCULAR DISEASE UNSPECIFIED, ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description                      | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ACUTE DIASTOLIC CONGESTIVE HEART FAILURE        | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ANGINA PECTORIS UNSPECIFIED                     | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ANGINA PECTORIS UNSPECIFIED                     | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS | CARDIOLOGIST           | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS | CARDIOVASCULAR         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS    | CARDIOVASCULAR         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS    | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS | CARDIOLOGIST           | 15                 |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOVASCULAR DISEASE | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, HYPERTENSIVE HEART DISEASE WITHOUT HEART FAILURE                                      | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, HYPOTHYROIDISM UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION                            | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ISCHEMIC CARDIOMYOPATHY, ESSENTIAL PRIMARY HYPERTENSION                               | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PAROXYSMAL ATRIAL FIBRILLATION  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ATHEROSCLEROSIS OF AORTA   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | BRADYCARDIA UNSPECIFIED, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS, ESSENTIAL PRIMARY HYPERTENSION, PRESENCE OF CARDIAC PACEMAKER | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description                      | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CARDIOMYOPATHY UNSPECIFIED                      | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CEREBRAL INFARCTION D/T EMBOLISM BASILAR ARTERY | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED                          | CARDIOLOGIST           | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED                          | CARDIOVASCULAR         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED                          | CARDIOVASCULAR DISEASE | 3                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED                          | EMERGENCY MEDICINE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED                          | FAMILY PRACTICE        | 5                  | 3                | 3               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED                          | GENERAL PRACTICE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED                          | Hematology             |                    | 1                | 1               |  |                          |                        |                      |                 |



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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED   | INTERNAL MEDICINE      | 4                  | 4                | 4               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED   | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED   | Surgery, Plastic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED, DYSPNEA UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION                                    | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED, DYSPNEA UNSPECIFIED, PAIN IN LEFT ARM  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, Unknown | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH  | CARDIOLOGIST           | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHEST PAIN UNSPECIFIED, ST ELEVATION MYOCARDIAL INFARCTION UNS SITE, ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHRONIC ISCHEMIC HEART DISEASE UNSPECIFIED   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHRONIC SYSTOLIC CONGESTIVE HEART FAILURE  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CHRONIC SYSTOLIC CONGESTIVE HEART FAILURE, ATHEROSCLEROSIS CABG WITHOUT ANGINA PECTORIS, LEFT BUNDLE-BRANCH BLOCK UNSPECIFIED, NON-ST ELEVATION MYOCARDIAL INFARCTION, CHRONIC TOTAL OCCLUSION OF CORONARY ARTERY, CORONARY ANGIOPLASTY STATUS | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | CORONARY ANGIOPLASTY STATUS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | DIZZINESS AND GIDDINESS, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | DYSPNEA UNSPECIFIED  | CARDIOVASCULAR DISEASE | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | DYSPNEA UNSPECIFIED  | FAMILY PRACTICE        | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | DYSPNEA UNSPECIFIED  | INTERNAL MEDICINE      | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | DYSPNEA UNSPECIFIED, ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | DYSPNEA UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | DYSPNEA UNSPECIFIED, PAROXYSMAL ATRIAL FIBRILLATION, SLEEP APNEA UNSPECIFIED   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | DYSPNEA UNSPECIFIED, PRESENCE OF CORONARY ANGIOPLASTY IMPLANT & GRAFT  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION  | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM   | CARDIOLOGIST           | 3                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM   | VASCULAR SURGERY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM, NONRHEUMATIC MITRAL VALVE INSUFFICIENCY, RHEUMATIC TRICUSPID INSUFFICIENCY, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | ESSENTIAL PRIMARY HYPERTENSION  | CARDIOLOGIST           | 2                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HEART FAILURE UNSPECIFIED   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, ABNORMAL ELECTROCARDIOGRAM, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, UNSPECIFIED COMBINED SYSTOLIC & DIASTOLIC CHF, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS        | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, ABNORMAL ELECTROCARDIOGRAM, ESSENTIAL PRIMARY HYPERTENSION  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, CARDIOMYOPATHY UNSPECIFIED   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, CHEST PAIN UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, DYSPNEA UNSPECIFIED, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS, ESSENTIAL PRIMARY HYPERTENSION   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, GENERALIZED HYPERHIDROSIS, DYSPNEA UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION, PRESENCE OF CORONARY ANGIOPLASTY IMPLANT & GRAFT | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |

Prior Authorization Statistics - IL - CY 2021

| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, OTH SPEC SX & RESP SYS, PRECORDIAL PAIN, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, OTHER CHEST PAIN, ELEVATED BLOOD-PRESSURE READING WITHOUT DX HTN, DYSPNEA UNSPECIFIED, ENCOUNTER SCREENING FOR CARDIOVASCULAR DISORDERS, TOBACCO USE   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, PERIPHERAL VASCULAR DISEASE UNSPECIFIED, ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | HYPERLIPIDEMIA UNSPECIFIED, SYNCOPE AND COLLAPSE, ABNORMAL ELECTROCARDIOGRAM, PALPITATIONS, NONRHEUMATIC MITRAL VALVE PROLAPSE, PAIN IN LEFT LEG, PAIN IN RIGHT LEG, ENCOUNTER SCREENING FOR CARDIOVASCULAR DISORDERS, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC S | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MALFORMATION OF CORONARY VESSELS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MIXED HYPERLIPIDEMIA   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MIXED HYPERLIPIDEMIA, CHEST PAIN UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MIXED HYPERLIPIDEMIA, DIZZINESS AND GIDDINESS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MIXED HYPERLIPIDEMIA, IMPAIRED FASTING GLUCOSE, TACHYCARDIA UNSPECIFIED, PALPITATIONS, OTHER FORMS OF DYSPNEA, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MIXED HYPERLIPIDEMIA, OTHER FORMS OF ANGINA PECTORIS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MIXED HYPERLIPIDEMIA, OTHER FORMS OF DYSPNEA, ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION, PRESENCE OF AORTOCORONARY BYPASS GRAFT   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MIXED HYPERLIPIDEMIA, PALPITATIONS, CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | MIXED HYPERLIPIDEMIA, TACHYCARDIA UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, HYPERTENSIVE HEART DISEASE WITHOUT HEART FAILURE, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS, ESSENTIAL PRIMARY HYPERTENSION, LONG TERM CURRENT USE OF INS | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | NON-ST ELEVATION MYOCARDIAL INFARCTION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OBSTRUCTIVE HYPERTROPHIC CARDIOMYOPATHY  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CARDIOMYOPATHIES   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CARDIOMYOPATHIES   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN   | CARDIOLOGIST           | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN   | CARDIOVASCULAR DISEASE | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN   | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN   | GENERAL PRACTICE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN   | INTERNAL MEDICINE      | 2                  | 4                | 4               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, OLD MYOCARDIAL INFARCTION, ESSENTIAL PRIMARY HYPERTENSION, PRESENCE OF CORONARY ANGIOPLASTY IMPLANT & GRAFT | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN, DYSPNEA UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN, SHORTNESS OF BREATH  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN, SHORTNESS OF BREATH, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER CHEST PAIN, SHORTNESS OF BREATH, TYPE 2 DIABETES MELLITUS W/UNS COMPLICATIONS                         | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER FATIGUE, DISORDER OF LIPOPROTEIN METABOLISM UNSPECIFIED, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER FATIGUE, PALPITATIONS, CHEST PAIN UNSPECIFIED   | SURGERY-CARDIOVASCULAR | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER FORMS OF ANGINA PECTORIS  | CARDIOLOGIST           |                    | 3                | 3               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER FORMS OF ANGINA PECTORIS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER FORMS OF DYSPNEA  | CARDIOLOGIST           | 2                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER FORMS OF DYSPNEA  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER FORMS OF DYSPNEA  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER FORMS OF DYSPNEA  | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | OTHER SPECIFIED ANXIETY DISORDERS, ESSENTIAL PRIMARY HYPERTENSION, TOBACCO USE | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PALPITATIONS   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PALPITATIONS   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PALPITATIONS, CARDIAC MURMUR UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION       | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PALPITATIONS, OTHER CHEST PAIN   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PALPITATIONS, SHORTNESS OF BREATH  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PAROXYSMAL ATRIAL FIBRILLATION   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PAROXYSMAL ATRIAL FIBRILLATION   | CARDIOVASCULAR         | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PAROXYSMAL ATRIAL FIBRILLATION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description   | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PAROXYSMAL ATRIAL FIBRILLATION, ESSENTIAL PRIMARY HYPERTENSION   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PERSONAL HISTORY OF OTHER SPECIFIED CONDITIONS   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECARDIAL PAIN  | CARDIOLOGIST           | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECARDIAL PAIN  | CARDIOVASCULAR DISEASE | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECARDIAL PAIN  | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECARDIAL PAIN, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECARDIAL PAIN, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ACUTE ON CHRON DIASTOLIC CONGESTIV HEART FAILURE, ESSENTIAL PRIMARY HYPERTENSION | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECARDIAL PAIN, DYSPNEA UNSPECIFIED, OTHER NONRHEUMATIC AORTIC VALVE DISORDERS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECARDIAL PAIN, PERSONAL HISTORY OTH DISEASES CIRCULATORY SYSTEM, Unknown   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description                                      | Provider Specialty             | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|--------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECORDIAL PAIN, SHORTNESS OF BREATH                            | CARDIOVASCULAR DISEASE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRECORDIAL PAIN, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS | CARDIOLOGIST                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | PRESENCE OF CORONARY ANGIOPLASTY IMPLANT & GRAFT                | CARDIOLOGIST                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | Pure hypercholesterolemia, unspecified                          | CARDIOVASCULAR DISEASE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SARCOID MYOCARDITIS   | CARDIOLOGIST                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH   | CARDIOLOGIST                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH   | CARDIOLOGY & INTERNAL MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH   | CARDIOVASCULAR                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH   | CARDIOVASCULAR DISEASE         | 3                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH   | NURSE PRACTITIONER  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, TYPE 2 DIABETES MELLITUS W/OTH CIRCULATORY COMP, ESSENTIAL PRIMARY HYPERTENSION       | CARDIOLOGIST        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH, CARDIOMYOPATHY UNSPECIFIED, ANGINA PECTORIS UNSPECIFIED  | CARDIOLOGIST        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH, CONDUCTION DISORDER UNSPECIFIED, ST ELEVATION MYOCARDIAL INFARCTION UNS SITE   | INTERNAL MEDICINE   |                    |                  | 1               |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH, OTHER LONG TERM CURRENT DRUG THERAPY   | CARDIOLOGIST        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SHORTNESS OF BREATH, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS   | CARDIOLOGIST        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SYNCOPE AND COLLAPSE  | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | SYNCOPE AND COLLAPSE, OTHER SPECIFIED ABNORMALITIES OF PLASMA PROTEINS, ATHEROSCLEROSIS CABG WITHOUT ANGINA PECTORIS, UNSPECIFIED RIGHT BUNDLE-BRANCH BLOCK | NURSE PRACTITIONER  | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | TACHYCARDIA UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | UNSPECIFIED ATRIAL FIBRILLATION                         | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | UNSPECIFIED ATRIAL FIBRILLATION                         | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress  | ABNORMAL ELECTROCARDIOGRAM, OTHER FORMS OF DYSPNEA      | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress  | SARCOID MYOCARDITIS                                     | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| MYOMECTOMY ABDOM METHOD  | EXCESSIVE AND FREQUENT MENSTRUATION WITH REGULAR CYCLE  | Gynecology (No OB)     | 1                  |                  |                 |  |                          |                        |                      |                 |
| MYOMECTOMY ABDOM METHOD  | LEIOMYOMA OF UTERUS, UNSPECIFIED                        | Obstetrics/Gynecology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| MYRBETRIQ  | Other   | Other                  |                    |                  |                 |  |                          |                        | 1                    |                 |
| MYRBETRIQ  | Urge incontinence                                       | Urology                |                    |                  |                 |  |                          |                        | 1                    |                 |
| MYRBETRIQ 25 MG TAB ER 24H   |   | OB/GYN                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| MYRBETRIQ 25 MG TAB ER 24H   |   | Other                  | 1                  | 6                | 6               |  |                          |                        |                      |                 |
| MYRBETRIQ 25 MG TAB ER 24H   |   | Urology                | 2                  |                  |                 |  |                          |                        |                      |                 |
| MYRBETRIQ 50 MG TAB ER 24H   |   | Other                  | 3                  | 4                | 4               |  |                          |                        |                      |                 |
| MYRBETRIQ 50 MG TAB ER 24H   |   | PCP/Pediatrician       | 1                  |                  |                 |  |                          |                        |                      |                 |
| MYRBETRIQ 50 MG TAB ER 24H   |   | Urology                | 2                  |                  |                 |  |                          |                        |                      |                 |
| N BLOCK, LUMBAR/THORACIC   | CAUSALGIA OF RIGHT LOWER LIMB                           | ANESTHESIOLOGY         | 2                  |                  |                 |  |                          |                        |                      |                 |
| N BLOCK, LUMBAR/THORACIC   | COMPLEX REGIONAL PAIN SYNDROME I LEFT LOWER LIMB        | ANESTHESIOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| N BLOCK, LUMBAR/THORACIC   | COMPLEX REGIONAL PAIN SYNDROME I RT LOWER LIMB          | ANESTHESIOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| N BLOCK, LUMBAR/THORACIC   | COMPLEX REGIONAL PAIN SYNDROME I UNSPECIFIED            | PAIN MANAGEMENT        | 1                  |                  |                 |  |                          |                        |                      |                 |
| N BLOCK, LUMBAR/THORACIC   | NEURALGIA AND NEURITIS UNSPECIFIED                      | ANESTHESIOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| N BLOCK, LUMBAR/THORACIC   | SACROCOCCYGEAL DISORDERS NEC                            | PAIN MANAGEMENT        | 1                  |                  |                 |  |                          |                        |                      |                 |
| N BLOCK, LUMBAR/THORACIC   | UNSPECIFIED ABDOMINAL PAIN                              | PAIN MANAGEMENT        |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| NASCOBAL 500MCG/SPR SPRAY  |  | Other                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| NASCOBAL 500MCG/SPR SPRAY  |  | PCP/Pediatrician       | 1                  |                  |                 |  |                          |                        |                      |                 |
| NATALIZUMAB INJECTION  | MULTIPLE SCLEROSIS   | Neurology              | 6                  |                  |                 |  |                          |                        |                      |                 |
| NATALIZUMAB INJECTION  | MULTIPLE SCLEROSIS   | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| NATESTO  | Testicular hypofunction  | Family Medicine        |                    |                  |                 |  |                          |                        | 1                    |                 |
| NATESTO 5.5/0.122 GEL MD PMP   |  | Other                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization                                 | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization                                 | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization                                 | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, OTHER FORMS OF ANGINA PECTORIS   | Surgery, Plastic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization                                 | UNSTABLE ANGINA  | CARDIOVASCULAR DISEASE |                    | 2                | 2               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart cath and grafts | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS   | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization |  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL ELECTROCARDIOGRAM, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT CV FUNCTION STUDY UNS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY   | CARDIOLOGIST           | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY   | CARDIOVASCULAR DISEASE | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, ANGINA PECTORIS UNSPECIFIED  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, CHEST PAIN UNSPECIFIED, ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS  | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, OTHER CHEST PAIN, SHORTNESS OF BREATH  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, OTHER FORMS OF DYSPNEA, CEREBRAL INFARCTION UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, OCCLUSION AND STENOSIS OF LEFT CAROTID ARTERY | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, PRECORDIAL PAIN, ANGINA PECTORIS UNSPECIFIED, OLD MYOCARDIAL INFARCTION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, PRECORDIAL PAIN, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, OLD MYOCARDIAL INFARCTION, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS, PRESENCE OF CORONARY ANGIOPLASTY IMPLANT & GRAFT | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ACUTE ISCHEMIC HEART DISEASE UNSPECIFIED  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ASHD NATIVE COR ARTREY W/UNS ANGINA PECTORIS  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS   | CARDIOLOGIST           | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS   | CARDIOVASCULAR DISEASE | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, FAMILY HISTORY OF SUDDEN CARDIAC DEATH   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | CARDIOMEGALY, UNSPECIFIED RIGHT BUNDLE-BRANCH BLOCK, UNSTABLE ANGINA  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | CHEST PAIN UNSPECIFIED  | CARDIOVASCULAR DISEASE | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | CHEST PAIN UNSPECIFIED  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | CHEST PAIN UNSPECIFIED, ASHD NATIVE COR ART W/UNSTABLE ANGINA PECTORIS  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | CHRONIC SYSTOLIC CONGESTIVE HEART FAILURE   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | DILATED CARDIOMYOPATHY  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | DYSPNEA UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | DYSPNEA UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | HEART FAILURE UNSPECIFIED   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | HEART TRANSPLANT STATUS   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Native coronary artery catheterization with left heart catheterization | HYPERLIPIDEMIA UNSPECIFIED, OTHER FATIGUE, OTHER FORMS OF DYSYPNEA, OTHER CHEST PAIN, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | LEFT BUNDLE-BRANCH BLOCK UNSPECIFIED  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | NONRHEUMATIC MITRAL VALVE INSUFFICIENCY   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | OTH SPECIFIED CONGENITAL MALFORMATIONS OF HEART   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | OTHER CHEST PAIN  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | OTHER CHEST PAIN, LEFT BUNDLE-BRANCH BLOCK UNSPECIFIED  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | OTHER FORMS OF ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION, Unknown   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | OTHER FORMS OF DYSYPNEA   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | PRECORDIAL PAIN   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | PRECORDIAL PAIN   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | SHORTNESS OF BREATH, UNSTABLE ANGINA  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | SYNCOPE AND COLLAPSE, SHORTNESS OF BREATH   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with left heart catheterization | UNSTABLE ANGINA   | CARDIOVASCULAR DISEASE | 2                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right and left heart cath  | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right and left heart cath  | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, DIZZINESS AND GIDDINESS, PRECORDIAL PAIN, SHORTNESS OF BREATH, ISCHEMIC CARDIOMYOPATHY, CHRONIC SYSTOLIC CONGESTIVE HEART FAILURE, OTHER FORMS OF ANGINA PECTORIS | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right and left heart cath  | CHRONIC DIASTOLIC CONGESTIVE HEART FAILURE, ACUTE RESPIRATORY FAILURE WITH HYPOXIA  | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right and left heart cath  | COARCTATION OF AORTA, NONRHEUMATIC MITRAL VALVE INSUFFICIENCY, NONRHEUMATIC AORTIC VALVE STENOSIS   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right and left heart cath  | HEART TRANSPLANT STATUS   | PEDIATRIC CARDIOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right and left heart cath  | NONRHEUMATIC AORTIC VALVE STENOSIS  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right and left heart cath  | NONRHEUMATIC MITRAL VALVE INSUFFICIENCY   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right and left heart cath  | RHEUMATIC MITRAL VALVE DISEASE UNSPECIFIED  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |



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|--|--|-------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Native coronary artery catheterization with right heart cath | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY   | CARDIOLOGIST                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right heart cath | ACUTE DIASTOLIC CONGESTIVE HEART FAILURE   | CARDIOLOGIST                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right heart cath | CHRONIC DIASTOLIC CONGESTIVE HEART FAILURE, ACUTE RESPIRATORY FAILURE WITH HYPOXIA   | CARDIOLOGIST                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Native coronary artery catheterization with right heart cath | OTHER FORMS OF DYSPNEA   | CARDIOVASCULAR DISEASE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| NAYZILAM 5 MG/SPRAY SPRAY                                    |  | Neurology                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| NAYZILAM 5 MG/SPRAY SPRAY                                    |  | Other                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| NERVOUS SYSTEM SURGERY                                       | DISORDERS OF GLOSSOPHARYNGEAL NERVE  | Anesthesiology                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| NEULASTA 6 MG/0.6ML SYRINGE                                  |  | Other                               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| NEUPOGEN 300MCG/0.5 SYRINGE                                  |  | Other                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| NEUROELTRD STIM POST TIBIAL                                  | URGE INCONTINENCE  | Obstetrics/Gynecology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| NEUROMUSCULAR REEDUCATION                                    | PAIN IN RIGHT HIP  | Family Medicine                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| NEUROMUSCULAR REEDUCATION                                    | Pain in right hip  | Other                               |                    |                  |                 |  |                          |                        | 1                    |                 |
| NEUROMUSCULAR REEDUCATION                                    | PRESENCE OF LEFT ARTIFICIAL KNEE JOINT   | Surgery, Orthopedic                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| NEUROMUSCULAR REEDUCATION                                    | Unspecified injury of muscle, fascia and tendon of the posterior muscle group at thigh level, right thigh, initial encounter | Other                               |                    |                  |                 |  |                          |                        | 1                    |                 |
| NEXLETOL 180 MG TABLET                                       |  | Cardiology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| NEXLIZET 180MG-10MG TABLET                                   |  | Other                               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| NJX INTERLAMINAR LMBR/SAC                                    | RADICULOPATHY, LUMBAR REGION   | Family Medicine                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS  | Surgery, General                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS  | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN  | Internal Medicine                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN  | Surgery, Vascular                   | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION  | Family Medicine                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION  | Surgery, General                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION  | Vascular & Interventional Radiology | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN  | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VARICOSE VEINS OF UNSP LOWER EXTREMITY WITH INFLAMMATION   | Surgery, General                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)  | Obstetrics/Gynecology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)  | Physical Medicine                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)  | Surgery, General                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT 1 VEIN                                  | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)  | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-----------------------------|---|-------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| NJX NONCMPND SCLRSNT MLT VN | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS         | Surgery, General                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT MLT VN | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS         | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT MLT VN | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Surgery, Vascular                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT MLT VN | VARICOSE VEINS OF R LOW EXTREM WITH OTHER COMPLICATIONS     | Family Medicine                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT MLT VN | VARICOSE VEINS OF R LOW EXTREM WITH OTHER COMPLICATIONS     | Pain Management                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT MLT VN | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION   | Vascular & Interventional Radiology | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT MLT VN | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN           | Surgery, General                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT MLT VN | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN           | Surgery, Vascular                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX NONCMPND SCLRSNT MLT VN | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Internal Medicine                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT 1 INCMPTNT VEIN | CHRONIC VENOUS HTN W OTH COMP OF BILATERAL LOW EXTRM        | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT 1 INCMPTNT VEIN | CHRONIC VENOUS HTN W ULCER AND INFLAMMATION OF L LOW EXTREM | Radiology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT 1 INCMPTNT VEIN | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN           | Surgery, General                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT 1 INCMPTNT VEIN | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Obstetrics/Gynecology               | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT 1 INCMPTNT VEIN | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | CHRONIC VENOUS HTN W OTH COMP OF BILATERAL LOW EXTRM        | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | CHRONIC VENOUS HYPERTENSION W OTH COMP OF L LOW EXTREM      | Internal Medicine                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF BI LOW EXTREM W OTH COMPLICATIONS         | Surgery, General                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Internal Medicine                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Radiology                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Surgery, General                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Surgery, Vascular                   | 4                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF LEFT LOWER EXTREMITY WITH INFLAMMATION    | General Practice                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF LEFT LOWER EXTREMITY WITH PAIN            | Surgery, Vascular                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION   | Emergency Medicine                  | 5                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION   | Family Medicine                     | 2                  |                  |                 |  |                          |                        |                      |                 |

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| NJX SCLRSNT MLT INCMPTNT VN               | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION | Surgery, Vascular                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN               | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN         | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN               | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)               | Obstetrics/Gynecology                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN               | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)               | Surgery, General                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| NJX SCLRSNT MLT INCMPTNT VN               | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)               | Surgery, Vascular                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| NORCO 10MG-325MG TABLET                   |   | Pain Management                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| NORDITROPIN FLEXPPO                       | Hypopituitarism   | Internal Medicine                      |                    |                  |                 |  |                          | 1                      | 1                    |                 |
| NORDITROPIN FLEXPPO 10MG/1.5ML PEN INJCTR |   | Endocrinology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| NORDITROPIN FLEXPPO 10MG/1.5ML PEN INJCTR |   | Other                                  | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| NORDITROPIN FLEXPPO 15MG/1.5ML PEN INJCTR |   | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| NORITATE 1 % CREAM(GM)                    |   | Other                                  | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| NOURIANZ 40 MG TABLET                     |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| NOVAREL 10000 UNIT VIAL                   |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| NOVAREL 5000 UNIT VIAL                    |   | Endocrinology                          | 4                  |                  |                 |  |                          |                        |                      |                 |
| NOVAREL 5000 UNIT VIAL                    |   | Obstetrics/Gynecology                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| NOVAREL 5000 UNIT VIAL                    |   | Other                                  | 12                 | 1                | 1               |  |                          |                        |                      |                 |
| NOVAREL 5000 UNIT VIAL                    |   | Reproductive Endocrinology/Infertility | 5                  |                  |                 |  |                          |                        |                      |                 |
| NOVOLOG 100/ML CARTRIDGE                  |   | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| NOVOLOG 100/ML VIAL                       |   | Other                                  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| NOVOLOG FLEXPEN 100/ML (3) INSULN PEN     |   | Other                                  | 1                  | 5                | 5               |  |                          |                        |                      |                 |
| NOVOLOG FLEXPEN 100/ML (3) INSULN PEN     |   | PCP/Pediatrician                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| NOVOLOG FLEXPEN 100/ML (3) INSULN PEN     |   | Pediatric Endocrinology                |                    | 1                | 1               |  |                          |                        |                      |                 |
| NPS SURG DILAT EUST TUBE BI               | OTHER CHRONIC SINUSITIS                                   | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| NPS SURG DILAT EUST TUBE UNI              | DEVIATED NASAL SEPTUM                                     | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| NRPSYC TST EVAL PHYS/QHP 1ST              | MILD COGNITIVE IMPAIRMENT, SO STATED                      | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| NRPSYC TST EVAL PHYS/QHP EA               | MILD COGNITIVE IMPAIRMENT, SO STATED                      | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| NRV CNDJ TEST 9-10 STUDIES                | PAIN IN RIGHT LEG   | Physical Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SPHN TISS RMVL              | CHRONIC PANSINUSITIS                                      | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT SINS              | CHRONIC FRONTAL SINUSITIS                                 | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT SINS              | CHRONIC MAXILLARY SINUSITIS                               | Otolaryngology (Ear, Nose, And Throat) | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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| NSL/SINS NDSC SURG FRNT SINS | CHRONIC PANSINUSITIS                                | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT SINS | CHRONIC SINUSITIS, UNSPECIFIED                      | Otolaryngology (Ear, Nose, And Throat) | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT SINS | DEVIATED NASAL SEPTUM                               | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT&SPHN | CHRONIC FRONTAL SINUSITIS                           | Otolaryngology (Ear, Nose, And Throat) |                    | 2                | 2               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT&SPHN | CHRONIC MAXILLARY SINUSITIS                         | Otolaryngology (Ear, Nose, And Throat) | 3                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT&SPHN | CHRONIC PANSINUSITIS                                | Otolaryngology (Ear, Nose, And Throat) | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT&SPHN | CHRONIC SINUSITIS, UNSPECIFIED                      | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT&SPHN | DEVIATED NASAL SEPTUM                               | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT&SPHN | OTHER CHRONIC SINUSITIS                             | Otolaryngology (Ear, Nose, And Throat) | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG FRNT&SPHN | OTHER SPECIFIED DISORDERS OF NOSE AND NASAL SINUSES | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG MAX SINS  | CHRONIC FRONTAL SINUSITIS                           | Otolaryngology (Ear, Nose, And Throat) | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG MAX SINS  | CHRONIC MAXILLARY SINUSITIS                         | Otolaryngology (Ear, Nose, And Throat) | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG MAX SINS  | CHRONIC PANSINUSITIS                                | Otolaryngology (Ear, Nose, And Throat) | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG MAX SINS  | CHRONIC SINUSITIS, UNSPECIFIED                      | Otolaryngology (Ear, Nose, And Throat) | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG MAX SINS  | CHRONIC SPHENOIDAL SINUSITIS                        | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG MAX SINS  | DEVIATED NASAL SEPTUM                               | Otolaryngology (Ear, Nose, And Throat) | 2                  |                  |                 |  |                          |                        |                      |                 |

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| NSL/SINS NDSC SURG MAX SINS  | OTHER CHRONIC SINUSITIS                                     | Otolaryngology (Ear, Nose, And Throat) | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG MAX SINS  | OTHER SPECIFIED DISORDERS OF NOSE AND NASAL SINUSES         | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG SPHN SINS | CHRONIC MAXILLARY SINUSITIS                                 | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG SPHN SINS | CHRONIC SPHENOIDAL SINUSITIS                                | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC SURG SPHN SINS | DEVIATED NASAL SEPTUM                                       | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC TOT W/SPHENDT  | CHRONIC PANSINUSITIS  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC TOT W/SPHENDT  | OTHER SPECIFIED DISEASES OF JAWS                            | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC TOTAL          | CHRONIC PANSINUSITIS  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NSL/SINS NDSC TOTAL          | NASAL POLYP, UNSPECIFIED                                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| NTSTY MODUL RAD TX DLVR CPLX | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK | Radiation Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| NTSTY MODUL RAD TX DLVR SMPL | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK | Radiation Oncology                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| NUBEQA 300 MG TABLET         |   | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| NUCALA 100 MG VIAL           |   | Allergy/Immunology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| NUCALA 100 MG/ML AUTO INJCT  |   | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| NUCYNTA 50 MG TABLET         |   | Anesthesiology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| NUPLAZID 34 MG CAPSULE       |   | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN      | ACUTE RESPIRATORY FAILURE WITH HYPOXIA                      | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN      | AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY               | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN      | CEREBRAL PALSY, UNSPECIFIED                                 | Pediatrics                             |                    | 2                | 2               |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN      | CONTUSION OF SCROTUM AND TESTES, INITIAL ENCOUNTER          | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN      | CONTUSION OF SCROTUM AND TESTES, SUBSEQUENT ENCOUNTER       | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN      | ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE            | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN      | ESSENTIAL (PRIMARY) HYPERTENSION                            | Infectious Disease                     | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-------------------------------------|---|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| NURSING CARE IN HOME RN             | FRACTURE OF ONE RIB, UNSP SIDE, INIT FOR CLOS FX            | Surgery, General      | 1                  |                  |                 |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN             | OTHER CEREBRAL PALSY  | Pediatrics            | 2                  |                  |                 |  |                          |                        |                      |                 |
| NURSING CARE IN HOME RN             | TYPE 1 DIABETES MELLITUS WITH UNSPECIFIED COMPLICATIONS     | Pediatrics            |                    | 2                | 2               |  |                          |                        |                      |                 |
| NURSING CARE, IN THE HOME; B        | ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE            | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| NURTEC                              | PREVENTIVE MIGRAINE   | Neurology             |                    |                  |                 |  |                          | 1                      |                      |                 |
| NURTEC ODT 75 MG TAB RAPDIS         |   | Neurology             | 6                  | 2                | 2               |  |                          |                        |                      |                 |
| NURTEC ODT 75 MG TAB RAPDIS         |   | Other                 | 20                 | 6                | 6               |  |                          |                        |                      |                 |
| NURTEC ODT 75 MG TAB RAPDIS         |   | PCP/Pediatrician      |                    | 1                | 1               |  |                          |                        |                      |                 |
| OCCLUSAL ORTHOTIC DEVICE, BY REPORT | PATHOLOGICAL DISLOCATION OF UNSP JOINT, NEC                 | Family Medicine       |                    | 1                | 1               |  |                          |                        |                      |                 |
| OCREVUS                             | Multiple sclerosis  | Neurology             |                    |                  |                 |  |                          |                        | 1                    |                 |
| OCTAGAM INJECTION                   | CHRONIC INFLAMMATORY DEMYELINATING POLYNEURITIS             | Neurology             | 2                  |                  |                 |  |                          |                        |                      |                 |
| OCTAGAM INJECTION                   | NONFAMILIAL HYPOGAMMAGLOBULINEMIA                           | Hematology            | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| OCTAGAM INJECTION                   | NONFAMILIAL HYPOGAMMAGLOBULINEMIA                           | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| OCTREOTIDE INJECTION, DEPOT         | OTHER MALIGNANT NEUROENDOCRINE TUMORS                       | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| ODACTRA 12 SQ-HDM TAB SUBL          |   | ENT/Otolaryngology    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ODACTRA 12 SQ-HDM TAB SUBL          |   | Other                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST HI 40-54 MIN         | NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN                   | Neurology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | AUTISTIC DISORDER   | Family Medicine       | 2                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | ESSENTIAL (PRIMARY) HYPERTENSION                            | Family Medicine       | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | ESSENTIAL (PRIMARY) HYPERTENSION                            | Internal Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | FEMALE INFERTILITY, UNSPECIFIED                             | Obstetrics/Gynecology |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | ILLNESS, UNSPECIFIED  | Family Medicine       |                    | 5                | 5               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | ILLNESS, UNSPECIFIED  | Gastroenterology      |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | ILLNESS, UNSPECIFIED  | Ophthalmology         |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | ILLNESS, UNSPECIFIED  | Pediatrics            |                    | 2                | 2               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | MALIGNANT NEOPLASM OF PROSTATE                              | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | MALIGNANT NEOPLASM OF RECTUM                                | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | MALIGNANT NEOPLASM OF UPPER LOBE, LEFT BRONCHUS OR LUNG     | Family Medicine       |                    | 2                | 2               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | OTITIS MEDIA, UNSPECIFIED, UNSPECIFIED EAR                  | Internal Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | PRESENCE OF RIGHT ARTIFICIAL KNEE JOINT                     | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST LOW 20-29 MIN        | TYPE 2 DIABETES W UNSP DIABETIC RETINOPATHY W MACULAR EDEMA | Ophthalmology         |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN        | ACUTE LEUKEMIA OF UNSP CELL TYPE NOT ACHIEVE REMISSION      | Hematology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN        | ACUTE LEUKEMIA OF UNSP CELL TYPE NOT ACHIEVE REMISSION      | Hospital              | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN        | ACUTE LYMPHOBLASTIC LEUKEMIA NOT HAVING ACHIEVED REMISSION  | Hematology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN        | ADOLESCENT IDIOPATHIC SCOLIOSIS, THORACIC REGION            | Chiropractic          |                    | 1                | 1               |  |                          |                        |                      |                 |

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|------------------------------|--|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| OFFICE O/P EST MOD 30-39 MIN | ALLERGY TO PEANUTS   | Allergy/Immunology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | ALLERGY TO PEANUTS   | Pediatric Allergy & Immunology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | AMYOTROPHIC LATERAL SCLEROSIS                                | Family Medicine                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | ANEMIA COMPLICATING PREGNANCY, SECOND TRIMESTER              | Obstetrics/Gynecology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | CALCULUS OF GALLBLADDER W CHRONIC CHOLECYST W/O OBSTRUCTION  | Surgery, General                |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | CALCULUS OF KIDNEY   | Internal Medicine               |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | CALCULUS OF URETER   | Family Medicine                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | CHRONIC THROMBOEMBOLIC PULMONARY HYPERTENSION                | Family Medicine                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | CRACKED TOOTH  | Family Medicine                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | DEVIATED NASAL SEPTUM  | Family Medicine                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | EHLERS-DANLOS SYNDROME, UNSPECIFIED                          | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | ELEVATED PROSTATE SPECIFIC ANTIGEN [PSA]                     | Urology                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | ENCNTR FOR SUPRVSN OF NORMAL FIRST PREG, FIRST TRIMESTER     | Obstetrics/Gynecology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | ENCOUNTER FOR FULL-TERM UNCOMPLICATED DELIVERY               | Midwifery                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | ENCOUNTER FOR PREPROCEDURAL CARDIOVASCULAR EXAMINATION       | Internal Medicine               |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | ESOPHAGEAL VARICES WITHOUT BLEEDING                          | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | FRACTURE OF ORBITAL FLOOR, RIGHT SIDE, 7THB                  | Surgery, Oral And Maxillofacial |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | FRACTURE OF ORBITAL FLOOR, RIGHT SIDE, 7THK                  | Surgery, Oral And Maxillofacial |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | GENETIC SUSCEPTIBILITY TO OTHER DISEASE                      | Rheumatology                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | HYPERTROPHY OF BREAST  | Surgery, Plastic                |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | HYPOTHYROIDISM, UNSPECIFIED                                  | Endocrinology And Metabolism    |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | LEFT LOWER QUADRANT PAIN                                     | Family Medicine                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | MALIGNANT NEOPLASM OF AMPULLA OF VATER                       | Oncology                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT BRONCHUS AND LUNG | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT BRONCHUS AND LUNG | Hospital                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT BRONCHUS AND LUNG | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | MALIGNANT NEOPLASM OF RECTUM                                 | Hematology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, Plastic                |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | MELANOCYTIC NEVI OF RIGHT EAR AND EXTERNAL AURICULAR CANAL   | Pediatrics                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | MULTIPLE SCLEROSIS   | Neurology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | NONALCOHOLIC STEATOHEPATITIS (NASH)                          | Internal Medicine               | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN | NON-HODGKIN LYMPHOMA, UNSP, EXTRANODAL AND SOLID ORGAN SITES | Gastroenterology                |                    | 1                | 1               |  |                          |                        |                      |                 |

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|-----------------------------------|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| OFFICE O/P EST MOD 30-39 MIN      | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)                 | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)                 | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)                 | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | OTHER ARTICULAR CARTILAGE DISORDERS, UNSPECIFIED SITE       | Internal Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | OTHER HYPERTROPHIC DISORDERS OF THE SKIN                    | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | OTHER IDIOPATHIC SCOLIOSIS, THORACIC REGION                 | Chiropractic                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | OTHER POLYP OF SINUS  | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | OTHER SPECIFIED DISORDERS OF BONE, FOREARM                  | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | OTHER SPECIFIED SOFT TISSUE DISORDERS                       | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | PARKINSON'S DISEASE   | Internal Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | PARKINSON'S DISEASE   | Neurology                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | PATHOLOGICAL DISLOCATION OF UNSP JOINT, NEC                 | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | RADICULOPATHY, LUMBAR REGION                                | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | RETINAL DETACHMENT WITH SINGLE BREAK, RIGHT EYE             | Ophthalmology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | RIGHT TEMPOROMANDIBULAR JOINT DISORDER, UNSPECIFIED         | Surgery, Oral And Maxillofacial        |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | SECONDARY MALIGNANT NEOPLASM OF BONE                        | Hospital                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | SECONDARY MALIGNANT NEOPLASM OF BONE                        | Radiation Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | THYROTOXICOSIS W DIFFUSE GOITER W/O THYROTOXIC CRISIS       | Pediatric Endocrinology                |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS              | Pediatric Endocrinology                |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS              | Ophthalmology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS              | Optometry                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | ULCERATIVE COLITIS, UNSP WITH UNSPECIFIED COMPLICATIONS     | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | UNSP RETINAL DETACHMENT WITH RETINAL BREAK, UNSPECIFIED EYE | Ophthalmology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P EST MOD 30-39 MIN      | UNSPECIFIED SYSTOLIC (CONGESTIVE) HEART FAILURE             | Internal Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| OFFICE O/P NEW HI 60-74 MIN       | NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN                   | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P NEW LOW 30-44 MIN      | MALIGNANT NEOPLASM OF PANCREATIC DUCT                       | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE O/P NEW MOD 45-59 MIN      | AMYOTROPHIC LATERAL SCLEROSIS                               | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| OFFICE/OUTPATIENT VISIT EST       | Illness, unspecified  | Internal Medicine                      |                    |                  |                 |  |                          |                        | 1                    |                 |
| OMALIZUMAB INJECTION              | IDIOPATHIC URTICARIA  | Allergy                                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| OMALIZUMAB INJECTION              | IDIOPATHIC URTICARIA  | Allergy/Immunology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| OMALIZUMAB INJECTION              | OTHER GENERAL SYMPTOMS AND SIGNS                            | Allergy                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| OMEPRAZOLE 20 MG CAPSULE DR       |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| OMEPRAZOLE 40 MG CAPSULE DR       |   | Other                                  | 9                  | 1                | 1               |  |                          |                        |                      |                 |
| OMNIPOD DASH 5 PACK POD CARTRIDGE |   | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |



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|--|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| OMNIPOD DASH 5 PACK POD CARTRIDGE      |  | Other                                  | 11                 |                  |                 |  |                          |                        |                      |                 |
| OMNIPOD DASH 5 PACK POD CARTRIDGE      |  | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| OMNITROPE                              | Female infertility, unspecified                              | Obstetrics/Gynecology                  |                    |                  |                 |  |                          |                        | 1                    |                 |
| OMNITROPE 5.8 MG VIAL                  |  | Obstetrics/Gynecology                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| OMNITROPE 5.8 MG VIAL                  |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| ONC BRST MRNA 11 GENES                 | MALIG NEOPLASM OF UPPER-OUTER QUADRANT OF LEFT FEMALE BREAST | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ONC BRST MRNA 11 GENES                 | MALIGNANT NEOPLASM OF CENTRAL PORTION OF LEFT FEMALE BREAST  | Hematology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| ONC PROSTATE 3 GENES                   | ELEVATED PROSTATE SPECIFIC ANTIGEN [PSA]                     | Urology                                | 2                  |                  |                 |  |                          |                        |                      |                 |
| ONC PROSTATE 3 GENES                   | NODULAR PROSTATE WITH LOWER URINARY TRACT SYMPTOMS           | Urology                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| ONC PROSTATE MRNA 22 CNT GEN           | MALIGNANT NEOPLASM OF PROSTATE                               | Urology                                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| ONC THYR MRNA 10,196 GEN ALG           | NONTOXIC SINGLE THYROID NODULE                               | Pathology, Anatomic And Clinical       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ONC THYR MRNA 10,196 GEN ALG           | NONTOXIC SINGLE THYROID NODULE                               | Radiology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| ONCOLOGY LUNG                          | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Hematology                             |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| ONCOLOGY PROSTATE PROB SCORE           | ELEVATED PROSTATE SPECIFIC ANTIGEN [PSA]                     | Nurse Practitioner                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| ONCOLOGY PROSTATE PROB SCORE           | ELEVATED PROSTATE SPECIFIC ANTIGEN [PSA]                     | Urology                                | 2                  |                  |                 |  |                          |                        |                      |                 |
| ONCOLOGY PROSTATE PROB SCORE           | OTHER ABNORMAL TUMOR MARKERS                                 | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| ONEXTON 1.2%-3.75% GEL W/PUMP          |  | Dermatology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| ONEXTON 1.2%-3.75% GEL W/PUMP          |  | Other                                  |                    | 4                | 4               |  |                          |                        |                      |                 |
| ONGLYZA 5 MG TABLET                    |  | Other                                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| OPEN BOWEL TO SKIN                     | OTHER DISEASES OF STOMACH AND DUODENUM                       | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| OPEN TX NOSE FX UNCOMPLICATD           | OTHER SPECIFIED DISORDERS OF NOSE AND NASAL SINUSES          | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| OPEN/PERQ PLACE STENT SAME             | COMPRESSION OF VEIN  | Cardiovascular Disease                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| OPN IMPLTJ NEA PERPH NERVE             | CERVICALGIA  | Anesthesiology                         |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| OPN IMPLTJ NEA SACRAL NERVE            | URGENCY OF URINATION   | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| OPN TX ORBIT FX W/IMPLANT              | FRACTURE OF ORBITAL FLOOR, RIGHT SIDE, 7THK                  | Surgery, Oral And Maxillofacial        |                    | 1                | 1               |  |                          |                        |                      |                 |
| OPSUMIT 10 MG TABLET                   |  | Cardiology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| OPSUMIT 10 MG TABLET                   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| OPZELURA 1.5 % CREAM (G)               |  | Dermatology                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| ORACEA 40 MG CAP IR DR                 |  | Other                                  | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| ORAL FUNCTION THERAPY                  | AUTISTIC DISORDER  | Pediatric Neurology                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| ORENCIA CLICKJECT 125 MG/ML AUTO INJCT |  | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| ORENCIA CLICKJECT 125 MG/ML AUTO INJCT |  | PCP/Pediatrician                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| ORENCIA CLICKJECT 125 MG/ML AUTO INJCT |  | Rheumatology                           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| ORIAHNN 300-1-0.5 CAP SEQ              |  | Other                                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| ORLISSA 150 MG TABLET                  |  | OB/GYN                                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|-----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| ORLISSA 150 MG TABLET   |   | Obstetrics/Gynecology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| ORLISSA 150 MG TABLET   |   | Other                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| ORLISSA 200 MG TABLET   |   | Endocrinology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| ORLISSA 200 MG TABLET   |   | OB/GYN                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Orthovisc   | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE   | Sports Medicine             |                    |                  |                 |  |                          |                        | 1                    |                 |
| ORTHOVISC 30 MG/2 ML SYRINGE  |   | Other                       | 4                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE  | Pain Management             | 5                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE  | Physician Assistant         | 1                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE  | Sports Medicine             | 3                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE  | Surgery, Orthopedic         | 7                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | CHONDROMALACIA PATELLAE, RIGHT KNEE   | Surgery, Orthopedic         |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | OSTEOARTHRITIS OF KNEE, UNSPECIFIED   | Pain Management             | 1                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | PAIN IN LEFT KNEE   | Pain Management             |                    | 1                | 1               |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | PAIN IN LEFT KNEE   | Surgery, Orthopedic         |                    | 1                | 1               |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE  | Orthopaedic Sports Medicine | 1                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE  | Physician Assistant         | 1                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE  | Sports Medicine             | 4                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE  | Surgery, Orthopedic         | 8                  | 2                | 2               |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE   | Internal Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE   | Pain Management             | 1                  |                  |                 |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE   | Sports Medicine             | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| ORTHOVISC INJ PER DOSE  | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE   | Surgery, Orthopedic         | 12                 | 1                | 1               |  |                          |                        |                      |                 |
| OSENI 25 MG-30MG TABLET   |   | PCP/Pediatrician            | 1                  |                  |                 |  |                          |                        |                      |                 |
| OSPHENA 60 MG TABLET  |   | OB/GYN                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Osteochondral allograft, knee, open   | UNS INTERNAL DERANGEMENT UNSPECIFIED KNEE, OTHER ARTICULAR CARTILAGE DISORDERS UNS SITE | SURGERY- ORTHOPEDIC         | 1                  |                  |                 |  |                          |                        |                      |                 |
| OSTEOGEN ULTRASOUND STIMLTOR  | DISPL TRIMALLEOL FX R LOW LEG, SUBS FOR CLOS FX W NONUNION                              | Podiatry                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| OSTEOGEN ULTRASOUND STIMLTOR  | FX UNSP METATARSAL BONE(S), L FOOT, SUBS FOR FX W NONUNION                              | Family Medicine             | 1                  |                  |                 |  |                          |                        |                      |                 |
| OSTEOGEN ULTRASOUND STIMLTOR  | NONDISP FX OF BODY OF LEFT TALUS, INIT FOR CLOS FX                                      | Family Medicine             |                    | 1                | 1               |  |                          |                        |                      |                 |
| OSTEOGEN ULTRASOUND STIMLTOR  | NONDISP FX OF MIDDLE THIRD OF NAVIC BONE OF R WRIST, INIT                               | Surgery, Orthopedic         | 1                  |                  |                 |  |                          |                        |                      |                 |
| OSTEOGEN ULTRASOUND STIMLTOR  | OTH INTRAOP AND POSTPROC COMP AND DISORDERS OF THE MS SYS                               | Podiatry                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Osteotomy, intertrochanteric or subtrochanteric including internal or external fixation and/or cast | SPASTIC DIPLEGIC CEREBRAL PALSY   | SURGERY- ORTHOPEDIC         | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|---|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus (bowleg) or genu valgus (knock-knee));after epiphyseal closure | UNS FX SHAFT LT FIBULA SUBSQT CLOS FX MALUNION,<br>UNS FX SHAFT LT TIBIA SUBSQT CLOS FX MALUNION | SURGERY-<br>ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| OTEZLA   | Psoriasis vulgaris   | Dermatology                               |                    |                  |                 |  |                          |                        | 1                    |                 |
| OTEZLA   | Psoriasis vulgaris   | Surgery, Thoracic                         |                    |                  |                 |  |                          |                        | 1                    |                 |
| OTEZLA   | Psoriasis, unspecified   | Rheumatology                              |                    |                  |                 |  |                          |                        | 2                    |                 |
| OTEZLA 10-20-30MG TAB DS PK  |  | Dermatology                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| OTEZLA 10-20-30MG TAB DS PK  |  | Other                                     | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| OTEZLA 10-20-30MG TAB DS PK  |  | PCP/Pediatrician                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| OTEZLA 30 MG TABLET  |  | Dermatology                               | 7                  | 4                | 4               |  |                          |                        |                      |                 |
| OTEZLA 30 MG TABLET  |  | Other                                     | 11                 | 5                | 5               |  |                          |                        |                      |                 |
| OTEZLA 30 MG TABLET  |  | PCP/Pediatrician                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| OTEZLA 30 MG TABLET  |  | Rheumatology                              | 2                  |                  |                 |  |                          |                        |                      |                 |
| OTEZLA 30 MG TABLET  | chronic plaque psoriasis   | Dermatology                               |                    |                  |                 |  |                          |                        | 1                    |                 |
| Other Cancer   | Abnormal weight loss   | INTERNAL MEDICINE                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Other Cancer   | Malignant neoplasm of thyroid gland  | RADIATION<br>ONCOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Other Cancer   | Thyrotoxicosis with diffuse goiter without thyrotoxic crisis or storm                            | Internal Medicine                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Other Cancer   | Thyrotoxicosis with diffuse goiter without thyrotoxic crisis or storm                            | RADIATION<br>ONCOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Other Psychiatric Services or Procedures   | Major depressv disorder, recurrent severe w/o psych features                                     | Behavioral Health                         | 5                  |                  |                 |  |                          |                        |                      |                 |
| OTREXUP 20MG/0.4ML AUTO INJCT  |  | Gastroenterology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| OTREXUP 20MG/0.4ML AUTO INJCT  |  | Other                                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| OTZELA   | Psoriasis vulgaris   | Dermatology                               |                    |                  |                 |  |                          |                        | 1                    |                 |
| Outpatient Behavioral Health   | Adjustment disorder, unspecified   | Behavioral Health                         |                    |                  |                 |  |                          | 1                      |                      |                 |
| Outpatient Behavioral Health   | Anxiety disorder, unspecified  | Behavioral Health                         |                    |                  |                 |  |                          |                        | 1                    |                 |
| Outpatient Behavioral Health   | Mixed obsessional thoughts and acts  | Behavioral Health                         |                    |                  |                 |  |                          |                        | 1                    |                 |
| OVIDREL 250MCG/0.5 SYRINGE   |  | Endocrinology                             | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| OVIDREL 250MCG/0.5 SYRINGE   |  | Other                                     | 15                 |                  |                 |  |                          |                        |                      |                 |
| OVIDREL 250MCG/0.5 SYRINGE   |  | Reproductive<br>Endocrinology/Infertility | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| OXTELLAR XR 300 MG TAB ER 24H  |  | Other                                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE HCL 10 MG TABLET   |  | Other                                     | 7                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE HCL 15 MG TABLET   |  | Other                                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE HCL 30 MG TABLET   |  | Behavioral Health                         | 2                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE HCL 30 MG TABLET   |  | Neurology                                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE HCL 30 MG TABLET   |  | Other                                     | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| OXYCODONE HCL 5 MG TABLET  |  | Other                                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE HCL 5 MG TABLET  |  | Physiatry/Rehabilitative                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE HCL ER 10 MG TAB ER 12H  |  | Physiatry/Rehabilitative                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| OXYCODONE-ACETAMINOPHEN 10MG-325MG TABLET  |  | Family Medicine                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE-ACETAMINOPHEN 10MG-325MG TABLET  |  | Other                                     | 5                  |                  |                 |  |                          |                        |                      |                 |

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| OXYCODONE-ACETAMINOPHEN 5 MG-325MG TABLET   |   | Other                          | 3                  |                  |                 |  |                          |                        |                      |                 |
| OXYCODONE-ACETAMINOPHEN 7.5-325 MG TABLET   |   | Other                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| OXYCONTIN 10 MG TAB ER 12H  |   | Other                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| OXYCONTIN 20 MG TAB ER 12H  |   | Oncology/Radiation             |                    | 1                | 1               |  |                          |                        |                      |                 |
| OXYCONTIN 30 MG TAB ER 12H  |   | Other                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| OXYMORPHONE HCL 10 MG TABLET  |   | Other                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| OZEMPIC 0.25 OR .5 PEN INJCTR   |   | Other                          | 17                 | 11               | 10              | 1                                      |                          |                        |                      |                 |
| OZEMPIC 0.25 OR .5 PEN INJCTR   |   | PCP/Pediatrician               | 7                  | 2                | 2               |  |                          |                        |                      |                 |
| OZEMPIC 1/0.75 (3) PEN INJCTR   |   | Other                          | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| OZEMPIC 1MG/0.75ML PEN INJCTR   |   | Endocrinology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| OZEMPIC 1MG/0.75ML PEN INJCTR   |   | Other                          | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| PACLITAXEL INJECTION  | MALIGNANT NEOPLASM OF ENDOMETRIUM                         | Family Medicine                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PACLITAXEL INJECTION  | MALIGNANT NEOPLASM OF ENDOMETRIUM                         | Gynecologic Oncology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| PALB2 GENE FULL GENE SEQ  | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY    | Oncology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| PALFORZIA 0.5 TO 6MG CAP SPRINK   |   | Pediatric Allergy & Immunology | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PALONOSETRON HCL  | MALIGNANT NEOPLASM OF BLADDER, UNSPECIFIED                | Oncology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PALONOSETRON HCL  | MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED                  | Neurology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PALONOSETRON HCL  | MALIGNANT NEOPLASM OF ENDOMETRIUM                         | Family Medicine                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PALONOSETRON HCL  | MALIGNANT NEOPLASM OF ENDOMETRIUM                         | Gynecologic Oncology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| PANCREAZE 21 K-54.7K CAPSULE DR   |   | Other                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| PANTOPRAZOLE SODIUM 40 MG TABLET DR   |   | Gastroenterology               | 2                  |                  |                 |  |                          |                        |                      |                 |
| PANTOPRAZOLE SODIUM 40 MG TABLET DR   |   | Other                          | 17                 | 1                | 1               |  |                          |                        |                      |                 |
| PANTOPRAZOLE SODIUM 40 MG TABLET DR   |   | PCP/Pediatrician               | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Circadian rhythm sleep disorder, delayed sleep phase type | Pulmonology                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric)               | Allergy/Immunology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric)               | Cardiac Electrophysiology      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric)               | Infectious Disease             | 1                  |                  |                 |  |                          |                        |                      |                 |

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| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | Internal Medicine                      | 8                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | Nurse Practitioner                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | PCP/Pediatrician                       | 5                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | Physician Assistant                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | Respiratory Therapy                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric) | Rheumatology                           | 4                  |                  |                 |  |                          |                        |                      |                 |

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|---|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric)                | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric)                | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAP device, or Positive Airway Pressure device - a home based healthcare device that determines and provides treatment for a breathing disorder diagnosed by a Home Sleep Test (HST) or a facility based sleep test | Obstructive sleep apnea (adult) (pediatric)                | Surgery, Thoracic                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| PARICALCITOL  | END STAGE RENAL DISEASE                                    | Nephrology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| PAROXETINE ER 12.5 MG TAB ER 24H  |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PAROXETINE HCL 40 MG TABLET   |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| Partial hospitalization services, less than 24 hours, per diem  | Alcohol dependence, uncomplicated                          | Behavioral Health                      | 6                  |                  |                 |  |                          |                        |                      |                 |
| Partial hospitalization services, less than 24 hours, per diem  | Opioid dependence, uncomplicated                           | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Partial hospitalization services, less than 24 hours, per diem  | Sedative, hypnotic or anxiolytic dependence, uncomplicated | Behavioral Health                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL HYSTERECTOMY  | PELVIC AND PERINEAL PAIN                                   | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL PROCTECTOMY   | ULCERATIVE (CHRONIC) PROCTITIS WITH OTHER COMPLICATION     | Surgery, Colon And Rectal              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL REMOVAL OF COLON  | DVTRCLI OF LG INT W/O PERFORATION OR ABSCESS W/O BLEEDING  | Surgery, Colon And Rectal              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL REMOVAL OF COLON  | DVTRCLI OF LG INT W/O PERFORATION OR ABSCESS W/O BLEEDING  | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL REMOVAL OF KIDNEY   | NEOPLASM OF UNSPECIFIED BEHAVIOR OF UNSPECIFIED KIDNEY     | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL REMOVAL OF PANCREAS   | ACUTE PANCREATITIS WITH UNINFECTED NECROSIS, UNSPECIFIED   | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL REMOVAL OF PANCREAS   | MALIGNANT NEOPLASM OF HEAD OF PANCREAS                     | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL REMOVAL OF PANCREAS   | OTHER SPECIFIED DISEASES OF PANCREAS                       | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL REMOVAL OF TONGUE   | MALIGNANT (PRIMARY) NEOPLASM, UNSPECIFIED                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| PARTIAL REMOVAL OF VULVA  | EXCESSIVE AND FREQUENT MENSTRUATION WITH IRREGULAR CYCLE   | Obstetrics/Gynecology                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PAXIL 10 MG/5 ML ORAL SUSP  |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PENNSAID 20MG/G(2%) SOL MD PMP  |  | Other                                  | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| PENNSAID 20MG/G(2%) SOL MD PMP  |  | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PERI-IMPLT CAPSLC BRST COMPL  | DISPROPORTION OF RECONSTRUCTED BREAST                      | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PERI-IMPLT CAPSLC BRST COMPL  | ESTROGEN RECEPTOR POSITIVE STATUS [ER+]                    | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| PERI-IMPLT CAPSLC BRST COMPL  | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST  | Surgery, Plastic       | 2                  |                  |                 |  |                          |                        |                      |                 |
| PERI-IMPLT CAPSLC BRST COMPL  | OTHER SPECIFIED DISORDERS OF BREAST   | Surgery, Plastic       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PERI-IMPLT CAPSLC BRST COMPL  | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST  | Surgery, Plastic       | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| PERQ CERVICOTHORACIC INJECT   | COLLAPSED VERTEBRA, NEC, SITE UNSP, INIT  | Internal Medicine      |                    | 1                | 1               |  |                          |                        |                      |                 |
| PERQ CLSR TCAT L ATR APNDGE   | PAROXYSMAL ATRIAL FIBRILLATION  | Cardiovascular Disease |                    | 1                | 1               |  |                          |                        |                      |                 |
| PERQ VERTEBRAL AUGMENTATION   | AGE-RELATED OSTEOPOROSIS W/O CURRENT PATHOLOGICAL FRACTURE  | Radiology, Diagnostic  | 2                  |                  |                 |  |                          |                        |                      |                 |
| PERQ VERTEBRAL AUGMENTATION   | PATHOLOGICAL FRACTURE, OTHER SITE, INIT ENCNR FOR FRACTURE  | Surgery, Neurological  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PERQ VERTEBRAL AUGMENTATION   | WEDGE COMPRESSION FRACTURE OF FIRST LUMBAR VERTEBRA, SEQUELA  | Surgery, Orthopedic    |                    | 1                | 1               |  |                          |                        |                      |                 |
| PERTZYE   | CYSTIC FIBROSIS (CF)  | Pediatric Neurology    |                    |                  |                 |  |                          | 1                      |                      |                 |
| PERTZYE 16K-57.5K CAPSULE DR  |   | Other                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET BRAIN; metabolic evaluation   | UNSPEC DEMENTIA WITHOUT BEHAVIORAL DISTURBANCE  | PSYCHIATRY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET CARDIAC, myocardial imaging, perfusion; multiple studies at rest and/or stress                        | HYPERLIPIDEMIA UNSPECIFIED, ABNORMAL ELECTROCARDIOGRAM, SHORTNESS OF BREATH, ESSENTIAL PRIMARY HYPERTENSION, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET CARDIAC, myocardial imaging, perfusion; multiple studies at rest and/or stress                        | HYPERLIPIDEMIA UNSPECIFIED, ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, SYNCOPE AND COLLAPSE  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET CARDIAC, myocardial imaging, perfusion; multiple studies at rest and/or stress                        | SARCOID MYOCARDITIS   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET IMAGE W/CT SKULL-THIGH  | BURKITT LYMPHOMA, LYMPH NODES OF MULTIPLE SITES   | Physician Assistant    | 2                  |                  |                 |  |                          |                        |                      |                 |
| PET IMAGE W/CT SKULL-THIGH  | DIFFUSE LARGE B-CELL LYMPHOMA, EXTRNOD AND SOLID ORGAN SITES  | Hematology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET IMAGE W/CT SKULL-THIGH  | DIFFUSE LARGE B-CELL LYMPHOMA, EXTRNOD AND SOLID ORGAN SITES  | Oncology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET IMAGE W/CT SKULL-THIGH  | NODULAR SCLEROSIS HODGKIN LYMPHOMA, INTRATHORAC LYMPH NODES   | Hematology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET Imaging; skull base to mid-thigh  | MALIGNANT NEOPLASM OF LEFT OVARY  | ONCOLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET Imaging; skull base to mid-thigh  | MALIGNANT NEOPLASM OF PROSTATE  | UROLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body | CONGENITAL MALFORMATIONS OF ADRENAL GLAND, SECONDARY MALIGNANT NEOPLASM OF BRAIN, MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG                          | ONCOLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body | HODGKIN LYMPHOMA UNSPECIFIED UNSPECIFIED SITE   | HEMATOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body | INTRAHEPATIC BILE DUCT CARCINOMA  | SURGERY-GENERAL        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body                  | MALIGNANT MELANOMA LEFT UP LIMB INCL SHOULDER   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body                  | MALIGNANT NEOPLASM OF PROSTATE  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body                  | MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION  | ONCOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body                  | SECONDARY & UNS MALIG NEOPLASM LYMPH NODE UNS   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body                  | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT Imaging, (concurrently acquired CT attenuation correction and anatomical localization); whole body                  | SECONDARY MALIGNANT NEOPLASM OF UNSPECIFIED SITE  | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | ABNORMAL LEVELS OF OTHER SERUM ENZYMES, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | ABNORMAL RESULTS FUNCTION STUDIES OTH ORGN & SYS  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | ABNORMAL RESULTS FUNCTION STUDIES OTH ORGN & SYS, ABNORMAL RESULTS OF PULMONARY FUNCTION STUDIES, MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG, MALIGNANT NEOPLASM OF RIGHT MAIN BRONCHUS, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | ABNORMAL RESULTS FUNCTION STUDIES OTH ORGN & SYS, LOCALIZED ENLARGED LYMPH NODES, ABNORMAL RESULTS OF PULMONARY FUNCTION STUDIES, MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG, SEC & UNS MALIG NEO LYMPH NODES HEAD FACE & NECK     | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | ABNORMAL RESULTS FUNCTION STUDIES OTH ORGN & SYS, LOCALIZED ENLARGED LYMPH NODES, MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | ANAPLASTIC LCL ALK-POSITIVE NODES MULTIPLE SITES  | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | BURKITT LYMPHOMA LYMPH NODES AXILLA & UPPER LIMB  | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |



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|--|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | BURKITT LYMPHOMA UNSPECIFIED SITE   | ONCOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | CONGENITAL MALFORMATIONS OF ADRENAL GLAND, SECONDARY MALIGNANT NEOPLASM OF BRAIN, MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | DIFFUSE LARGE B-CELL LYMPHOMA INTRA-ABD NODES   | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | DIFFUSE LARGE B-CELL LYMPHOMA NODES MX SITES  | HEMATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | DISORDER OF BONE UNSPECIFIED  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | DISORDER OF BONE UNSPECIFIED, MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | FOLLICULAR LYMPHOMA UNSPEC UNSPEC SITE  | CARDIOVASCULAR DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | FOLLICULAR LYMPHOMA UNSPEC UNSPEC SITE  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | GENERALIZED ENLARGED LYMPH NODES  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | GENERALIZED ENLARGED LYMPH NODES, SQUAMOUS CELL CARCINOMA OF SKIN, UNSPECIFIED  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | HODGKIN LYMPHOMA UNSPECIFIED UNSPECIFIED SITE   | HEMATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | HYPERURICEMIA W/O SIGNS IA & TOPHACEOUS DISEASE, GENERALIZED ENLARGED LYMPH NODES, NODULAR SCLEROSIS CLASS HL INTRAPELVIC NODES, ARTHROPATHIC PSORIASIS UNSPECIFIED, ENC F/U EXAM AFTR Cmpl TX OTH THAN MALIG NEOPLSM | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | INTRAHEPATIC BILE DUCT CARCINOMA, MALIGNANT NEOPLASM LIVER NOT SPEC PRIMARY/SECOND  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | LEUKEMIA UNSPEC NOT HAVING ACHIEVED REMISSION, SMALL CELL B-CELL LYMPHOMA NODES MULTIPLE SITES  | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | LIVER DISEASE UNSPECIFIED  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | LOCALIZED ENLARGED LYMPH NODES   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | LOCALIZED ENLARGED LYMPH NODES, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD | CRITICAL CARE MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST                                 | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIG NEOPLASM LOWER-OUTER QUAD UNS FEMALE BRST                                  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST                                 | HEMATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT MELANOMA OF OTHER PART OF TRUNK, OTHER DISEASES OF SALIVARY GLANDS     | PLASTIC SURGERY         |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT MELANOMA OF SKIN UNSPECIFIED   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM ANTERIOR 2/3 TONGUE PART UNS                                  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS                                  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM CORTEX OF RIGHT ADRENAL GLAND                                 | HEMATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM CORTEX UNS ADRENAL GLAND                                      | HEMATOLOGY AND ONCOLOGY |                    | 2                | 2               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG                                   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG                                   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM LOWER LOBE RT BRONCHUS/LUNG                                   | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF AMPULLA OF VATER   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF CECUM                      | HEMATOLOGY              |                    | 2                | 2               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED      | ONCOLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED      | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF HEAD FACE AND NECK         | OTOLARYNGOLOGIST (ENT)  | 2                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF LEFT OVARY                 | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF LOWER THIRD OF ESOPHAGUS   | ONCOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF LOWER THIRD OF ESOPHAGUS   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF MANDIBLE                   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF NASOPHARYNX UNSPECIFIED    | OTOLARYNGOLOGIST (ENT)  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF NASOPHARYNX UNSPECIFIED    | RADIOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF OROPHARYNX UNSPECIFIED     | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF VULVA | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED       | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF PROSTATE                   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF PROSTATE                   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF PROSTATE                   | UROLOGY                 | 1                  | 3                | 3               |  |                          |                        |                      |                 |

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|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF RECTUM   | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF RECTUM   | HEMATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF RECTUM   | HEMATOLOGY AND ONCOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF RECTUM   | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF RECTUM   | RADIATION ONCOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED  | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF THYROID GLAND  | HEMATOLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF TONGUE UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF TONSILLAR PILLAR   | ONCOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF UNSPECIFIED OVARY  | GYNECOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OF UNSPECIFIED OVARY  | HEMATOLOGY AND ONCOLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST   | HEMATOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX   | RADIATION ONCOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM OVERLAPPING SITES OROPHARYNX  | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | HEMATOLOGY AND ONCOLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, SECONDARY MALIGNANT NEOPLASM OF SKIN, ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST | RADIATION ONCOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | ONCOLOGY                  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG   | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG   | ONCOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG   | RADIATION ONCOLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT NEOPLASM UPPER LOBE UNS BRONCHUS/LUNG  | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, MALIGNANT NEOPLASM OF TONGUE UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MYELOID SARCOMA IN REMISSION   | Neurology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | MYELOID SARCOMA NOT HAVING ACHIEVED REMISSION  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | NEOPLASM OF UNS BEHAVIOR DIGESTIVE SYSTEM  | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | NON-HODGKIN LYMPHOMA UNS UNSPECIFIED SITE  | ONCOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | OTH SPEC SX & SIGNS INVLV THE DIGESTV SYS & ABD  | GASTROENTEROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | OTHER BENIGN NEUROENDOCRINE TUMORS   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | OTHER LONG TERM CURRENT DRUG THERAPY   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | OTHER NON-FOLLICULAR LYMPHOMA UNSPECIFIED SITE   | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD                                       | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD                                       | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD                                       | PULMONARY DISEASES      | 2                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | OTHER SPECIFIED DISEASES OF BILIARY TRACT  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST   | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | Rising PSA following treatment for malignant neoplasm of prostate                      | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SECONDARY & UNS MALIG NEOPLASM LYMPH NODE UNS  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAPPING SITES NASOPHARYNX | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SOLITARY PULMONARY NODULE  | FAMILY PRACTICE         | 3                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SOLITARY PULMONARY NODULE  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description   | Diagnosis Code Description  | Provider Specialty     | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS | HEMATOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM OF GLOTTIS                    | OTOLARYNGOLOGIST (ENT) |                    | 1                | 1               |  |                          |                        |                      |                 |
| PET/CT imaging, (concurrently acquired CT for attenuation correction and anatomical localization); skull base to mid-thigh | UNS ABNORM FIND IN SPEC FROM OTH ORGN SYS & TISS                            | ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| PEXEVA 40 MG TABLET  |   | Other                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PHEXXI 1.8-1-0.4% GEL/PF APP   |   | OB/GYN                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| PHEXXI 1.8-1-0.4% GEL/PF APP   |   | Other                  | 6                  |                  |                 |  |                          |                        |                      |                 |
| PHLEB VEINS - EXTREM 20+   | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN                     | Surgery, Thoracic      | 2                  |                  |                 |  |                          |                        |                      |                 |
| PHLEB VEINS - EXTREM 20+   | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION                   | Surgery, Vascular      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PIK3CA GENE TRGT SEQ ALYS  | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG                    | Hematology             |                    | 1                | 1               |  |                          |                        |                      |                 |
| PIK3CA GENE TRGT SEQ ALYS  | SOLITARY PULMONARY NODULE   | Surgery, Thoracic      |                    | 1                | 1               |  |                          |                        |                      |                 |
| PLACE RT DEVICE/MARKER PROS  | MALIGNANT NEOPLASM OF PROSTATE  | Radiation Oncology     | 1                  |                  |                 |  |                          |                        |                      |                 |
| PLENVU 140-9-5.2G POWD PK SQ   |   | Other                  | 4                  |                  |                 |  |                          |                        |                      |                 |
| PMS2 GENE DUP/DELET VARIANTS   | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS                | Nurse Practitioner     |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE DUP/DELET VARIANTS   | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS                | Obstetrics/Gynecology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PMS2 GENE DUP/DELET VARIANTS   | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                                    | Hematology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PMS2 GENE DUP/DELET VARIANTS   | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST                | Nurse Practitioner     |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE DUP/DELET VARIANTS   | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY                      | Oncology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE DUP/DELET VARIANTS   | SOLITARY PULMONARY NODULE   | Surgery, Thoracic      |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | BURKITT LYMPHOMA, LYMPH NODES OF AXILLA AND UPPER LIMB                      | Hematology             |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS                | Nurse Practitioner     |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS                | Obstetrics/Gynecology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | GASTROINTESTINAL STROMAL TUMOR, UNSPECIFIED SITE                            | Hematology             |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | INTRAHEPATIC BILE DUCT CARCINOMA  | Hematology             |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | MALIGNANT MELANOMA OF LEFT LOWER LIMB, INCLUDING HIP                        | Internal Medicine      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | MALIGNANT MELANOMA OF SKIN, UNSPECIFIED                                     | Oncology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED                                    | Hematology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                                   | Internal Medicine      |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX                      | Hematology             |                    | 2                | 2               |  |                          |                        |                      |                 |

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|--|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| PMS2 GENE FULL SEQ ANALYSIS  | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Hematology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Nurse Practitioner                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTH PRT UTERUS     | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| PMS2 GENE FULL SEQ ANALYSIS  | SOLITARY PULMONARY NODULE                                    | Surgery, Thoracic                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| POLYSOM 6/> YRS 4/> PARAM  | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)                  | Sleep Medicine                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| POLYSOM 6/>YRS CPAP 4/> PARM   | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)                  | Sleep Medicine                         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Hypersomnia, unspecified                                     | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Hypersomnia, unspecified                                     | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Hypersomnia, unspecified                                     | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Hypertrophy of tonsils                                       | Urology                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Insomnia, unspecified  | Nurse Practitioner                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Insomnia, unspecified  | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Morbid (severe) obesity due to excess calories               | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Narcolepsy without cataplexy                                 | Sleep Medicine                         | 2                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Cardiac Electrophysiology              |                    | 2                | 2               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Cardiovascular Disease                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Family Medicine                        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Internal Medicine                      | 6                  | 8                | 8               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Nephrology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Neurology                              | 2                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | PCP/Pediatrician                       | 2                  | 4                | 4               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Pediatrics                             |                    | 2                | 2               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                  | Pulmonology                            | 3                  | 1                | 1               |  |                          |                        |                      |                 |



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| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                           | Sleep Medicine                         | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                           | Surgery                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                           | Surgery, General                       | 1                  | 6                | 6               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Obstructive sleep apnea (adult) (pediatric)                           | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Other fatigue   | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Other forms of dyspnea  | Pulmonology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Other hypersomnia   | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Other symptoms and signs involving the nervous system                 | Internal Medicine                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Parasomnia, unspecified   | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Periodic limb movement disorder                                       | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Persons encountering health services in other specified circumstances | Endocrinology And Metabolism           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Restless legs syndrome  | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Sleep apnea, unspecified  | ENT/Otolaryngology                     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Sleep apnea, unspecified  | Family Medicine                        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Sleep apnea, unspecified  | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Sleep apnea, unspecified  | Sleep Medicine                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Sleep disorder, unspecified   | Internal Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Snoring   | Cardiac Electrophysiology              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Snoring   | Internal Medicine                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Snoring   | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Snoring   | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Somnolence  | Allergy/Immunology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab | Somnolence  | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Central sleep apnea in conditions classified elsewhere | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Encounter for other preprocedural examination          | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Essential (primary) hypertension                       | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Hypersomnia, unspecified                               | Infectious Disease                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Hypersomnia, unspecified                               | Neurology                              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Hypersomnia, unspecified                               | Nurse Practitioner                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Hypersomnia, unspecified                               | Pulmonology                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Hypertrophy of tonsils                                 | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Morbid (severe) obesity due to excess calories         | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Morbid (severe) obesity due to excess calories         | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Narcolepsy without cataplexy                           | Pulmonology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Nonrheumatic pulmonary valve insufficiency             | Clinical Genetics                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric)            | Allergy/Immunology                     | 2                  | 7                | 7               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric)            | Cardiac Electrophysiology              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric)            | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric)            | Clinical Genetics                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | ENT/Otolaryngology                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Family Medicine                        | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Hematology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Internal Medicine                      | 7                  | 6                | 6               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Neurology                              | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Nurse Practitioner                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | OB/GYN                                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Obstetrics/Gynecology                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Otolaryngology (Ear, Nose, And Throat) | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | PCP/Pediatrician                       | 6                  | 3                | 3               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Pediatrics                             | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Podiatry                               | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Pulmonology                            | 3                  | 4                | 4               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Respiratory Therapy                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Rheumatology                           | 6                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Sleep Medicine                         | 6                  | 2                | 2               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Speech Therapy                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Surgery                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Surgery, General                       | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Surgery, Orthopedic                    | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Surgery, Plastic                       | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Obstructive sleep apnea (adult) (pediatric) | Surgery, Vascular                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Other fatigue                               | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Other hypersomnia                           | Neurology                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Other hypersomnia                           | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Paroxysmal atrial fibrillation              | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | REM sleep behavior disorder                 | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Sleep apnea, unspecified                    | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Sleep apnea, unspecified                    | Internal Medicine                      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Sleep apnea, unspecified                    | Nurse Practitioner                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Sleep apnea, unspecified                    | Pulmonology                            | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Sleep apnea, unspecified                    | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Sleep apnea, unspecified                    | Sleep Medicine                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Sleep disorder, unspecified                 | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Snoring                                     | Internal Medicine                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Snoring                                     | Pulmonology                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Snoring                                     | Radiation Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Snoring                                     | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Snoring                                     | Sleep Medicine                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient 6 years or older in a sleep lab with breathing equipment | Snoring                                     | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Polysomnography, sleep monitoring of patient younger than 6 years old in a sleep lab                  | Obstructive sleep apnea (adult) (pediatric) | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| POMALYST 3 MG CAPSULE   |   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| POMALYST 4 MG CAPSULE   |   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PONVORY 20 MG TABLET  |   | Neurology                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| POSACONAZOLE 100 MG TABLET DR   |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PRADAXA 150 MG CAPSULE  |   | Cardiology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| PRADAXA 150 MG CAPSULE  |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PRALUENT PEN 75 MG/ML PEN INJCTR  |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PREGNYL 10000 UNIT VIAL   |   | Endocrinology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| PREGNYL 10000 UNIT VIAL   |   | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| PREGNYL 10000 UNIT VIAL   |   | Reproductive Endocrinology/Infertility | 1                  |                  |                 |  |                          |                        |                      |                 |
| PREMARIN 0.625 MG/G CREAM/APPL  |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| PREMARIN 0.625 MG/G CREAM/APPL  |   | PCP/Pediatrician                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| PREMARIN 0.625 MG/G CREAM/APPL  |   | Urology                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| PREPARE FACE/ORAL PROSTHESIS  | MALOCCLUSION, UNSPECIFIED                   | Surgery, Oral And Maxillofacial        | 1                  |                  |                 |  |                          |                        |                      |                 |
| PREPARE FACE/ORAL PROSTHESIS  | MYALGIA OF MASTICATION MUSCLE               | Surgery, Oral And Maxillofacial        | 1                  |                  |                 |  |                          |                        |                      |                 |
| PROAIR DIGIHALER 90 MCG AER PW BAS  |   | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |

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| PROAIR HFA 90 MCG HFA AER AD             |   | Other               |                    | 1                | 1               |  |                          |                        |                      |                 |
| PROAIR RESPICLICK 90 MCG AER POW BA      |   | PCP/Pediatrician    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PROCRIT 40000/ML VIAL                    |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| PROGRAF                                  | Liver transplant status   | Rheumatology        |                    |                  |                 |  |                          | 1                      |                      |                 |
| PROGRAF 0.5 MG CAPSULE                   |   | Other               |                    | 1                | 1               |  |                          |                        |                      |                 |
| PROGRAF 1 MG CAPSULE                     |   | Other               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| PROLIA                                   | Age-related osteoporosis without current pathological fracture            | Other               |                    |                  |                 |  |                          |                        | 1                    |                 |
| PROLIA                                   | Other specified disorders of bone density and structure, unspecified site | Family Medicine     |                    |                  |                 |  |                          | 1                      |                      |                 |
| PROLIA 60 MG/ML SYRINGE                  |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| PROLNG OFF/OP E/M EA 15 MIN              | NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN                                 | Neurology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| PROMACTA 25 MG TABLET                    |   | Oncology/Radiation  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Prostate Adenocarcinoma                  | Malignant neoplasm of prostate  | RADIATION ONCOLOGY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| PROSTATE SATURATION SAMPLING             | ELEVATED PROSTATE SPECIFIC ANTIGEN [PSA]                                  | Urology             |                    | 1                | 1               |  |                          |                        |                      |                 |
| PROZAC 40 MG CAPSULE                     |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| PSG, < 6 YEARS OLD                       | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)                               | Respiratory Therapy | 1                  |                  |                 |  |                          |                        |                      |                 |
| PSG, >= 6 YEARS OLD, 4 CHANNEL, ATTENDED | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)                               | Respiratory Therapy | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| PSG, >= 6 YEARS OLD, 4 CHANNEL, ATTENDED | OTHER HYPERSOMNIA   | Respiratory Therapy | 1                  |                  |                 |  |                          |                        |                      |                 |
| PSG, >= 6 YEARS OLD, 4 CHANNEL, ATTENDED | PARASOMNIA, UNSPECIFIED   | Respiratory Therapy | 1                  |                  |                 |  |                          |                        |                      |                 |
| Psychotherapy Services and Procedures    | Attention-deficit hyperactivity disorder, combined type                   | Behavioral Health   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| Psychotherapy Services and Procedures    | Illness, unspecified  | Behavioral Health   | 1                  |                  |                 |  |                          |                        |                      |                 |
| PSYCL/NRPSYC TECH 1ST                    | MILD COGNITIVE IMPAIRMENT, SO STATED                                      | Family Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| PSYCL/NRPSYC TST PHY/QHP 1ST             | MILD COGNITIVE IMPAIRMENT, SO STATED                                      | Family Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| PSYCL/NRPSYC TST PHY/QHP EA              | MILD COGNITIVE IMPAIRMENT, SO STATED                                      | Family Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| PSYCL/NRPSYC TST TECH EA                 | MILD COGNITIVE IMPAIRMENT, SO STATED                                      | Family Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| PT EVAL HIGH COMPLEX 45 MIN              | PAIN IN RIGHT HIP   | Family Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| PT EVAL LOW COMPLEX 20 MIN               | PAIN IN RIGHT HIP   | Family Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| PT EVAL MOD COMPLEX 30 MIN               | LUNG TRANSPLANT STATUS  | Pulmonary Disease   |                    | 1                | 1               |  |                          |                        |                      |                 |
| PT EVAL MOD COMPLEX 30 MIN               | PAIN IN RIGHT HIP   | Family Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| PT EVAL MOD COMPLEX 30 MIN               | PRESENCE OF LEFT ARTIFICIAL KNEE JOINT                                    | Surgery, Orthopedic |                    | 1                | 1               |  |                          |                        |                      |                 |
| PT PRGRM FOR IMPLT NEUROSTIM             | POSTLAMINECTOMY SYNDROME, NOT ELSEWHERE CLASSIFIED                        | Pain Management     | 1                  |                  |                 |  |                          |                        |                      |                 |
| PTEN GENE DUP/DELET VARIANT              | ABSENCE EPILEPTIC SYNDROME, NOT INTRACTABLE, W/O STAT EPI                 | Pediatric Neurology |                    | 1                | 1               |  |                          |                        |                      |                 |
| PTEN GENE DUP/DELET VARIANT              | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY                    | Oncology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| PTEN GENE FULL SEQUENCE                  | ABSENCE EPILEPTIC SYNDROME, NOT INTRACTABLE, W/O STAT EPI                 | Pediatric Neurology |                    | 1                | 1               |  |                          |                        |                      |                 |
| PTEN GENE FULL SEQUENCE                  | BURKITT LYMPHOMA, LYMPH NODES OF AXILLA AND UPPER LIMB                    | Hematology          |                    | 1                | 1               |  |                          |                        |                      |                 |

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| PTEN GENE FULL SEQUENCE                | GASTROINTESTINAL STROMAL TUMOR, UNSPECIFIED SITE             | Hematology                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| PTEN GENE FULL SEQUENCE                | INTRAHEPATIC BILE DUCT CARCINOMA                             | Hematology                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| PTEN GENE FULL SEQUENCE                | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Internal Medicine          |                    | 1                | 1               |  |                          |                        |                      |                 |
| PTEN GENE FULL SEQUENCE                | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX       | Hematology                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| PTEN GENE FULL SEQUENCE                | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY       | Oncology                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| PULMICORT FLEXHALER 180 MCG AER POW BA |  | PCP/Pediatrician           |                    | 1                | 1               |  |                          |                        |                      |                 |
| PULMONARY REHAB REC                    | AWAITING ORGAN TRANSPLANT STATUS                             | Pulmonary Disease          | 1                  |                  |                 |  |                          |                        |                      |                 |
| PULMOZYME 1 MG/ML SOLUTION             |  | Other                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| PULMOZYME 1 MG/ML SOLUTION             |  | Pediatric Pulmonology      | 1                  |                  |                 |  |                          |                        |                      |                 |
| PUMP, EXT INFUSION, MINIMED, INSULIN   | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA                  | DME                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| PYLERA 125-125 MG CAPSULE              |  | Gastroenterology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| PYLERA 125-125 MG CAPSULE              |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| QBREXZA                                | Primary focal hyperhidrosis, axilla                          | Other                      |                    |                  |                 |  |                          | 1                      |                      |                 |
| QBREXZA 2.4 % TOWELETTE                |  | Dermatology                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| QBREXZA 2.4 % TOWELETTE                |  | Gastroenterology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| QBREXZA 2.4 % TOWELETTE                |  | Other                      | 4                  | 6                | 6               |  |                          |                        |                      |                 |
| QBREXZA 2.4 % TOWELETTE                |  | PCP/Pediatrician           | 1                  |                  |                 |  |                          |                        |                      |                 |
| QELBREE                                | Attention-deficit hyperactivity disorder, combined type      | Other                      |                    |                  |                 |  |                          | 1                      |                      |                 |
| QELBREE 100 MG CAP ER 24H              |  | Other                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| QNASL 80 MCG HFA AER AD                |  | PCP/Pediatrician           |                    | 2                | 2               |  |                          |                        |                      |                 |
| QSYMIA 15 MG-92MG CPMP 24HR            |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| QSYMIA 3.75-23 MG CPMP 24HR            |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| QSYMIA 7.5MG-46MG CPMP 24HR            |  | Other                      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| QUILLICHEW ER 20 MG TAB CBP24H         |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| QUILLICHEW ER 40 MG TAB CBP24H         |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| QUILLIVANT XR 5 MG/ML SU ER RC24       |  | Other                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| QULIPTA 30 MG TABLET                   |  | Neurology                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| QVAR REDHALER 40 MCG HFA AEROBA        |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| QVAR REDHALER 80 MCG HFA AEROBA        |  | Other                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| R & L HEART CATH, CONGENITAL           | CONGENITAL PULMONARY VALVE STENOSIS                          | PEDIATRIC CARDIOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| R&L HRT ART/VENTRICLE ANGIO            | NONRHEUMATIC AORTIC (VALVE) STENOSIS                         | Cardiology, Interventional | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| RA TRACER ID OF SENTINL NODE           | INTRADUCTAL CARCINOMA IN SITU OF RIGHT BREAST                | Surgery, General           | 1                  |                  |                 |  |                          |                        |                      |                 |
| RABEPRAZOLE SODIUM 20 MG TABLET DR     |  | PCP/Pediatrician           | 1                  |                  |                 |  |                          |                        |                      |                 |
| RADIATION PHYSICS CONSULT              | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK  | Radiation Oncology         | 2                  |                  |                 |  |                          |                        |                      |                 |
| RADIATION THERAPY DOSE PLAN            | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST | Radiation Oncology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| RADIATION THERAPY DOSE PLAN            | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK  | Radiation Oncology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| RADIATION THERAPY PLANNING             | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK  | Radiation Oncology         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| RADIATION TREATMENT AID(S)   | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST                                      | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| RADIATION TREATMENT AID(S)   | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK                                       | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| RADIATION TREATMENT DELIVERY   | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST                                      | Radiation Oncology              | 2                  |                  |                 |  |                          |                        |                      |                 |
| RADIATION TX MANAGEMENT X5   | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST                                      | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| RADIATION TX MANAGEMENT X5   | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK                                       | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| Radical resection of tumor (eg, sarcoma), soft tissue of thigh or knee area; 5 cm or greater   | BENIGN LIPOMATOUS NEOPLASM SKIN & SUBQ LEFT LEG, NEOPLASM OF UNS BEHAVIOR BONE SOFT TISSUE & SKIN | ORTHOPEDIC SURGERY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| Radical resection of tumor (eg, sarcoma), soft tissue of thigh or knee area; 5 cm or greater   | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP   | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| RADIOLOGY PORT IMAGES(S)   | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK                                       | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| RADIOTHERAPY DOSE PLAN IMRT  | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK                                       | Radiation Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| RAGWITEK 12 UNIT TAB SUBL  |   | Allergy/Immunology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| RANIBIZUMAB INJECTION  | OTHER SPECIFIED GLAUCOMA  | Ophthalmology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| RANIBIZUMAB INJECTION  | TYPE 2 DIAB WITH MOD NONP RTNOP WITH MACULAR EDEMA, R EYE   | Ophthalmology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| RANIBIZUMAB INJECTION  | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITH MACULAR EDEMA, BI   | Ophthalmology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| RANIBIZUMAB INJECTION  | TYPE 2 DIAB WITH PROLIF DIAB RTNOP WITHOUT MACULAR EDEMA, BI                                      | Ophthalmology                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| RASUVO 12.5/0.25 AUTO INJCT  |   | Rheumatology                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| RASUVO 15MG/0.3ML AUTO INJCT   |   | Rheumatology                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| RASUVO 22.5/0.45 AUTO INJCT  |   | PCP/Pediatrician                | 1                  |                  |                 |  |                          |                        |                      |                 |
| RASUVO 25MG/0.5ML AUTO INJCT   |   | Rheumatology                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| RAYOS 5 MG TABLET DR   |   | Other                           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| RECHANNELING OF ARTERY   | ABDOMINAL AORTIC ANEURYSM, WITHOUT RUPTURE  | Surgery, Vascular               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| RECONST LWR JAW W/FIXATION   | MALOCCLUSION, UNSPECIFIED   | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| RECONST LWR JAW W/FIXATION   | MAXILLARY HYPOPLASIA  | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| RECONST LWR JAW W/FIXATION   | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)   | Surgery, Oral And Maxillofacial | 1                  |                  |                 |  |                          |                        |                      |                 |
| RECONST LWR JAW W/O GRAFT  | MAXILLARY HYPOPLASIA  | Surgery, Oral And Maxillofacial |                    | 1                | 1               |  |                          |                        |                      |                 |
| RECONSTRUCTION OF CHIN   | MAXILLARY HYPOPLASIA  | Surgery, Oral And Maxillofacial |                    | 1                | 1               |  |                          |                        |                      |                 |
| Reconstruction of dislocating patella; with extensor realignment and/or muscle advancement or release (eg, Campbell, Goldwaite type procedure) | EFFUSION LEFT KNEE, LATERAL DISLOCATION LT PATELLA INITIAL ENCOUNTER                              | ORTHOPEDIC SURGERY              | 1                  |                  |                 |  |                          |                        |                      |                 |



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| Reconstruction of dislocating patella; with extensor realignment and/or muscle advancement or release (eg, Campbell, Goldwaite type procedure) | UNSPECIFIED DISLOCATION RT KNEE INITIAL ENCNT, SPRAIN MED COLLATERAL LIGAMENT RT KNEE INITIAL | SURGERY- ORTHOPEDIC                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| RELEASE OF SKULL SEAMS   | CRANIOSYNOSTOSIS  | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| RELPAK   | Migraine  | Internal Medicine                      |                    |                  |                 |  |                          |                        | 1                    |                 |
| RELPAK   | Migraine  | Other                                  |                    |                  |                 |  |                          |                        |                      |                 |
| RELPAK 40 MG TABLET  |   | Neurology                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| RELPAK 40 MG TABLET  |   | Other                                  | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| RELTONE 400 MG CAPSULE   |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMICADE   | Crohn's Disease   | Gastroenterology                       |                    |                  |                 |  |                          |                        | 1                    |                 |
| Remicade   | Crohn's disease of both small and large intestine without complications                       | Other                                  |                    |                  |                 |  |                          |                        |                      |                 |
| REMICADE 100 MG VIAL   |   | Gastroenterology                       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| REMICADE 100 MG VIAL   |   | Rheumatology                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| REMOVAL KIDNEY OPEN RADICAL  | NEOPLASM OF UNSPECIFIED BEHAVIOR OF UNSPECIFIED KIDNEY  | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF BONE FOR GRAFT  | OTHER SPECIFIED CONGENITAL DEFORMITIES OF HIP   | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF BRAIN LESION  | DISORDER OF BRAIN, UNSPECIFIED  | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF BRAIN LESION  | OTHER SPECIFIED CONGENITAL MALFORMATIONS OF BRAIN   | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF COLON   | MALIGNANT NEOPLASM OF COLON, UNSPECIFIED  | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF GALLBLADDER   | ACUTE PANCREATITIS WITH UNINFECTED NECROSIS, UNSPECIFIED                                      | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF LENS MATERIAL   | CATARACT (LENS) FRAGMT IN EYE FOL CATARACT SURGERY, LEFT EYE                                  | Ophthalmology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| REMOVAL OF OVARY/TUBE(S)   | UNSPECIFIED OVARIAN CYST, LEFT SIDE   | Gynecologic Oncology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF PANCREAS LESION   | CYST OF PANCREAS  | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF SPLEEN TOTAL  | CYST OF PANCREAS  | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF SPLEEN TOTAL  | SPLENOMEGALY, NOT ELSEWHERE CLASSIFIED  | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF STOMACH   | PERSONAL HISTORY OF OTHER DISEASES OF THE DIGESTIVE SYSTEM                                    | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF SUPPORT IMPLANT   | OSTEOCHONDritis DISSECANS RIGHT KNEE  | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF SUPPORT IMPLANT   | OTHER CHEST PAIN  | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF SUPPORT IMPLANT   | PECTUS EXCAVATUM  | Pediatric Surgery                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| REMOVAL OF SUPPORT IMPLANT   | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE  | ORTHOPEDIC SURGERY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF SUPPORT IMPLANT   | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE  | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL OF TONGUE  | MALIGNANT NEOPLASM OF MOUTH, UNSPECIFIED  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVAL SWEAT GLAND LESION   | HIDRADENITIS SUPPURATIVA  | Surgery, Plastic                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| REMOVE BRAIN LINING LESION   | MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED  | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| REMOVE CARTILAGE FOR GRAFT  | DEVIATED NASAL SEPTUM  | Otolaryngology (Ear, Nose, And Throat) |                    | 1                | 1               |  |                          |                        |                      |                 |
| REMOVE PELVIS LYMPH NODES   | MALIGNANT NEOPLASM OF PROSTATE   | Urology                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVE SKIN NERVE LESION  | BENIGN NEOPLM OF PRPH NERVES AND AUTONM NRV SYS OF PELVIS                              | Surgery, Neurological                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| REMOVE SPINE FIXATION DEVICE  | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION                            | Surgery, Neurological                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| REMOVE SPINE LAMINA 1/2 CRVL  | SPINAL STENOSIS, CERVICAL REGION   | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVE VERT BODY DCMPRN CRVL  | SPINAL STENOSIS, CERVICAL REGION   | Surgery, Neurological                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMOVE/GRAFT FOREARM LESION   | OTHER SPECIFIED DISORDERS OF BONE, FOREARM   | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| REMLV INSI IMPLTBL GLUC SENS  | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS   | Endocrinology And Metabolism           | 1                  |                  |                 |  |                          |                        |                      |                 |
| REP PERF ANOPER FISTU   | CONGENITAL ABSENCE, ATRESIA AND STENOSIS OF ANUS W/O FISTULA                           | Pediatric Surgery                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR BLOOD VESSEL LESION  | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                                       | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR BOWEL OPENING  | FISTULA OF INTESTINE   | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR BOWEL OPENING  | OTHER COMPLICATIONS OF ENTEROSTOMY   | Surgery, Colon And Rectal              | 2                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR DEFECT OF ARTERY   | ABDOMINAL AORTIC ANEURYSM, WITHOUT RUPTURE   | Surgery, Vascular                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| REPAIR EYELID DEFECT  | HYPO-OSMOLALITY AND HYPONATREMIA   | Ophthalmology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR EYELID DEFECT  | MECHANICAL PTOSIS OF BILATERAL EYELIDS   | Ophthalmology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR EYELID DEFECT  | MECHANICAL PTOSIS OF RIGHT EYELID  | Ophthalmology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| REPAIR EYELID DEFECT  | MYOGENIC PTOSIS OF RIGHT EYELID  | Ophthalmology                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR EYELID DEFECT  | UNSPECIFIED PTOSIS OF UNSPECIFIED EYELID   | Surgery, Plastic                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| REPAIR GUM  | CLEFT HARD PALATE WITH CLEFT SOFT PALATE   | Surgery, Plastic                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| REPAIR NASAL STENOSIS   | DEVIATED NASAL SEPTUM  | Otolaryngology (Ear, Nose, And Throat) | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| REPAIR NASAL STENOSIS   | DEVIATED NASAL SEPTUM  | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR NASAL STENOSIS   | OTHER SPECIFIED DISORDERS OF NOSE AND NASAL SINUSES                                    | Otolaryngology (Ear, Nose, And Throat) | 5                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR OF ANAL SPHINCTER  | ANAL FISTULA   | Surgery, Colon And Rectal              | 3                  |                  |                 |  |                          |                        |                      |                 |
| Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT                                       | ORTHOPEDIC SURGERY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT, PRIMARY OSTEOARTHRITIS LEFT SHOULDER | ORTHOPEDIC SURGERY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT                                       | HAND SURGERY                           | 1                  |                  |                 |  |                          |                        |                      |                 |

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| REPAIR PALATE PHARYNX/UVULA                                     | HYPERTROPHY OF TONSILS  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR RADIUS OR ULNA   | NONDISP TRANSVERSE FX SHAFT OF L ULNA, 7THK   | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPAIR TCAT MITRAL VALVE  | NONRHEUMATIC AORTIC (VALVE) STENOSIS  | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Repair, primary, torn ligament and/or capsule, knee; collateral | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Repair, primary, torn ligament and/or capsule, knee; collateral | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE, SPRAIN LAT COLLATERAL LIGAMENT LT KNEE INITIAL, STRAIN OTH MUSCLE TENDON LOW LEG UNS LEG INITIAL   | SURGERY- ORTHOPEDIC                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| REPATHA PUSHTRONEX 420 MG/3.5 WEAR INJCT                        |   | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| REPATHA SURECLICK   | Chronic systolic (congestive) heart failure   | Cardiovascular Disease                 |                    |                  |                 |  |                          |                        | 1                    |                 |
| REPATHA SURECLICK 140 MG/ML PEN INJCTR                          |   | Cardiology                             | 4                  |                  |                 |  |                          |                        |                      |                 |
| REPATHA SURECLICK 140 MG/ML PEN INJCTR                          |   | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPATHA SURECLICK 140 MG/ML PEN INJCTR                          |   | Other                                  | 12                 | 6                | 6               |  |                          |                        |                      |                 |
| REPATHA SURECLICK 140 MG/ML PEN INJCTR                          |   | PCP/Pediatrician                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| REPATHA SYRINGE 140 MG/ML SYRINGE                               |   | Cardiology                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| REPATHA SYRINGE 140 MG/ML SYRINGE                               |   | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPATHA SYRINGE 140 MG/ML SYRINGE                               |   | Other                                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| REPATHA SYRINGE 140 MG/ML SYRINGE                               |   | PCP/Pediatrician                       | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| REPLACE AORTIC VALVE PERQ                                       | NONRHEUMATIC AORTIC (VALVE) STENOSIS  | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPLACEMENT AORTIC VALVE OPN                                    | ABDOMINAL AORTIC ANEURYSM, WITHOUT RUPTURE  | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPLACEMENT AORTIC VALVE OPN                                    | NONRHEUMATIC AORTIC (VALVE) STENOSIS  | Surgery, Thoracic                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| REPLACEMENT OF MITRAL VALVE                                     | NONRHEUMATIC MITRAL VALVE DISORDER, UNSPECIFIED   | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| RESECT OVARIAN MALIGNANCY                                       | OTH NONINFLAMMATORY DISORD OF OVARY, FALLOP AND BROAD LIGMT   | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| Resection or transplantation of long tendon of biceps           | ADHESIVE CAPSULITIS OF LEFT SHOULDER, UNS DISORDER SYNOVIUM & TENDON LT UPPER ARM   | SURGERY- ORTHOPEDIC                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Resection or transplantation of long tendon of biceps           | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Resection or transplantation of long tendon of biceps           | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT  | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Residential Mental Health                                       | Major depressive disorder, recurrent severe without psychotic features  | Behavioral Health                      |                    |                  |                 |  |                          | 1                      | 1                    |                 |
| Residential Mental Health                                       | Unspecified mood [affective] disorder   | Behavioral Health                      |                    |                  |                 |  |                          |                        | 1                    |                 |
| Residential Substance Use Disorders Treatment                   | Alcohol dependence, uncomplicated   | Behavioral Health                      |                    |                  |                 |  |                          | 1                      | 1                    |                 |
| Residential Substance Use Disorders Treatment                   | Cannabis dependence, uncomplicated  | Behavioral Health                      |                    |                  |                 |  |                          |                        | 1                    |                 |
| Residential Substance Use Disorders Treatment                   | Opioid dependence, uncomplicated  | Behavioral Health                      |                    |                  |                 |  |                          |                        | 1                    |                 |

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| RESPIRATOR MOTION MGMT SIMUL  | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST | Radiation Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| RESTASIS MULTIDOSE 0.05 % DROPS   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| RETACRIT 20000/ML VIAL  |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| RETEVMO 80 MG CAPSULE   |  | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| RETIN-A MICRO PUMP 0.06 % GEL W/PUMP  |  | Dermatology                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| RETIN-A MICRO PUMP 0.06 % GEL W/PUMP  |  | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| RETIN-A MICRO PUMP 0.08 % GEL W/PUMP  |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| REVISE MIDDLE EAR & MASTOID   | UNSPECIFIED MASTOIDITIS, LEFT EAR                            | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| REVISE STOMACH-BOWEL FUSION   | OTHER SPECIFIED POSTPROCEDURAL STATES                        | Surgery, General                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| REVISION OF COLOSTOMY   | COLOSTOMY STATUS   | Surgery, Colon And Rectal              | 2                  |                  |                 |  |                          |                        |                      |                 |
| REVISION OF NOSE  | CLEFT HARD PALATE WITH CLEFT SOFT PALATE                     | Surgery, Plastic                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| REVISION OF PHARYNGEAL WALLS  | MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED                    | Surgery, Oral And Maxillofacial        | 1                  |                  |                 |  |                          |                        |                      |                 |
| Revision of total hip arthroplasty; both components, with or without autograft or allograft         | PYOGENIC ARTHRITIS UNSPECIFIED                               | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Revision of total knee arthroplasty, with or without allograft; femoral and entire tibial component | ACQUIRED ABSENCE OF UNSPECIFIED KNEE                         | SURGERY- ORTHOPEDIC                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Revision of total knee arthroplasty, with or without allograft; femoral and entire tibial component | OTH MECH COMP INTERNAL RT KNEE PROSTH INIT ENC               | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Revision of total knee arthroplasty, with or without allograft; one component                       | OTH MECH COMP INTERNAL LT KNEE PROSTH SEQUELA                | SURGERY- ORTHOPEDIC                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| REVISION OF UPPER EYELID  | DERMATOCHALASIS OF LEFT UPPER EYELID                         | Ophthalmology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| REVISION OF UPPER EYELID  | MECHANICAL PTOSIS OF RIGHT EYELID                            | Ophthalmology                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| REVISION OF UPPER EYELID  | SQUAMOUS CELL CARCINOMA OF SKIN, UNSPECIFIED                 | Surgery, Plastic                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| REVJ PERI-IMPLT CAPSULE BRST  | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT FEMALE BREAST     | Surgery, Plastic                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| REVJ PERI-IMPLT CAPSULE BRST  | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, Plastic                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| REVJ PERI-IMPLT CAPSULE BRST  | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REVJ PERI-IMPLT CAPSULE BRST  | OTHER SPECIFIED DISORDERS OF BREAST                          | Surgery, Plastic                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| REVJ PERI-IMPLT CAPSULE BRST  | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| REVJ RECONSTRUCTED BREAST   | DISPROPORTION OF RECONSTRUCTED BREAST                        | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REVJ RECONSTRUCTED BREAST   | MALIG NEOPLM OF UPPER-OUTER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REVJ RECONSTRUCTED BREAST   | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| REVJ RECONSTRUCTED BREAST   | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, General                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| REVJ RECONSTRUCTED BREAST   | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, Plastic                       | 3                  |                  |                 |  |                          |                        |                      |                 |
| REVJ RECONSTRUCTED BREAST   | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| REJV RECONSTRUCTED BREAST   | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REJV RECONSTRUCTED BREAST   | OTHER SPECIFIED POSTPROCEDURAL STATES                        | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| REJV RECONSTRUCTED BREAST   | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Anesthesiology                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| REJV RECONSTRUCTED BREAST   | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic                       | 5                  |                  |                 |  |                          |                        |                      |                 |
| REXULTI 0.25 MG TABLET  |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| REXULTI 0.5 MG TABLET   |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| REXULTI 2 MG TABLET   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| REXULTI 3 MG TABLET   |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| REYVOW 100 MG TABLET  |  | Neurology                              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| REYVOW 100 MG TABLET  |  | Other                                  | 3                  |                  |                 |  |                          |                        |                      |                 |
| REYVOW 50 MG TABLET   |  | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| REYVOW 50 MG TABLET   |  | Other                                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| RIB CARTILAGE GRAFT   | OTHER SPECIFIED DISORDERS OF NOSE AND NASAL SINUSES          | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| RIBOFLAVIN 5'PHOS OPTH<=3ML                                       | KERATOCONUS, UNSTABLE, LEFT EYE                              | Ophthalmology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| RIBOFLAVIN 5'PHOS OPTH<=3ML                                       | KERATOCONUS, UNSTABLE, RIGHT EYE                             | Ophthalmology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| Right heart catheterization without left heart cath or coronaries | , Secondary pulmonary arterial hypertension                  | CARDIOLOGIST                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| Right heart catheterization without left heart cath or coronaries | DYSPNEA UNSPECIFIED  | PULMONARY DISEASES                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Right heart catheterization without left heart cath or coronaries | HEART TRANSPLANT STATUS                                      | CARDIOLOGIST                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| RINVOQ 15 MG TAB ER 24H   |  | Internal Medicine                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| RINVOQ 15 MG TAB ER 24H   |  | Other                                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| RINVOQ 15 MG TAB ER 24H   |  | Rheumatology                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| RITUXAN   | Nephrotic syndrome with other morphologic changes            | Nephrology                             |                    |                  |                 |  |                          |                        |                      | 1               |
| RMVL ESOPHGL SPHNCTR DEV  | GASTRO-ESOPHAGEAL REFLUX DISEASE WITHOUT ESOPHAGITIS         | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| RMVL INTACT BREAST IMPLANT  | ENCOUNTER FOR ADJUSTMENT OR REMOVAL OF LEFT BREAST IMPLANT   | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| RMVL INTACT BREAST IMPLANT  | ESTROGEN RECEPTOR POSITIVE STATUS [ER+]                      | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| RMVL INTACT BREAST IMPLANT  | MALIG NEOPLM OF UPPER-INNER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| RMVL INTACT BREAST IMPLANT  | OTHER SPECIFIED DISORDERS OF BREAST                          | Surgery, Plastic                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| RMVL INTACT BREAST IMPLANT  | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic                       | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| RN HOME CARE PER DIEM   | OTHER DISORDERS OF LUNG                                      | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| RPR VENTRAL HERN INIT REDUC                                       | INCISIONAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE            | Surgery, General                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| RUXIENCE 10 MG/ML VIAL  |  | Nephrology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| RYBELSUS 3 MG TABLET  |  | Other                                  | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| RYBELSUS 3 MG TABLET  |  | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| RYBELSUS 7 MG TABLET  |  | Other                                  | 5                  |                  |                 |  |                          |                        |                      |                 |
| RYBELSUS 7 MG TABLET  |  | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                    | Diagnosis Code Description                                   | Provider Specialty    | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| RYDAPT 25 MG CAPSULE                          |  | Oncology/Radiation    | 1                  |                  |                 |  |                          |                        |                      |                 |
| RYTARY 23.75-95MG CAPSULE ER                  |  | Other                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| RYTARY 36.25-145 CAPSULE ER                   |  | Other                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| RYTARY 48.75-195 CAPSULE ER                   |  | Neurology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SANTYL 250 UNIT/G OINT.(GM)                   |  | Orthopedic Surgery    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SAPROPTERIN DIHYDROCHLORIDE 100 MG TABLET SOL |  | Other                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SAXENDA 3 MG/0.5ML PEN INJCTR                 |  | Other                 | 4                  | 7                | 7               |  |                          |                        |                      |                 |
| SAXENDA 3 MG/0.5ML PEN INJCTR                 |  | PCP/Pediatrician      | 4                  |                  |                 |  |                          |                        |                      |                 |
| SBRT DELIVERY                                 | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Radiation Oncology    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SCAN PROC SPINAL                              | SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUD      | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| SELF CARE MNGMENT TRAINING                    | PRESENCE OF LEFT ARTIFICIAL KNEE JOINT                       | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SERVICES PROVIDED AS PART OF                  | ACUTE MYELOBLASTIC LEUKEMIA, NOT HAVING ACHIEVED REMISSION   | Hematology            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SERVICES PROVIDED AS PART OF                  | MALIGNANT NEOPLASM OF BLADDER, UNSPECIFIED                   | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SERVICES PROVIDED AS PART OF                  | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                    | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SERVICES PROVIDED AS PART OF                  | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF NASOPHARYNX       | Oncology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SET RADIATION THERAPY FIELD                   | MALIG NEOPLASM OF UPPER-INNER QUADRANT OF LEFT FEMALE BREAST | Radiation Oncology    | 2                  |                  |                 |  |                          |                        |                      |                 |
| SET RADIATION THERAPY FIELD                   | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK  | Radiation Oncology    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SEYSARA 100 MG TABLET                         |  | Dermatology           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SEYSARA 150 MG TABLET                         |  | Other                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| SGD ACCESSORY NOC                             | AUTISTIC DISORDER  | Pediatrics            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SGD ACCESSORY NOC                             | SPASTIC QUADRIPLEGIC CEREBRAL PALSY                          | Pediatrics            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SGD ACCESSORY, MOUNTING SYS                   | SPASTIC QUADRIPLEGIC CEREBRAL PALSY                          | Pediatrics            | 3                  |                  |                 |  |                          |                        |                      |                 |
| SGD SFTWRE PRGRM FOR PC/PDA                   | SPASTIC QUADRIPLEGIC CEREBRAL PALSY                          | Pediatrics            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SGD W MULTI METHODS MSG/ACCS                  | AUTISTIC DISORDER  | Pediatrics            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SGD W MULTI METHODS MSG/ACCS                  | SPASTIC QUADRIPLEGIC CEREBRAL PALSY                          | Pediatrics            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SIGNIFOR LAR 40 MG VIAL                       |  | Other                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SILDENAFIL CITRATE 100 MG TABLET              |  | Internal Medicine     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SILDENAFIL CITRATE 100 MG TABLET              |  | Other                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SILDENAFIL CITRATE 100 MG TABLET              |  | PCP/Pediatrician      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SILDENAFIL CITRATE 20 MG TABLET               |  | Other                 |                    | 10               | 10              |  |                          |                        |                      |                 |
| SILDENAFIL CITRATE 20 MG TABLET               |  | PCP/Pediatrician      | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SILDENAFIL CITRATE 20 MG TABLET               |  | Urology               |                    | 3                | 3               |  |                          |                        |                      |                 |
| SILDENAFIL CITRATE 50 MG TABLET               |  | Other                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SILDENAFIL CITRATE 50 MG TABLET               |  | PCP/Pediatrician      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SIMPONI 50MG/0.5ML PEN INJCTR                 |  | Other                 | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SIMPONI 50MG/0.5ML PEN INJCTR                 |  | PCP/Pediatrician      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SIMPONI ARIA 50 MG/4 ML VIAL                  |  | Rheumatology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SIVEXTRO 200 MG TABLET                        |  | Podiatry              | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SKIN BARRIER, WIPE OR SWAB  | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK                   | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SKIN BARRIER, WIPE OR SWAB  | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                   | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| Skin Cancer   | Carcinoma in situ of skin of other parts of face            | DERMATOLOGY                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUB GRAFT FACE/NK/HF/G   | CA IN SITU SKIN OF LEFT UPPER LIMB, INCLUDING SHOULDER      | Dermatology                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SKIN SUB GRAFT FACE/NK/HF/G   | NON-PRS CHRONIC ULCER OTH PRT R FOOT LIMITED TO BRKDWN SKIN | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUB GRAFT FACE/NK/HF/G   | NON-PRS CHRONIC ULCER OTH PRT UNSP FOOT W FAT LAYER EXPOSED | Podiatry                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUB GRAFT FACE/NK/HF/G   | OTH COMPLICATIONS OF PROCEDURES, NEC, INIT                  | Internal Medicine                      | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SKIN SUB GRAFT FACE/NK/HF/G   | SQUAMOUS CELL CARCINOMA OF SKIN, UNSPECIFIED                | Surgery, Plastic                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUB GRAFT FACE/NK/HF/G   | TYPE 1 DIABETES MELLITUS WITH FOOT ULCER                    | Podiatry                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUB GRAFT FACE/NK/HF/G   | UNSP INJURY OF LEFT WRIST, HAND AND FINGER(S), INIT ENCNR   | Surgery, Orthopedic                    |                    | 1                |                 |  | 1                        |                        |                      |                 |
| SKIN SUB GRAFT FACE/NK/HF/G   | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Podiatry                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUB GRAFT T/A/L ADD-ON   | NON-PRESSURE CHRONIC ULCER OF LEFT CALF W FAT LAYER EXPOSED | Surgery, General                       | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SKIN SUB GRAFT T/A/L ADD-ON   | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Podiatry                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUB GRAFT TRNK/ARM/LEG   | NON-PRESSURE CHRONIC ULCER OF LEFT CALF W FAT LAYER EXPOSED | Surgery, General                       | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SKIN SUB GRAFT TRNK/ARM/LEG   | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Podiatry                               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUB GRFT T/ARM/LG CHILD  | BASAL CELL CARCINOMA OF SKIN, UNSPECIFIED                   | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SKIN SUBSTITUTE, SYNTHETIC  | VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)                 | Podiatry                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SKYRIZI (2 SYRINGES) KIT 150MG/1.66 SYRINGEKIT  |   | Dermatology                            | 5                  |                  |                 |  |                          |                        |                      |                 |
| SKYRIZI (2 SYRINGES) KIT 150MG/1.66 SYRINGEKIT  |   | Other                                  | 15                 | 1                | 1               |  |                          |                        |                      |                 |
| SKYRIZI 150 MG/ML SYRINGE   |   | Other                                  | 4                  |                  |                 |  |                          |                        |                      |                 |
| SKYRIZI PEN 150 MG/ML PEN INJCTR  |   | Dermatology                            | 4                  |                  |                 |  |                          |                        |                      |                 |
| SKYRIZI PEN 150 MG/ML PEN INJCTR  |   | Other                                  | 6                  |                  |                 |  |                          |                        |                      |                 |
| Sleep study attended, facility based test to diagnose or plan treatment for a sleep related problem | Obstructive sleep apnea (adult) (pediatric)                 | Obstetrics/Gynecology                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SLEEP STUDY UNATT&RESP EFFT   | OTHER SYMPTOMS AND SIGNS INVOLVING THE NERVOUS SYSTEM       | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SLEEP STUDY UNATT&RESP EFFT   | SLEEP APNEA, UNSPECIFIED                                    | Sleep Medicine                         | 2                  |                  |                 |  |                          |                        |                      |                 |
| SLEEP STUDY, UNATTENDED, MIN 4 CHAN, W/RESPIRATORY EFFORT   | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)                 | Respiratory Therapy                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SLEEP STUDY, UNATTENDED, MIN 4 CHAN, W/RESPIRATORY EFFORT   | SNORING   | Respiratory Therapy                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| Small Cell Lung Cancer  | Malignant neoplasm of upper lobe, left bronchus or lung     | OUTPATIENT REHAB FACILITY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT  |   | CHIROPRACTOR                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT  |   | EMERGENCY MEDICINE                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT  |   | FAMILY PRACTICE                        | 14                 | 12               | 12              |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     |  | GASTROENTEROLOGY                   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     |  | GENERAL PRACTICE                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | HEMATOLOGY AND ONCOLOGY            | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     |  | INTERNAL MEDICINE                  | 16                 | 5                | 5               |  |                          |                        |                      |                 |
| SOCCPT                     |  | NEUROLOGY                          | 16                 | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     |  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | NURSE PRACTITIONER                 | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     |  | OBSTETRICS & GYNECOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | ONCOLOGY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | OTOLARYNGOLOGIST (ENT)             | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     |  | PCP/Pediatrician                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | PEDIATRIC NEUROLOGIST              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     |  | PEDIATRICS                         | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | PHYSICAL MEDICINE & REHABILITATION | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | PULMONARY DISEASES                 | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     |  | Pulmonology                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     |  | Rheumatology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     |  | Surgery, Neurological              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     |  | SURGERY- ORTHOPEDIC                | 5                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Enterocolitis due to Clostridium difficile, recurrent          | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Spinal stenosis, lumbar region with neurogenic claudication    | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Spinal stenosis, lumbar region with neurogenic claudication    | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Spinal stenosis, lumbar region with neurogenic claudication    | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Spinal stenosis, lumbar region with neurogenic claudication    | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Spinal stenosis, lumbar region without neurogenic claudication | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Spinal stenosis, lumbar region without neurogenic claudication | NEUROLOGY                          | 2                  | 1                | 1               |  |                          |                        |                      |                 |



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|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | , Spinal stenosis, lumbar region without neurogenic claud  | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Spinal stenosis, lumbar region without neurogenic claud  | PAIN MANAGEMENT         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Unsp intestnl obst, unsp as to partial versus complete obst  | SURGERY-COLON/RECTAL    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Unspecified lump in the left breast, unspecified quadrant  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | , Unspecified lump in the right breast, unspecified quadrant   | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE  | RADIOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE, PRESENCE OF OTHER VASCULAR IMPLANTS AND GRAFTS                            | SURGERY-VASCULAR        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS, GASTRODUODENITIS UNSPECIFIED WITHOUT BLEEDING  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS, GASTRO-ESOPH REFLUX DISEASE WITHOUT ESOPHAGITIS  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS, LEFT LOWER QUADRANT PAIN   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS, LEFT UPPER QUADRANT PAIN   | FAMILY PRACTICE         |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS, NAUSEA WITH VOMITING UNSPECIFIED   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS, RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABDOMINAL DISTENSION GASEOUS, UNSPECIFIED ABDOMINAL PAIN   | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM   | Gastroenterology        | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, DYSPNEA UNSPECIFIED, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                     | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED                     | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, LEIOMYOMA OF UTERUS UNSPECIFIED   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, PERSONAL HISTORY OF URINARY TRACT INFECTIONS  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABN FIND ON DX IMAG OTH PART MUSCULOSKELETAL SYS, LOCALIZED HYPERTRICHOSIS  | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORM FIND ON DX IMAG OTH PARTS DIGESTIVE TRACT  | Gastroenterology        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL BLOOD-GAS LEVEL, DYSPNEA UNSPECIFIED, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS  | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL BRAIN SCAN   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL COAGULATION PROFILE, Unknown   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL ELECTROCARDIOGRAM, THORACIC AORTIC ECTASIA   | CARDIOVASCULAR DISEASE  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT  | GASTROENTEROLOGY        | 3                  | 5                | 5               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT, ABNORMAL LEVELS OF OTHER SERUM ENZYMES  | PHYSICIAN ASSISTANT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FIND ON DX IMAGING LIVER & BILI TRACT, HEPATOMEGALY NOT ELSEWHERE CLASSIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDING OF BLOOD CHEMISTRY UNSPECIFIED, AUTISTIC DISORDER, EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDING OF BLOOD CHEMISTRY UNSPECIFIED, AUTISTIC DISORDER, MALIGNANT NEOPLASM OF FRONTAL LOBE, MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED, Unknown  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDING OF BLOOD CHEMISTRY UNSPECIFIED, MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED, PERSONAL HISTORY OF IRRADIATION, ENCOUNTER F/U EXAM AFTER CMPL TX MALIG NEOPLASM                              | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DIAGNOSTIC IMAGING OF LIMBS, DISORDER OF BONE UNSPECIFIED  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DIAGNOSTIC IMAGING OF LIMBS, PAIN IN RIGHT SHOULDER  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty             | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|--------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | ABNORMAL FINDINGS ON DIAGNOSTIC IMAGING OF LIMBS, STRAIN MUSCLE FASC TEND POST THIGH RT INIT ENC, PAIN IN RIGHT THIGH  | SPORTS MEDICINE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | CARDIOLOGIST                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC   | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, ENCOUNTER FOR PREPROCEDURAL CARIOVASCULAR EXAM, ABDOMINAL AORTIC ANEURYSM WITHOUT RUPTURE, ASHD NATIVE COR ART W/OTH FORMS ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC   | FAMILY PRACTICE                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC   | HEMATOLOGY AND ONCOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC, DISORDER THE SKIN & SUBCUTANEOUS TISSUE UNS, BENIGN LIPOMATOUS NEO SKIN SUBQ HEAD FACE NECK  | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL FINDINGS ON DX IMAGING SKULL & HEAD NEC, OCCLUSION & STENOSIS RT ANTERIOR CEREBRAL ARTERY   | NEUROLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL JAW CLOSURE   | DENTIST- ANESTHESIOLOGIST      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL LEVELS OF OTHER SERUM ENZYMES   | GASTROENTEROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL LEVELS OF OTHER SERUM ENZYMES, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, ENC F/U EXAM AFTR CMPL TX OTH THAN MALIG NEOPLSM                                   | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Abnormal radiologic findings on diagnostic imaging of unspecified kidney   | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, THORACIC AORTIC ECTASIA, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, VENTRICULAR PREMATURE DEPolarIZATION, NONRHEUMATIC MITRAL VALVE PROLAPSE, OTHER CARDIOMYOPATHIES | CARDIOVASCULAR DISEASE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL RESULTS FUNCTION STUDIES OTH ORGN & SYS   | CARDIOLOGY & INTERNAL MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL RESULTS FUNCTION STUDIES OTH ORGN & SYS, MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG  | HEMATOLOGY                     | 1                  | 2                | 2               |  |                          |                        |                      |                 |

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|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | ABNORMAL RESULTS OF LIVER FUNCTION STUDIES   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL RESULTS OF PULMONARY FUNCTION STUDIES   | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL UTERINE & VAGINAL BLEEDING UNSPECIFIED, BENIGN NEOPLASM CNCTV & OTHER SOFT TISSUE UNS   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, CONSTIPATION UNSPECIFIED   | Rheumatology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, COUGH  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, EPIGASTRIC PAIN  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, EPIGASTRIC PAIN, ABDOMINAL DISTENSION GASEOUS, OTHER FECAL ABNORMALITIES   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, EPIGASTRIC PAIN, NAUSEA  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, FUNCTIONAL DYSPEPSIA   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, ENCOUNTER SCREENING MALIGNANT NEOPLASM OF COLON   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMAL WEIGHT LOSS, UNSPECIFIED ABDOMINAL PAIN   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ABNORMALITY OF PLASMA PROTEIN UNSPECIFIED, ABNORMAL RESULTS OF KIDNEY FUNCTION STUDIES   | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ACHILLES TENDINITIS LEFT LEG   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACHILLES TENDINITIS RIGHT LEG  | PODIATRY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST  | SURGEON - BREAST        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACTIVITY GYMNASTICS, STIFFNESS OF RIGHT KNEE NOT ELSEWHERE CLASSIFIED, PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE, SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC | ORTHOPEDIC SURGERY      |                    | 2                |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE ABDOMEN, PELVIC AND PERINEAL PAIN  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE ABDOMEN, PELVIC AND PERINEAL PAIN  | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE BRONCHIOLITIS UNSPECIFIED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE CYSTITIS WITH HEMATURIA  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE CYSTITIS WITHOUT HEMATURIA   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE EMBO THROMB UNS DEEP VEINS LT LOWER EXTREM, OTHER SPECIFIED SOFT TISSUE DISORDERS  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | ACUTE EMBO THROMB UNS DEEP VEINS RT LOWER EXTREM   | ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE EMBOLISM & THROMBOSIS UNS VEINS UNS UP EXT, MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG, ESSENTIAL PRIMARY HYPERTENSION, TYPE 2 DIABETES MELLITUS W/UNS COMPLICATIONS | HEMATOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Acute pancreatitis with uninfected necrosis, unspecified   | SURGERY-GENERAL        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Acute pancreatitis without necrosis or infection, unspecified  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE PANSINUSITIS UNSPECIFIED   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE POST-TRAUMATIC HEADACHE NOT INTRACTABLE  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE RECURRENT MAXILLARY SINUSITIS  | GENERAL PRACTICE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE RECURRENT MAXILLARY SINUSITIS  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE RECURRENT SINUSITIS UNSPECIFIED  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE SINUSITIS UNSPECIFIED  | OTOLARYNGOLOGIST (ENT) | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE SINUSITIS UNSPECIFIED, Unknown   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE SPHENOIDAL SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE STRESS REACTION  | SPORTS MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ACUTE TRACHEITIS WITHOUT OBSTRUCTION   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ADHESIVE CAPSULITIS OF LEFT SHOULDER   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ADHESIVE CAPSULITIS OF LEFT SHOULDER, UNS DISORDER SYNOVIUM & TENDON LT UPPER ARM  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ADVERSE EFFECT OTH VIRAL VACCINES INITIAL ENCNT  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | AGENESIS AND APLASIA OF CERVIX   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | AGE-RELATED COGNITIVE DECLINE  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | AGE-RELATED OSTEOPOROSIS W/O CURRNT PATH FX  | SURGERY-NEUROLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Alcohol induced acute pancreatitis without necrosis or infection   | PEDIATRICS             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ALCOHOLIC CIRRHOSIS OF LIVER WITHOUT ASCITES   | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ALCOHOLIC HEPATITIS WITHOUT ASCITES  | HEPATOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ALCOHOLIC HEPATITIS WITHOUT ASCITES  | INTERNAL MEDICINE      |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | ALLERGIC RHINITIS DUE TO POLLEN  | ALLERGY & IMMUNOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | ALLERGIC RHINITIS UNSPECIFIED, CHRONIC SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ALTERED MENTAL STATUS UNSPECIFIED, CEREBRAL INFARCTION UNSPECIFIED, CEREBRAL ANEURYSM NONRUPTURED                      | Pediatric Pulmonology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ALVEOLITIS OF JAWS   | CARDIOVASCULAR                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANAL ABSCESS   | SURGERY-COLON/RECTAL               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANAL FISTULA   | SURGERY-COLON/RECTAL               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANAL FISTULA   | SURGERY-GENERAL                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANAPLASTIC LCL ALK-POSITIVE NODES MULTIPLE SITES   | ONCOLOGY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANEMIA UNSPECIFIED   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANEMIA UNSPECIFIED, MALIGNANT NEOPLASM OF CECUM  | HEMATOLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN   | NEUROLOGY                          | 4                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN   | Rheumatology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, DISEASE OF SPINAL CORD UNSPECIFIED   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, ESSENTIAL PRIMARY HYPERTENSION, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS                   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, HEMIPLEGIA UNS AFFECTING LEFT NONDOMINANT SIDE   | NEUROLOGY                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, LUMBAGO WITH SCIATICA RIGHT SIDE   | ORTHOPEDIC - NON SURGICAL          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, LUMBAGO WITH SCIATICA RIGHT SIDE, PARESTHESIA OF SKIN, OTHER CHRONIC PAIN                          | NEUROLOGY                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, MULTIPLE SCLEROSIS   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, OTHER ABNORMALITIES OF GAIT AND MOBILITY, OCCLUSION & STENOSIS UNSPECIFIED CAROTID ARTERY, Unknown | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, PAIN IN LEFT FOOT, LESION OF PLANTAR NERVE RIGHT LOWER LIMB, PAIN IN RIGHT FOOT                    | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN  | PEDIATRIC NEUROLOGIST              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN  | Plastic Surgery                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, PARESTHESIA OF SKIN, TRIGEMINAL NEURALGIA  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | ANESTHESIA OF SKIN, RADICULOPATHY CERVICAL REGION  | SURGERY-ORTHOPEDIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANESTHESIA OF SKIN, RADICULOPATHY LUMBAR REGION, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS                         | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANEURYSM OF CAROTID ARTERY, CHRONIC MIGRAINE W/O AURA INTRACT W/STAT MIGR, Unknown                                       | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANEURYSM OF OTHER SPECIFIED ARTERIES   | SURGERY-VASCULAR       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANEURYSM OF UNSPECIFIED SITE   | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANKYLOSING SPONDYLITIS SAC & SACROCOCCYGEAL RGN  | RHEUMATOLOGY           | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANKYLOSIS LEFT KNEE, EFFUSION LEFT KNEE, PAIN IN LEFT KNEE   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANKYLOSIS RIGHT ANKLE, PAIN IN LEFT ANKLE, OTHER ENTHESOPATHY OF RIGHT FOOT, PRIMARY OSTEOARTHRITIS RIGHT ANKLE AND FOOT | PODIATRY               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANOREXIA, Unknown  | GASTROENTEROLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ANOSMIA  | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANOSMIA  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANOSMIA, NASAL POLYP UNSPECIFIED   | OTOLARYNGOLOGIST (ENT) | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANTERIOR DISLOCATION RT HUMERUS INITIAL ENC  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ANTERIOR DISLOCATION RT ULNOHUMERAL JOINT INIT   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | AORTIC ANEURYSM UNSPECIFIED SITE WITHOUT RUPTURE   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | AORTIC ECTASIA UNSPECIFIED SITE  | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | APHASIA  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | APHASIA, ABNORMAL REFLEX   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ARNOLD-CHIARI SYND W/O SPINA BIFIDA/HYDROCEPHLUS   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ARNOLD-CHIARI SYND W/O SPINA BIFIDA/HYDROCEPHLUS   | NEUROSURGERY           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ARNOLD-CHIARI SYND W/O SPINA BIFIDA/HYDROCEPHLUS   | SURGERY-NEUROLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ARNOLD-CHIARI SYNDROME WITH HYDROCEPHALUS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ARTERIAL FIBROMUSCULAR DYSPLASIA   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ARTERITIS UNSPECIFIED  | RHEUMATOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ARTHRODESIS STATUS   | NEUROSURGERY           |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | ARTHRODESIS STATUS  | ORTHOPEDIC SURGERY            | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | ARTHROPATHY UNSPECIFIED   | ORTHOPEDIC SURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Articular disc disorder of bilateral temporomandibular joint                                  | ORAL / MAXILLOFACIAL SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ATELECTASIS   | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ATHEROSCLER NATIVE ART EXT INTERMIT CLAUD BILAT   | SURGERY-VASCULAR              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ATHEROSCLER NATIVE ART EXTREM REST PAIN LT LEG  | SURGERY-VASCULAR              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ATHEROSCLEROSIS OF RENAL ARTERY   | CARDIOVASCULAR DISEASE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ATTENTION AND CONCENTRATION DEFICIT, CHRONIC MIGRAINE W/O AURA INTRACT W/STAT MIGR            | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ATYPICAL FACIAL PAIN  | DENTISTRY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ATYPICAL FACIAL PAIN  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | AUDITORY HALLUCINATIONS, TINNITUS BILATERAL   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BARIATRIC SURGERY STATUS  | INTERNAL MEDICINE             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BELLS PALS  | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN CARCINOID TUMOR OF THE BRONCHUS AND LUNG   | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN INTRACRANIAL HYPERTENSION  | OPHTHALMOLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN LIPOMATOUS NEOPLASM SKIN & SUBQ LEFT LEG   | SURGERY-ORTHOPEDIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN LIPOMATOUS NEOPLASM SKIN & SUBQ TRUNK  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED  | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN LIPOMATOUS NEOPLASM UNSPECIFIED  | UROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM CNCTV & OTHER SOFT TISSUE UNS   | OBSTETRICS & GYNECOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM CNCTV & OTHER SOFT TISSUE UNS   | SURGERY-ORTHOPEDIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM CNCTV OTH SOFT TISS LT LOW LIMB   | PODIATRY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM MID EAR NASAL CAV ACCESS SINUSES, CYST AND MUOCOCELE OF NOSE AND NASAL SINUS, | SURGERY, ORAL & MAXILLOFACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF BRAIN UNSPECIFIED  | NEUROSURGERY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF CEREBRAL MENINGES  | FAMILY PRACTICE               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF CRANIAL NERVES   | NEUROSURGERY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF CRANIAL NERVES   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |



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|----------------------------|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | BENIGN NEOPLASM OF LEFT ADRENAL GLAND   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF LIVER  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF LOWER JAW BONE   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF LOWER JAW BONE   | OTOLARYNGOLOGIST (ENT) |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF MENINGES UNSPECIFIED   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF MENINGES UNSPECIFIED   | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF MENINGES UNSPECIFIED   | SURGERY-NEUROLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF MENINGES UNSPECIFIED, CEREBRAL ANEURYSM NONRUPTURED  | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF MENINGES UNSPECIFIED, MALIGNANT NEOPLASM OF UNSPECIFIED OPTIC NERVE  | RADIATION ONCOLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF PITUITARY GLAND  | ENDOCRINOLOGY          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF PITUITARY GLAND  | FAMILY PRACTICE        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF PITUITARY GLAND  | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF PITUITARY GLAND  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF PITUITARY GLAND  | NEUROSURGERY           | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF PITUITARY GLAND  | RADIATION ONCOLOGY     | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF PITUITARY GLAND, NEOPLASM OF UNS BHV ENDOCRN GLAND & OTH PART NS   | ENDOCRINOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF PITUITARY GLAND, NEOPLASM OF UNS BHV ENDOCRN GLAND & OTH PART NS   | SURGERY-NEUROLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF RIGHT KIDNEY   | UROLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN NEOPLASM OF UNSPECIFIED KIDNEY   | UROLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENIGN PAROXYSMAL VERTIGO UNSPECIFIED EAR, Unknown  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BENNETTS FX RT HAND INITIAL ENC CLOS FRACTURE   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BICIPITAL TENDINITIS LEFT SHOULDER  | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BICIPITAL TENDINITIS RIGHT SHOULDER   | SURGERY-ORTHOPEDIC     |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | BILATERAL PRIMARY OSTEOARTHRITIS OF HIP   | SURGERY-ORTHOPEDIC     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Biliary acute pancreatitis without necrosis or infection  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | BLADDER DISORDER UNSPECIFIED, MALIGNANT NEOPLASM OF PROSTATE, PERSONAL HISTORY OF IRRADIATION, ACQUIRED ABSENCE OF OTHER GENITAL ORGANS | UROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BOUTONNIERE DEFORMITY OF LEFT FINGERS   | SURGERY-HAND           | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | BRACHIAL PLEXUS DISORDERS  | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BRACHIAL PLEXUS DISORDERS  | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BRAIN STEM STROKE SYNDROME   | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BRONCHIECTASIS UNCOMPLICATED   | PULMONARY DISEASES  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT                            | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BURKITT LYMPHOMA LYMPH NODES AXILLA & UPPER LIMB                           | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BURKITT LYMPHOMA UNSPECIFIED SITE  | ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BURSITIS OF LEFT SHOULDER, UNS DISORDER SYNOVIUM & TENDON LT SHOULDER      | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | BURSITIS OF RIGHT SHOULDER   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CALCANEAL SPUR RIGHT FOOT  | PODIATRY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CALCULUS OF KIDNEY   | FAMILY PRACTICE     | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CALCULUS OF KIDNEY   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CALCULUS OF KIDNEY   | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CALCULUS OF KIDNEY   | SURGERY- UROLOGICAL | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CALCULUS OF KIDNEY   | UROLOGY             | 26                 | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | CALCULUS OF KIDNEY, URINARY TRACT INFECTION SITE NOT SPECIFIED             | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CALCULUS OF URETER   | UROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CELLULITIS OF LEFT UPPER LIMB  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CENTRIOBULAR EMPHYSEMA   | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL ANEURYSM NONRUPTURED  | FAMILY PRACTICE     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL ANEURYSM NONRUPTURED  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL ANEURYSM NONRUPTURED  | NEUROLOGY           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL ANEURYSM NONRUPTURED  | NEUROSURGERY        | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL ANEURYSM NONRUPTURED  | RADIOLOGY           | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL ANEURYSM NONRUPTURED  | SURGERY- NEUROLOGY  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL CYSTS   | Surgery, Plastic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL INFARCTION UNSPECIFIED  | CHIROPRACTOR        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL INFARCTION UNSPECIFIED  | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL INFARCTION UNSPECIFIED  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL INFARCTION UNSPECIFIED  | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBRAL INFARCTION UNSPECIFIED, OCCLUSION & STENOSIS UNS VERTEBRAL ARTERY | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CEREBROVASCULAR DISEASE UNSPECIFIED  | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICAL DISC D/O W/MYELOPATHY UNS CERV REGION                             | FAMILY PRACTICE     |                    | 2                | 2               |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | CERVICAL DISC D/O W/MYELOPATHY UNS CERV REGION   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Cervical disc disorder at C6-C7 level with radiculopathy   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICAL DISC DISORDER UNS UNS CERVICAL REGION   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICAL DISC DISORDER UNS UNS CERVICAL REGION, CERVICALGIA  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICAL RIB, CERVICOBRACHIAL SYNDROME, RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN, OTHER SPECIFIED JOINT DISORDERS RIGHT SHOULDER | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICAL ROOT DISORDERS NOT ELSEWHERE CLASSIFIED   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | ANESTHESIOLOGY                     | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | FAMILY PRACTICE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | INTERNAL MEDICINE                  |                    | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | NEUROLOGY                          | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | NEUROSURGERY                       | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | ORTHOPEDIC SURGERY                 | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | PAIN MANAGEMENT                    | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | RHEUMATOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | SURGERY-NEUROLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA  | SURGERY-ORTHOPEDIC                 | 2                  | 8                | 8               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, ARTHRODESIS STATUS  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, MALIGNANT MELANOMA OF SKIN UNSPECIFIED  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, NEURALGIA AND NEURITIS UNSPECIFIED  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, OTH NONDSPL FX 7TH CERV VERT INITIAL ENC CLOS FX  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, OTHER CHRONIC PAIN, Unknown   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, PAIN IN LEFT HIP  | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, PAIN IN LEFT SHOULDER   | SURGERY-HAND                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, PAIN IN UNSPECIFIED SHOULDER  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | CERVICALGIA, PARESTHESIA OF SKIN  | Speech Therapy                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CERVICALGIA, PARESTHESIA OF SKIN, ATYPICAL FACIAL PAIN  | NEUROLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHANGE IN BOWEL HABIT, GASTRO-ESOPH REFLUX DISEASE WITHOUT ESOPHAGITIS, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS, PERSONAL HISTORY OTH INFECTIOUS & PARASITIC DZ, PERSONAL HISTORY OF COLONIC POLYPS | GASTROENTEROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHEST PAIN ON BREATHING, LOCALIZED SWELLING MASS AND LUMP TRUNK   | SLEEP MEDICINE                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHEST PAIN UNSPECIFIED  | EMERGENCY MEDICINE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHEST PAIN UNSPECIFIED  | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHEST PAIN UNSPECIFIED  | INTERNAL MED/GASTROENTEROLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHEST PAIN UNSPECIFIED  | INTERNAL MEDICINE             | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | CHEST PAIN UNSPECIFIED, DYSPNEA UNSPECIFIED, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHEST PAIN UNSPECIFIED, FIBROMYALGIA  | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH   | INTERNAL MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHILLS WITHOUT FEVER, JAW PAIN, LOCALIZED ENLARGED LYMPH NODES  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHONDROMALACIA LEFT KNEE  | SPORTS MEDICINE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHONDROMALACIA PATELLAE LEFT KNEE   | SURGERY-ORTHOPEDIC            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHONDROMALACIA PATELLAE LEFT KNEE, PAIN IN RIGHT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE  | SURGERY-ORTHOPEDIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHONDROMALACIA PATELLAE LEFT KNEE, STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, COMPLEX TEAR LAT MENISC CURR INJ LT KNEE INITIAL  | SURGERY-ORTHOPEDIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHONDROMALACIA PATELLAE RIGHT KNEE  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHONDROMALACIA PATELLAE RIGHT KNEE  | SURGERY-ORTHOPEDIC            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHONDROMALACIA PATELLAE RIGHT KNEE, SPRAIN MED COLLATERAL LIGAMENT UNS KNEE INITIAL   | SURGERY-ORTHOPEDIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHOROIAL DEGENERATION UNSPECIFIED RIGHT EYE   | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC ETHMOIDAL SINUSITIS   | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC ETHMOIDAL SINUSITIS   | PLASTIC SURGERY               | 2                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | CHRONIC FATIGUE UNSPECIFIED, OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS                   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC FRONTAL SINUSITIS   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC HEPATITIS UNSPECIFIED   | PHYSICIAN ASSISTANT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC INSTABILITY OF KNEE LEFT KNEE   | SPORTS MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC LYMPHOCYT LEUKEMIA B-CELL TYPE NO REMISS, SMALL CELL B-CELL LYMPHOMA UNSPECIFIED SITE | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC MAXILLARY SINUSITIS   | OTOLARYNGOLOGIST (ENT)  | 11                 | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC MAXILLARY SINUSITIS, CHRONIC ETHMOIDAL SINUSITIS                                      | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC MAXILLARY SINUSITIS, CHRONIC ETHMOIDAL SINUSITIS, CHRONIC RHINITIS                    | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC MAXILLARY SINUSITIS, POLYP OF NASAL CAVITY  | OTOLOGIST               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM  | NEUROLOGY               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS   | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS   | SLEEP MEDICINE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC PAIN SYNDROME   | CHIROPRACTOR            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC PANSINUSITIS  | OTOLARYNGOLOGIST (ENT)  | 13                 | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC PANSINUSITIS, ACUTE SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC RHINITIS  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC RHINITIS  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC SINUSITIS UNSPECIFIED   | ALLERGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC SINUSITIS UNSPECIFIED   | ALLERGY & IMMUNOLOGY    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC SINUSITIS UNSPECIFIED   | FAMILY PRACTICE         | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC SINUSITIS UNSPECIFIED   | INTERNAL MEDICINE       | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)  | 14                 | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC SINUSITIS UNSPECIFIED   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | CHRONIC SPHENOIDAL SINUSITIS, MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS, ATYPICAL FACIAL PAIN | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC TENSION-TYPE HEADACHE NOT INTRACTABLE   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CHRONIC VIRAL HEPATITIS B WITHOUT DELTA-AGENT, LIVER CELL CARCINOMA                                 | HEPATOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CLEFT HARD & SOFT PALATE W/UNILATERAL CLEFT LIP   | DENTIST-GENERAL        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CNCTV TISS DISC STENOS IV FORAMINA ABD OTH RGN  | FAMILY PRACTICE        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COARCTATION OF AORTA  | CARDIOLOGIST           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COCCIDIOIDOMYCOSIS UNSPECIFIED  | INFECTIOUS DISEASES    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COLLAPSED VERT NEC LUMB RGN INIT ENC FX   | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COLLAPSED VERT NEC LUMB RGN INIT ENC FX   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COLLAPSED VERT NEC LUMB SUBSQT ENC FX W/HEALING   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COLLAPSED VERT NEC THOR RGN INIT ENC FX   | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COLLAPSED VERTEBRA NEC SITE UNS INIT ENC FX   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COMPLETE ROT CUFF TEAR/RUPT LT SHLDR NOT TRAUMAT  | SURGERY- ORTHOPEDIC    | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | CHIROPRACTOR           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | SURGERY- ORTHOPEDIC    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC   | SURGERY- ORTHOPEDIC    | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COMPLEX TEAR MED MENISCUS CURR RT KNEE INIT ENC   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COMPRESSION OF BRAIN, SYRINGOMYELIA AND SYRINGOBULBIA   | NEUROSURGERY           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COMPRESSION OF BRAIN, SYRINGOMYELIA AND SYRINGOBULBIA, Unknown                                      | SURGERY- NEUROLOGY     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COMPRESSION OF VEIN   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CONCUSSION WITHOUT LOC SUBSEQUENT ENCOUNTER, UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER           | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CONDUCTIVE HEARING LOSS BILATERAL   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CONGENITAL INSUFFICIENCY OF AORTIC VALVE  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | CONGENITAL MALFORMATION OF INNER EAR  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CONGENITAL MALFORMATIONS OTHER ENDOCRINE GLANDS, LOCALIZED SWELLING MASS AND LUMP NECK, Unknown | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CONGENITAL RENAL CYST UNSPECIFIED   | UROLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Congenital sacral dimple  | Neurology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CONNNS SYNDROME   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CONSTIPATION UNSPECIFIED  | SURGERY-GENERAL        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CONTUSION OF LEFT KNEE INITIAL ENCOUNTER  | PHYSICIAN ASSISTANT    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CONTUSION OF LEFT KNEE INITIAL ENCOUNTER  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CONTUSION OF RIGHT KNEE SUBSEQUENT ENCOUNTER  | SPORTS MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COUGH   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COUGH   | INTERNAL MEDICINE      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COUGH   | PCP/Pediatrician       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COUGH, MALIGNANT NEOPLASM OF RECTUM   | HEMATOLOGY             | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COUGH, PERSONAL HISTORY OF NICOTINE DEPENDENCE  | INTERNAL MEDICINE      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | COUGH, RHEUMATOID ARTHRITIS UNSPECIFIED   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COUGH, SHORTNESS OF BREATH  | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | COVID-19  | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CRAMP AND SPASM, PAIN IN LEFT SHOULDER  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE OF LARGE INTESTINE WITH FISTULA  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE SMALL & LARGE INTEST W/UNS COMP  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE SMALL & LARGE INTESTINE W/FIST   | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE SMALL INTESTINE W/O COMP   | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE SMALL INTESTINE W/O COMP, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM       | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE UNS W/OTHER COMPLICATION, OTHER PSORIASIS  | DERMATOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE UNS WITHOUT COMPLICATIONS  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE UNS WITHOUT COMPLICATIONS  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CROHNS DISEASE UNS WITHOUT COMPLICATIONS  | ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CUTANEOUS ABSCESS UNSPECIFIED   | SURGERY-GENERAL        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CYST AND MUOCOCELE OF NOSE AND NASAL SINUS  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | CYST OF KIDNEY ACQUIRED   | NEPHROLOGY                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CYST OF KIDNEY ACQUIRED   | SURGERY- UROLOGICAL                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CYST OF KIDNEY ACQUIRED   | UROLOGY                                  | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | CYST OF KIDNEY ACQUIRED, PERSONAL HISTORY OF URINARY CALCULI  | INTERNAL MEDICINE                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CYST OF PANCREAS  | INTERNAL MEDICINE                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CYST OF PANCREAS, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | PEDIATRICS                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CYSTIC DISEASE OF LIVER   | GASTROENTEROLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | CYSTIC FIBROSIS UNSPECIFIED   | PEDIATRIC PULMONOLOGIST                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | CYSTIC MENISCUS UNS LATERAL MENISCUS RT KNEE  | SURGERY- ORTHOPEDIC                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS   | NEUROLOGY                                | 5                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DEVIATED NASAL SEPTUM   | OTOLARYNGOLOGIST (ENT)                   | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DEVIATED NASAL SEPTUM   | SURGERY-PLASTIC OTOLARYNGOLOGICAL FACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DEVIATED NASAL SEPTUM, CHRONIC SINUSITIS UNSPECIFIED  | INTERNAL MEDICINE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES, CHRONIC SINUSITIS UNSPECIFIED, OTH ALLERGY STATUS OTH THAN RX&BIOLOGICL SUBSTNC | Surgery, General                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES, CHRONIC SINUSITIS UNSPECIFIED, POLYP OF NASAL CAVITY                            | FAMILY PRACTICE                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DEVIATED NASAL SEPTUM, Hypertrophy of Nasal Turbinates, Unknown   | INTERNAL MEDICINE                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIARRHEA UNSPECIFIED  | Rheumatology                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIARRHEA UNSPECIFIED, GENERALIZED ABDOMINAL PAIN, NONINFECTIVE GASTROENTERITIS & COLITIS UNS  | FAMILY PRACTICE                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIARRHEA UNSPECIFIED, MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS, Unknown   | HEMATOLOGY AND ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIARRHEA UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN  | INTERNAL MEDICINE                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIARRHEA UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN, PORTAL VEIN THROMBOSIS, UNSPECIFIED CIRRHOSIS OF LIVER                                | GASTROENTEROLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIPLOPIA  | NEUROLOGY                                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIPLOPIA, HYPOPITUITARISM, Unknown  | INTERNAL MEDICINE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISEASE OF INTESTINE UNSPECIFIED  | Rheumatology                             | 1                  |                  |                 |  |                          |                        |                      |                 |



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| SOCCPT                     | DISEASE OF PANCREAS UNSPECIFIED   | INTERNAL MEDICINE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISEASE OF PANCREAS UNSPECIFIED, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISEASE OF PANCREAS UNSPECIFIED, MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISEASE OF SALIVARY GLAND UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISEASE OF SPINAL CORD UNSPECIFIED  | SURGERY-NEUROLOGY         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISEASE OF SPINAL CORD UNSPECIFIED  | SURGERY-ORTHOPEDIC        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF ADRENAL GLAND UNSPECIFIED   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF ADRENAL GLAND UNSPECIFIED   | UROLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF ARTERIES AND ARTERIOLES UNSPECIFIED   | SURGERY-THORACIC          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF BONE UNSPECIFIED  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF BONE UNSPECIFIED  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF BONE UNSPECIFIED, MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                           | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF BRAIN UNSPECIFIED   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF BRAIN UNSPECIFIED   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF BRAIN UNSPECIFIED   | NEUROSURGERY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF BREAST UNSPECIFIED  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF KIDNEY AND URETER UNSPECIFIED, DISEASE OF PANCREAS UNSPECIFIED  | INTERNAL MEDICINE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF PARATHYROID GLAND UNSPECIFIED   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF PITUITARY GLAND UNSPECIFIED   | FAMILY PRACTICE           | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF PUBERTY UNSPECIFIED   | PEDIATRIC ENDOCRINOLOGIST | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER OF TRIGEMINAL NERVE UNSPECIFIED  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORDER THE SKIN & SUBCUTANEOUS TISSUE UNS, PERSONAL HISTORY MALIGNANT NEOPLASM OF THYROID, PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORIENTATION UNSPECIFIED  | INTERNAL MEDICINE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISORIENTATION UNSPECIFIED  | NEUROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISORIENTATION UNSPECIFIED, TENSION-TYPE HEADACHE UNSPECIFIED INTRACTABLE   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISPL BICONDYLAR FX LT TIBIA INIT ENC CLOS FX   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISPL BIMALLEOL FX LT LOW LEG SUBS CLOS RTN HEAL  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | DISPL TRIMALLEOL FX RT LOW LEG SUBS CLOS FX RTN   | ORTHOPEdic SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISPLACED FX 5TH METATARSAL LT FT SUBSQT FX RTN   | SURGERY- ORTHOPEdic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISPLACED FX HEAD LT RADIUS INIT CLOS FRACTURE  | SURGERY- ORTHOPEdic    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DISSECTION OF CAROTID ARTERY  | NEUROLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DISSECTION OF VERTEBRAL ARTERY  | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIVERTICULITIS LG INTEST W/O PERF/ABSC W/O BLEED  | SURGERY-GENERAL        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIVERTICULITIS LG INTEST W/PERF & ABSC W/O BLEED  | SURGERY-GENERAL        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED   | GASTROENTEROLOGY       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIVERTICULITIS PART UNS W/O PERF/ABSC W/O BLEED, ABSCESS OF LIVER   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIVERTICULOSIS LG INTEST W/O PERF/ABSC W/O BLEED  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIVERTICULOSIS PART UNS W/O PERF/ABSC W/O BLEED   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS   | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS   | FAMILY PRACTICE        | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS   | INTERNAL MEDICINE      | 6                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS   | NEUROLOGY              | 9                  | 7                | 7               |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS   | NURSE PRACTITIONER     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS   | PEDIATRICS             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS, BENIGN NEOPLASM OF MENINGES UNSPECIFIED, OTHER COMPLICATED HEADACHE SYNDROME             | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS, LESION LATERAL POPLITEAL NERVE RIGHT LOWER LIMB, LESION OF SCIATIC NERVE LEFT LOWER LIMB | NEPHROLOGY             |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS, OTALGIA BILATERAL, TINNITUS BILATERAL  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS, OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS, OTHER ABNORMALITIES OF GAIT AND MOBILITY   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS, OTHER MALFORMATIONS OF CEREBRAL VESSELS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS, OTHER SPECIFIED DISEASES INNER EAR UNS EAR   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | DIZZINESS AND GIDDINESS, UNSPECIFIED VISUAL DISTURBANCE, FAMILY HX MALIGNANT NEOPLASM OTH ORGANS/SYSTEMS, Unknown           | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DIZZINESS AND GIDDINESS, WHITE MATTER DISEASE UNSPECIFIED, MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAIN                   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DORSALGIA UNSPECIFIED, MODERATE PERSISTENT ASTHMA UNCOMPLICATED, PERSONAL HISTORY OF NICOTINE DEPENDENCE                    | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DORSALGIA UNSPECIFIED, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DORSALGIA UNSPECIFIED, OTH INTERVERTEBRAL DISC DEGEN THORACIC REGION  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DORSALGIA UNSPECIFIED, OTHER SYMPTOMS & SIGNS INVOLVING THE NS, RADICULOPATHY LUMBAR REGION, RADICULOPATHY SITE UNSPECIFIED | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DORSALGIA UNSPECIFIED, PAIN IN RIGHT SHOULDER   | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DORSALGIA UNSPECIFIED, PAIN IN THORACIC SPINE   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DORSALGIA UNSPECIFIED, RADICULOPATHY LUMBAR REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DORSALGIA UNSPECIFIED, RADICULOPATHY LUMBAR REGION  | ORTHOPEDIC SURGERY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | DSPL FX NCK RT RADIUS INITIAL ENC CLOS FRACTURE   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DSPLCD FX BDY SCAPULA RT SHLDR INIT ENC CLOS FX   | SURGERY-HAND                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DSPLCD FX GLND CAV SCAP RT SHOULDER INIT CLO FX   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DSPLCD FX SHAFT LT CLAV INIT ENC CLOS FRACTURE  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPHAGIA OROPHARYNGEAL PHASE, ACUTE PHARYNGITIS DUE TO OTHER SPEC ORGANISMS  | OTOLARYNGOLOGIST (ENT)             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPHAGIA PHARYNGOESOPHAGEAL PHASE  | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPHAGIA UNSPECIFIED   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPHAGIA UNSPECIFIED, CONGENITAL MALFORMATION OF HEART UNSPECIFIED   | GASTROENTEROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPHAGIA UNSPECIFIED, LOCALIZED SWELLING MASS AND LUMP NECK  | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPHONIA   | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPNEA UNSPECIFIED   | FAMILY PRACTICE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPNEA UNSPECIFIED   | INTERNAL MEDICINE                  |                    | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPNEA UNSPECIFIED   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | DYSPNEA UNSPECIFIED  | PULMONARY DISEASES                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DYSPNEA UNSPECIFIED, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS   | PULMONARY DISEASES                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | DYSURIA, PERSONAL HISTORY OF URINARY CALCULI   | FAMILY PRACTICE                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EARLY SATIETY, NAUSEA, Unknown   | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT ANKLE, METATARSALGIA LEFT FOOT   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT KNEE   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT KNEE   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT KNEE   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT KNEE, CHONDROMALACIA PATELLAE LEFT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT KNEE, PAIN IN LEFT KNEE  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT KNEE, PAIN IN LEFT KNEE  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT KNEE, PAIN IN LEFT KNEE  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION LEFT KNEE, UNS INJURY UNS LOWER LEG INITIAL ENCOUNTER, PAIN IN LEFT KNEE, SPRAIN OTHER SPEC PARTS LEFT KNEE INITIAL ENC, PAIN INTRL ORTHO PROSTH DEVC IMPL GFT INIT ENC | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION RIGHT ANKLE, PAIN IN RIGHT ANKLE  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION RIGHT ELBOW   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION RIGHT KNEE  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION UNSPECIFIED KNEE, PERSONAL HX OTH HEALED PHYSICAL INJURY & TRAUMA   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | EFFUSION UNSPECIFIED KNEE, SPRAIN ANT CRUCIATE LIGAMENT UNS KNEE INIT ENC  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ELEVATED C-REACTIVE PROTEIN CRP, PERSONAL HISTORY OTHER DISEASES DIGESTIVE SYSTEM  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ELEVATED C-REACTIVE PROTEIN CRP, UNSPECIFIED ABDOMINAL PAIN, DERMATOPOLYMYOSITIS UNS ORGAN INVOLVEMENT UNS   | RHEUMATOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Elevated prostate specific antigen [PSA]   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Elevated prostate specific antigen [PSA]   | Surgery, Plastic                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Elevated prostate specific antigen [PSA]   | UROLOGY                            | 11                 | 5                | 5               |  |                          |                        |                      |                 |
| SOCCPT                     | Elevated prostate specific antigen [PSA], Abnormal findings on diagnostic imaging of other specified body structures   | UROLOGY                            | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED  | INTERNAL MEDICINE       | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ELEVATED WHITE BLOOD CELL COUNT UNSPECIFIED  | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER F/U EXAM AFTER CMPL TX MALIG NEOPLASM  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION, PSEUDARTHROSIS AFTER FUSION OR ARTHRODESIS, PERITONEAL ADHESIONS POSTPROC POSTINFECTION, ARTHRODESIS STATUS | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER FOR OTHER SPECIFIED SURGICAL AFTERCARE   | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER GEN ADULT MED EXAM W/O ABNORMAL FIND, MALIG NEOPLASM UPPER-INNER QUAD LT FEMALE BREAST, TOBACCO USE  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER GEN ADULT MED EXAM W/O ABNORMAL FIND, PERSONAL HISTORY OF NICOTINE DEPENDENCE  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER GEN ADULT MEDICAL EXAM W/ABNORMAL FIND   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER OBSERV OTH SUSPCT DZ & COND RULED OUT  | ORTHOPEDIC SURGERY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST  | NURSE PRACTITIONER      | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST  | OBSTETRICS & GYNECOLOGY | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | FAMILY PRACTICE         | 3                  | 5                | 5               |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | INTERNAL MEDICINE       | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS   | SURGERY-ORTHOPEDIC      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENCOUNTER SCREENING MALIGNANT NEOPLASM PROSTATE  | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ENDOMETRIOSIS UNSPECIFIED  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENDOMETRIOSIS UNSPECIFIED, LEIOMYOMA OF UTERUS UNSPECIFIED   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ENLARGED LYMPH NODES UNSPECIFIED, LOCALIZED SWELLING MASS AND LUMP NECK  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENLARGED LYMPH NODES UNSPECIFIED, SOLITARY PULMONARY NODULE, FOLLICULAR LYMPHOMA UNSPEC SITE   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ENLARGED PROSTATE W/O LOWER URINARY TRACT SX   | UROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | ENLARGED PROSTATE W/O LOWER URINARY TRACT SX, MALIGNANT NEOPLASM OF PROSTATE   | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | EPIDEMIC VERTIGO   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPIDERMAL CYST   | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPIGASTRIC PAIN  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPIGASTRIC PAIN  | GASTROENTEROLOGY    | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | EPIGASTRIC PAIN  | INTERNAL MEDICINE   | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | EPIGASTRIC PAIN, CONSTIPATION UNSPECIFIED  | CARDIOLOGIST        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | EPIGASTRIC PAIN, DIFFUSE LARGE B-CELL LYMPHOMA EXTRANOD SOLID ORG  | HEMATOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPIGASTRIC PAIN, NAUSEA WITH VOMITING UNSPECIFIED  | GASTROENTEROLOGY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPIGASTRIC SWELLING MASS OR LUMP, CHRONIC FRONTAL SINUSITIS  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS  | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPILEPSY UNS NOT INTRACT W/O STATUS EPILEPTICUS, TOURETTES DISORDER  | Pediatrics          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPISODIC PAROXYSMAL HEMICRANIA NOT INTRACTABLE, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM                                       | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | EPISODIC TENSION-TYPE HEADACHE NOT INTRACTABLE   | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ERUCTION, ABN FIND DX IMAG OTH ABD REGIONS RETROPERITONEUM, DIVERTICULOSIS LG INTEST W/O PERF/ABSC W/O BLEED                       | GASTROENTEROLOGY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ESSENTIAL PRIMARY HYPERTENSION   | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ESSENTIAL PRIMARY HYPERTENSION   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ESSENTIAL PRIMARY HYPERTENSION, BELLS Palsy, TOBACCO ABUSE COUNSELING  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ESSENTIAL PRIMARY HYPERTENSION, VASCULAR DEMENTIA WITHOUT BEHAVIORAL DISTURBANCE, SEQUELAE OF OTH & SPEC INFECTIOUS & PARASITIC DZ | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | EXTRAPYRAMIDAL AND MOVEMENT DISORDER UNSPECIFIED   | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FACIAL MYOKYMIA  | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FACIAL WEAKNESS  | NURSE PRACTITIONER  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FACIAL WEAKNESS, PARESTHESIA OF SKIN   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FALLING JUMP/PUSH HI PLACE UNDET INTENT INIT ENC, UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE                                    | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST   | FAMILY PRACTICE     | 2                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | OBSTETRICS & GYNECOLOGY | 5                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FAMILY HISTORY OF MALIGNANT NEOPLASM OF PROSTATE, Unknown                                     | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM  | CARDIOVASCULAR DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST | Surgery, Plastic        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FASCICULATION   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FASCICULATION, MAJOR DEPRESSIVE D/O SINGLE EPIS FULL REMISSION, GENERALIZED ANXIETY DISORDER  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED  | NURSE PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FEVER UNSPECIFIED   | CARDIOVASCULAR DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FEVER UNSPECIFIED, UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN, TOBACCO USE          | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FOLLICULAR DISORDER UNSPECIFIED, FOLLICULAR LYMPHOMA UNSPEC LYMPH NODES MX SITES              | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FOLLICULAR LYMPHOMA GRADE I UNSPECIFIED SITE  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FOLLICULAR LYMPHOMA GRADE II EXTRANOD SOLID ORGN  | HEMATOLOGY              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FOLLICULAR LYMPHOMA UNS NODES ING RGN & LW LIMB   | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FOLLICULAR LYMPHOMA UNSPEC UNSPEC SITE  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FOOT DROP LEFT FOOT   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FOOT DROP LEFT FOOT, MULTIPLE SCLEROSIS   | NEUROSURGERY            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FOOT DROP UNSPECIFIED FOOT  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FRACTURE NASAL BONES INITIAL ENCOUNTER CLOSED FX  | OTOLARYNGOLOGIST (ENT)  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FRACTURE ONE RIB RIGHT INITIAL ENCNTD CLOSED FX   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FREQUENCY OF MICTURITION  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FULL INCONTINENCE OF FECES, UNSPECIFIED URINARY INCONTINENCE, RADICULOPATHY LUMBAR REGION     | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FUSION OF SPINE LUMBAR REGION   | ORTHOPEDIC SURGERY      |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | FUSION OF SPINE LUMBAR REGION, CERVICALGIA  | SURGERY-<br>ORTHOPEDIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | FX OTH PART SCAPULA RT SHOULDER INIT CLOS FX  | SURGERY-<br>ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | FX UNS PART NECK LT FEMUR INITIAL ENC CLOS FX, PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OVARY, AGE-RELATED OSTEOPOROSIS W/O CURRNT PATH FX | RHEUMATOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GANGLION RIGHT ANKLE AND FOOT, Unknown,   | ORTHOPEDIC<br>SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Gastrointestinal stromal tumor of small intestine   | HEMATOLOGY AND<br>ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Gastrointestinal stromal tumor of stomach   | HEMATOLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Gastrointestinal stromal tumor of stomach   | SURGERY-GENERAL            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GEN INTRA-ABD & PELVIC SWELLING MASS & LUMP   | GASTROENTEROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GEN INTRA-ABD & PELVIC SWELLING MASS & LUMP   | INTERNAL MEDICINE          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GEN INTRA-ABD & PELVIC SWELLING MASS & LUMP   | OBSTETRICS &<br>GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ABDOMINAL PAIN  | FAMILY PRACTICE            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ABDOMINAL PAIN  | GASTROENTEROLOGY           | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ABDOMINAL PAIN  | INTERNAL MEDICINE          |                    | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ABDOMINAL PAIN, GROSS HEMATURIA   | FAMILY PRACTICE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ABDOMINAL PAIN, GROSS HEMATURIA   | INTERNAL MEDICINE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ABDOMINAL PAIN, OTHER SPECIFIED DISEASES OF INTESTINE   | FAMILY PRACTICE            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN, HEMORRHAGE OF ANUS AND RECTUM   | GASTROENTEROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ENLARGED LYMPH NODES  | CARDIOVASCULAR<br>DISEASE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ENLARGED LYMPH NODES  | FAMILY PRACTICE            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ENLARGED LYMPH NODES  | INTERNAL MEDICINE          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GENERALIZED ENLARGED LYMPH NODES, UNSPECIFIED ASTHMA UNCOMPLICATED, PNEUMONIA UNSPECIFIED ORGANISM  | NURSE<br>PRACTITIONER      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GENETIC CARRIER OF OTHER DISEASE, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST         | OBSTETRICS &<br>GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST  | Gynecology (No OB)         | 1                  |                  |                 |  |                          |                        |                      |                 |



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| SOCCPT                     | GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST   | OBSTETRICS & GYNECOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST   | Surgery, Orthopedic     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GENETIC SUSCEPTIBILITY OTHER MALIGNANT NEOPLASM, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST    | PLASTIC SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GENETIC SUSCEPTIBILITY OTHER MALIGNANT NEOPLASM, GENETIC SUSCEPTIBILITY MALIGNANT NEOPLASM BREAST    | UROLOGY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | GLAUCOMA SEC OTH EYE D/O RT EYE MODERATE STAGE, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG        | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GOUT UNSPECIFIED   | RHEUMATOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GRAFT-VERSUS-HOST DISEASE UNSPECIFIED  | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GROSS HEMATURIA  | FAMILY PRACTICE         | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GROSS HEMATURIA  | INTERNAL MEDICINE       | 5                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | GROSS HEMATURIA  | PCP/Pediatrician        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GROSS HEMATURIA  | SURGERY- UROLOGICAL     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | GROSS HEMATURIA  | UROLOGY                 | 12                 | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | GROSS HEMATURIA, NOCTURIA, URINARY TRACT INFECTION SITE NOT SPECIFIED                                | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | GROSS HEMATURIA, PERSONAL HISTORY OF URINARY TRACT INFECTIONS  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HEMANGIOMA OF INTRA-ABDOMINAL STRUCTURES   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HEMANGIOMA OF INTRA-ABDOMINAL STRUCTURES, CYST OF KIDNEY ACQUIRED, OTHER SPECIFIED DISEASES OF LIVER | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEMANGIOMA OF SKIN AND SUBCUTANEOUS TISSUE   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HEMANGIOMA UNSPECIFIED SITE  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HEMANGIOMA UNSPECIFIED SITE  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEMATURIA UNSPECIFIED  | FAMILY PRACTICE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HEMATURIA UNSPECIFIED  | INTERNAL MEDICINE       | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEMATURIA UNSPECIFIED  | SURGERY- UROLOGICAL     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEMATURIA UNSPECIFIED  | UROLOGY                 | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEMATURIA UNSPECIFIED, OTHER PROTEINURIA, CHRONIC KIDNEY DISEASE STAGE 2 MILD                        | NEPHROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | HEMATURIA UNSPECIFIED, UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR   | NURSE PRACTITIONER      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEMOCHROMATOSIS UNSPECIFIED  | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEMOPTYSIS   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEMOPTYSIS, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, Unknown  | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED  | FAMILY PRACTICE         | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED  | INTERNAL MEDICINE       | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED  | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HEPATOMEGALY NOT ELSEWHERE CLASSIFIED, GENERALIZED ABDOMINAL PAIN  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HETERONYMOUS BILATERAL FIELD DEFECTS   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HODGKIN LYMPHOMA UNSPECIFIED UNSPECIFIED SITE  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HORNERS SYNDROME   | NEUROLOGY               | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HORNERS SYNDROME, UNSPECIFIED PTOSIS OF UNSPECIFIED EYELID   | OPHTHALMOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HYDROMYELIA  | SURGERY-NEUROLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HYDRONEPHROSIS W/RENAL & URETRL CALCULOUS OBST   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERFUNCTION OF PITUITARY GLAND UNSPECIFIED   | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERGLYCEMIA UNSPECIFIED  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERLIPIDEMIA UNSPECIFIED, CHEST PAIN UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERLIPIDEMIA UNSPECIFIED, OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY, VITAMIN D DEFICIENCY UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ANEMIA UNSPECIFIED, NONTOXIC SINGLE THYROID NODULE, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATION | NURSE PRACTITIONER      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERPROLACTINEMIA   | ENDOCRINOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERPROLACTINEMIA   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERTROPHY OF INFRAPATELLAR FAT PAD   | SURGERY-ORTHOPEDIC      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERTROPHY OF NASAL TURBINATES  | OTOLARYNGOLOGIST (ENT)  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | HYPERTROPHY OF TONSILS   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | HYPNIC HEADACHE  | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HYPOPITUITARISM  | PEDIATRIC ENDOCRINOLOGIST | 5                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HYPOXEMIA  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | HYPOXEMIA, DYSPNEA UNSPECIFIED   | CARDIOVASCULAR DISEASE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | IDIOPATHIC ASEPTIC NECROSIS OF LEFT FEMUR  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | IDIOPATHIC ASEPTIC NECROSIS OF RIGHT FEMUR   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | IDIOPATHIC ASEPTIC NECROSIS OF UNSPECIFIED FEMUR   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ILLNESS UNSPECIFIED  | INTERNAL MEDICINE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | IMPINGEMENT SYNDROME OF LEFT SHOULDER  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | IMPINGEMENT SYNDROME OF LEFT SHOULDER, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT  | Surgery, Orthopedic       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | IMPINGEMENT SYNDROME OF LEFT SHOULDER, SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | ORTHOPEDIC SURGERY        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | Surgery, Vascular         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | IMPINGEMENT SYNDROME OF RIGHT SHOULDER   | SURGERY- ORTHOPEDIC       | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INCISIONAL HERNIA WITHOUT OBSTRUCTION/GANGRENE   | GENERAL SURGERY           | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM   | SURGERY- ORTHOPEDIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INCONCLUSIVE MAMMOGRAM   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INCONCLUSIVE MAMMOGRAM   | OB/GYN                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INCONCLUSIVE MAMMOGRAM, BREAST IMPLANT STATUS  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INCONCLUSIVE MAMMOGRAM, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST   | OBSTETRICS & GYNECOLOGY   | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INCONCLUSIVE MAMMOGRAM, OTHER SPECIFIED PERSONAL RISK FACTORS NEC  | SURGERY-GENERAL           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INCONCLUSIVE MAMMOGRAM, PERSONAL HISTORY OF IRRADIATION, PERSONAL HISTORY OF HODGKIN LYMPHOMA, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST | ONCOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INF INFLAM RXN OTH INTRL PROS DEVC GFT INIT ENC  | SURGERY-GENERAL           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INFLAMMATORY POLYARTHROPATHY   | RHEUMATOLOGY              |                    | 2                | 2               |  |                          |                        |                      |                 |

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| SOCCPT                     | INJURY TRIGEMINAL NERVE RT SIDE INITIAL ENCNR  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTERSTITIAL PULMONARY DISEASE UNSPECIFIED   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LS RGN   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, RADICULOPATHY LUMBAR REGION                      | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, SEGMENTAL & SOMATIC DYSFUNCTION OF LUMBAR REGION | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, TROCHANTERIC BURSITIS LEFT HIP                   | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | Family Medicine                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | FAMILY PRACTICE                    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | INTERNAL MEDICINE                  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | OBSTETRICIAN AND GYNECOLOGIST      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | OBSTETRICS & GYNECOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE   | SURGERY-GENERAL                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, COMPLETE OR UNS SPONT ABORTION W/O COMPLICATION, | OBSTETRICS & GYNECOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, MALIGNANT NEOPLASM OF PROSTATE                 | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, OTHER SPEC ABNORMAL UTERINE & VAGINAL BLEEDING | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRA-ABD & PELVIC SWELLING MASS & LUMP UNS SITE, RIGHT UPPER QUADRANT PAIN                      | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRACRANIAL ABSCESS AND GRANULOMA   | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRACRANL & INTRASPINL PHLEBIT & THROMBOPHLEBIT   | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRADUCTAL CARCINOMA IN SITU OF LEFT BREAST   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRADUCTAL CARCINOMA IN SITU OF RIGHT BREAST  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRADUCTAL CARCINOMA SITU OF UNSPECIFIED BREAST   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | INTRAHEPATIC BILE DUCT CARCINOMA   | HEMATOLOGY              | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRAHEPATIC BILE DUCT CARCINOMA   | SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRAHEPATIC BILE DUCT CARCINOMA   | SURGERY-GENERAL         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | INTRAHEPATIC BILE DUCT CARCINOMA, Unknown  | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | IRRITABLE BOWEL SYNDROME WITHOUT DIARRHEA  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | JUVENILE OSTEOCHONDROSIS OF PATELLA LEFT KNEE  | SPORTS MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LATERAL EPICONDYLITIS LEFT ELBOW   | SURGERY-ORTHOPEDIC      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LATERAL EPICONDYLITIS RIGHT ELBOW  | CHIROPRACTOR            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LATERAL EPICONDYLITIS RIGHT ELBOW  | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LATERAL EPICONDYLITIS RIGHT ELBOW  | SURGERY-ORTHOPEDIC      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEAKAGE BREAST PROSTHESIS & IMPLANT INITIAL ENC  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEAKAGE BREAST PROSTHESIS & IMPLANT SUBSQT ENC   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT ABDOMINAL TENDERNESS   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN   | FAMILY PRACTICE         | 9                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN   | GASTROENTEROLOGY        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN   | INTERNAL MEDICINE       | 5                  | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN   | Neurology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN   | OBSTETRICS & GYNECOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN   | Obstetrics/Gynecology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | LEFT LOWER QUADRANT PAIN, CHANGE IN BOWEL HABIT, CONSTIPATION UNSPECIFIED  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN, CONSTIPATION UNSPECIFIED   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN, CROHNS DISEASE UNS WITHOUT COMPLICATIONS, DIVERTICULOSIS LG INTEST W/O PERF/ABSC W/O BLEED | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN, IRRITABLE BOWEL SYNDROME WITHOUT DIARRHEA, HEMORRHAGE OF ANUS AND RECTUM                   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN, RIGHT LOWER QUADRANT PAIN, OTH SPEC ENTHESOPATHIES LT LOW LIMB EXCLUD FOOT                 | Rheumatology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT LOWER QUADRANT PAIN, RIGHT UPPER QUADRANT PAIN  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT UPPER QUADRANT PAIN   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT UPPER QUADRANT PAIN   | GASTROENTEROLOGY        |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT UPPER QUADRANT PAIN, LEFT LOWER QUADRANT PAIN   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT UPPER QUADRANT PAIN, PAIN IN UNSPECIFIED KNEE, PAIN IN UNSPECIFIED LOWER LEG                                    | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT UPPER QUADRANT PAIN, UNSPECIFIED ABDOMINAL PAIN   | ANESTHESIOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEFT UPPER QUADRANT PAIN, UNSPECIFIED ABDOMINAL PAIN   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEIOMYOMA OF UTERUS UNSPECIFIED  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LEIOMYOMA OF UTERUS UNSPECIFIED  | OBSTETRICS & GYNECOLOGY | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | LEIOMYOMA OF UTERUS UNSPECIFIED  | RADIOLOGY               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LEIOMYOMA OF UTERUS UNSPECIFIED  | RADIOLOGY - DIAGNOSTIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LESION OF PLANTAR NERVE LEFT LOWER LIMB  | PODIATRY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LESION OF PLANTAR NERVE RIGHT LOWER LIMB   | PODIATRY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LESION OF ULNAR NERVE RIGHT UPPER LIMB   | HAND SURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER CELL CARCINOMA   | HEMATOLOGY              | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER CELL CARCINOMA   | HEPATOLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER CELL CARCINOMA, LIVER TRANSPLANT STATUS, ENCOUNTER AFTERCARE FOLLOWING LIVER TRANSPLANT                        | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER DISEASE UNSPECIFIED  | FAMILY PRACTICE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER DISEASE UNSPECIFIED  | GASTROENTEROLOGY        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER DISEASE UNSPECIFIED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER DISEASE UNSPECIFIED  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER DISEASE UNSPECIFIED  | Urology                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | LIVER DISEASE UNSPECIFIED, FATTY CHANGE OF LIVER NOT ELSEWHERE CLASSIFIED   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER DISEASE UNSPECIFIED, OTHER SPECIFIED DISEASES OF LIVER  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LIVER TRANSPLANT STATUS   | HEPATOLOGY              | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOBULAR CARCINOMA IN SITU OF LEFT BREAST  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED EDEMA, ADHESIVE CAPSULITIS OF LEFT SHOULDER, PAIN IN LEFT ARM, PAIN IN LEFT UPPER ARM   | SPORTS MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED EDEMA, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY  | HEMATOLOGY AND ONCOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED EDEMA, MALIGNANT NEOPLASM OF PANCREATIC DUCT  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED EDEMA, MALIGNANT NEOPLASM OF PANCREATIC DUCT, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY   | HEMATOLOGY AND ONCOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES  | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES  | FAMILY PRACTICE         | 3                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES  | GASTROENTEROLOGY        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES  | INTERNAL MEDICINE       | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES  | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES  | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES  | Rheumatology            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES, BENIGN ESSENTIAL MICROSCOPIC HEMATURIA, UNSPECIFIED ABDOMINAL PAIN  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES, DIZZINESS AND GIDDINESS, SARCOIDOSIS UNSPECIFIED, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST             | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES, FAMILY HISTORY OF LEUKEMIA  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES, SOLITARY PULMONARY NODULE, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PULMONARY FIBROSIS UNSPECIFIED | CRITICAL CARE MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED ENLARGED LYMPH NODES, SOLITARY PULMONARY NODULE, PULMONARY FIBROSIS UNSPECIFIED, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED    | CRITICAL CARE MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty            | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | LOCALIZED SWELLING MASS & LUMP RIGHT LOWER LIMB, PAIN IN RIGHT ANKLE, STRESS FRACTURE RT FOOT INITIAL ENC FOR FRACTURE | SURGERY-ORTHOPEDIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS & LUMP RIGHT LOWER LIMB, PAIN IN RIGHT HIP   | RHEUMATOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS & LUMP RIGHT UPPER LIMB  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS & LUMP RIGHT UPPER LIMB  | GENERAL SURGERY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS & LUMP RIGHT UPPER LIMB  | SURGERY-GENERAL               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP HEAD  | INTERNAL MEDICINE             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP HEAD  | OTOLARYNGOLOGIST (ENT)        | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP HEAD  | PHYSICIAN ASSISTANT           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP HEAD  | SURGERY, ORAL & MAXILLOFACIAL |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP HEAD  | SURGERY-NEUROLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB   | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB   | ONCOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB   | ORTHOPEDIC SURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB   | PHYSICIAN ASSISTANT           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT LOWER LIMB, PAIN IN LEFT KNEE  | SURGERY-ORTHOPEDIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB   | EMERGENCY MEDICINE            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB   | SURGERY-ORTHOPEDIC            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB, PAIN IN LEFT FINGERS   | HAND SURGERY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP LEFT UPPER LIMB, PAIN IN LEFT FINGERS   | SURGERY-HAND                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK  | ALLERGY & IMMUNOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK  | FAMILY PRACTICE               | 2                  | 5                | 5               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK  | INTERNAL MEDICINE             | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK  | OPTOMETRY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK  | OTOLARYNGOLOGIST (ENT)        | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK  | RHEUMATOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |



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|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK  | SURGERY- ORTHOPEDIC     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK, CERVICALGIA   | SURGERY- NEUROLOGY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK, NEOPLASM UNCERTAIN BEHAVIOR SUBMAND SALIV GLANDS  | OTOLARYNGOLOGIST (ENT)  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP NECK, PAIN IN RIGHT SHOULDER  | SPORTS MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP TRUNK   | FAMILY PRACTICE         | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP TRUNK   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP TRUNK   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP TRUNK   | SURGERY- PLASTIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP TRUNK, MALIGNANT NEOPLASM OF HEAD OF PANCREAS, MALIGNANT NEOPLASM OF PANCREATIC DUCT                          | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED   | SURGERY-GENERAL         |                    | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | LOCALIZED SWELLING MASS AND LUMP UNSPECIFIED, PERSONAL HISTORY OTHER MALIGNANT NEOPLASM KIDNEY, PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOC-REL IDIO EPI W/SEIZ LOC ONSET INTRCT W/O SE  | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOC-REL IDIO EPI W/SZ LOC ONSET NOT INTRACT W/SE   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOC-REL IDIO EPI W/SZ LOC ONSET NOT INTRCT NO SE   | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOC-REL IDIO EPI W/SZ LOC ONSET NOT INTRCT NO SE, Unknown,   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOC-REL SX EPILEPSY W/CPS INTRACT W/O STAT EPI, MALIGNANT NEOPLASM OF TEMPORAL LOBE, ENCOUNTER FOR THERAPEUTIC DRUG LEVEL MONITORING           | NEURO & ONCOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOC-REL SX EPILEPSY W/CPS INTRACT W/O STAT EPI, MALIGNANT NEOPLASM OF TEMPORAL LOBE, RADIATION SICKNESS UNSPECIFIED SEQUELA                    | NEURO & ONCOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOC-REL SX EPILEPSY W/CPS NOT INTRACT W/O SE   | PEDIATRIC NEUROLOGIST   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOOSE BODY IN KNEE LEFT KNEE   | NURSE PRACTITIONER      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOOSE BODY IN KNEE LEFT KNEE   | SPORTS MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | ANESTHESIOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | CARDIOVASCULAR DISEASE  |                    | 2                | 2               |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | LOW BACK PAIN  | FAMILY PRACTICE                    | 7                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | GENERAL PRACTICE                   | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | INTERNAL MEDICINE                  |                    | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | NEUROLOGY                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | NEUROSURGERY                       | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | ORTHOPEDIC SURGERY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | PAIN MANAGEMENT                    | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | PEDIATRIC ORTHOPEDIST              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | PHYSICAL MEDICINE & REHABILITATION | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | SURGERY-NEUROLOGY                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN  | SURGERY-ORTHOPEDIC                 | 6                  | 9                | 9               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, ANORECTAL FISTULA   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, CERVICALGIA   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, CERVICALGIA, OTHER CHRONIC PAIN   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, LUMBAGO WITH SCIATICA LEFT SIDE   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, LUMBAGO WITH SCIATICA LEFT SIDE   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION, LUMBAR SPINA BIFIDA WITHOUT HYDROCEPHALUS, SCOLIOSIS UNSPECIFIED, POSTLAMINECTOMY SYNDROME NEC | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS   | SURGERY-NEUROLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, OTHER CHRONIC PAIN  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | LOW BACK PAIN, PAIN IN RIGHT HIP  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, PAIN IN THORACIC SPINE   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, PAIN IN UNSPECIFIED JOINT  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, PERFORATION OF INTESTINE NONTRAUMATIC, CUTANEOUS ABSCESS OF ABDOMINAL WALL   | INFECTIOUS DISEASES                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | NEUROSURGERY                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, RADICULOPATHY LUMBAR REGION  | SURGERY- ORTHOPEDIC                | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, RADICULOPATHY LUMBOSACRAL REGION, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN                                 | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, RADICULOPATHY SITE UNSPECIFIED   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, SACROCOCCYGEAL DISORDERS NEC   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, SACROILIITIS NOT ELSEWHERE CLASSIFIED  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, SACROILIITIS NOT ELSEWHERE CLASSIFIED  | SPORTS MEDICINE                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, SCIATICA UNSPECIFIED SIDE, RADICULOPATHY LUMBAR REGION   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, PAIN IN RIGHT KNEE, CHRONIC PAIN SYNDROME                        | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY THOR RGN, PAIN IN THORACIC SPINE, OTHER SPONDYLOSIS LUMBAR REGION, Unknown | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LOW BACK PAIN, UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE   | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LOWER ABDOMINAL PAIN UNSPECIFIED  | FAMILY PRACTICE                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LOWER ABDOMINAL PAIN UNSPECIFIED  | INTERNAL MEDICINE                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | LOWER ABDOMINAL PAIN UNSPECIFIED, PERSONAL HISTORY OF NON-HODGKIN LYMPHOMAS   | ONCOLOGY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE   | FAMILY PRACTICE                    | 2                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE   | INTERNAL MEDICINE                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE   | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE   | PHYSICAL MEDICINE & REHABILITATION |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE   | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE, ANESTHESIA OF SKIN, LUMBAGO WITH SCIATICA RIGHT SIDE   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE, LUMBAGO WITH SCIATICA RIGHT SIDE   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE, OTH CERVICAL DISC DEGENERATION UNS CERV REGION, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION, Unknown | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION, OTHER CHRONIC PAIN                                      | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION, OTHER CHRONIC PAIN                                      | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA LEFT SIDE, SPINAL STENOSIS CERVICAL REGION  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA RIGHT SIDE  | FAMILY PRACTICE                    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA RIGHT SIDE  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA RIGHT SIDE  | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA RIGHT SIDE  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA RIGHT SIDE  | SPORTS MEDICINE                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN  | Speech Therapy                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA RIGHT SIDE, RADICULOPATHY CERVICAL REGION   | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE  | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE   | EMERGENCY MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE   | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LUMB RGN, Unknown  | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | LUMBAGO WITH SCIATICA UNSPECIFIED SIDE, OTHER CHRONIC PAIN   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MACROCEPHALY, ACUTE SUPPURATIVE OM W/O RUPT EAR DRUM LT EAR  | PEDIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MAJ DEPRESS D/O SINGLE EPIS SEV W/O PSYCH FEATUR   | PHYSIATRY               |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM CENTRAL PORTION LT FEMALE BREAST  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM LOWER-OUTER QUAD LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM NIPPLE & AREOLA LT FEMALE BREAST  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM UPPER-INNER QUAD LT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS                | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM UPPER-INNER QUAD RT FEMALE BREAST   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST   | SURGERY- PLASTIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST, PRESENCE OF OTHER SPECIFIED DEVICES              | SURGERY- PLASTIC        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST   | ONCOLOGY                | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIG NEOPLASM UPPER-OUTER QUAD UNS FEMALE BRST  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT CARCINOID TUMOR OF THE ASCENDING COLON   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT CARCINOID TUMOR OF THE ASCENDING COLON, MALIGNANT NEOPLASM OF OVERLAPPING SITES OF COLON | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT CARCINOID TUMOR OF THE STOMACH   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT MELANOMA LEFT UP LIMB INCL SHOULDER  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty            | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | MALIGNANT MELANOMA LEFT UP LIMB INCL SHOULDER  | SURGERY-GENERAL               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT MELANOMA OF OTHER PART OF TRUNK, OTHER DISEASES OF SALIVARY GLANDS   | PLASTIC SURGERY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS  | OTOLARYNGOLOGIST (ENT)        | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM BONE ARTICULAR CARTILAGE UNS  | SURGERY, ORAL & MAXILLOFACIAL |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM CONN SOFT TISS HEAD FACE NECK   | RADIATION ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | HEMATOLOGY                    |                    | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | HEMATOLOGY AND ONCOLOGY       | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | NEUROLOGY                     | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | ONCOLOGY                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | SURGERY-GENERAL               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM CONNECTIVE & SOFT TISSUE UNS  | SURGERY-ORTHOPEDIC            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG   | ONCOLOGY                      | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG                              | HEMATOLOGY AND ONCOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM LOWER LOBE LT BRONCHUS/LUNG, OTHER LONG TERM CURRENT DRUG THERAPY                                       | ONCOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM LOWER LOBE RT BRONCHUS/LUNG   | HEMATOLOGY                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM LOWER LOBE RT BRONCHUS/LUNG   | RADIATION ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS   | ONCOLOGY                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM LT KIDNEY EXCEPT RENAL PELVIS   | UROLOGY                       | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF AMPULLA OF VATER   | SURGERY-GENERAL               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ANAL CANAL   | ONCOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ANAL CANAL   | RADIATION ONCOLOGY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ANTERIOR WALL OF BLADDER   | UROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF APPENDIX   | HEMATOLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF APPENDIX, NEOPLASM OF UNCERTAIN BEHAVIOR OF APPENDIX, ENCOUNTER OTHER SPECIFIED SPECIAL EXAMINATIONS | SURGERY-GENERAL               | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | MALIGNANT NEOPLASM OF ASCENDING COLON  | HEMATOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED  | ONCOLOGY                        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF BLADDER UNSPECIFIED  | UROLOGY                         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF BONES OF SKULL AND FACE  | DIABETES & METABOLISM           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED  | NEUROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED  | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED  | PEDIATRIC HEMATOLOGY - ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED  | PHYSICIAN ASSISTANT             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF CECUM  | HEMATOLOGY                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED   | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF COLON UNSPECIFIED  | HEMATOLOGY AND ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF COLON UNSPECIFIED  | INTERNAL MEDICINE               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF COLON UNSPECIFIED  | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF COLON UNSPECIFIED, HEMORRHAGE OF ANUS AND RECTUM   | HEMATOLOGY AND ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF CORPUS UTERI UNSPECIFIED   | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF DESCENDING COLON   | HEMATOLOGY AND ONCOLOGY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF DESCENDING COLON   | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF DESCENDING COLON, IRON DEFICIENCY ANEMIA UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD             | ONCOLOGY                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ENDOMETRIUM  | GYNECOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ENDOMETRIUM  | HEMATOLOGY AND ONCOLOGY         | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ENDOMETRIUM  | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ENDOMETRIUM  | RADIATION ONCOLOGY              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED  | GASTROENTEROLOGY                | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD  | ONCOLOGY                        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | ONCOLOGY                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF FRONTAL LOBE   | NEUROLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF FRONTAL LOBE   | ONCOLOGY                        | 2                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | MALIGNANT NEOPLASM OF FRONTAL LOBE               | PHYSICIAN ASSISTANT           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF HEAD FACE AND NECK         | ONCOLOGY                      | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF HEAD FACE AND NECK         | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED         | Gynecologic Oncology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED         | RADIATION ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF LATERAL WALL OF BLADDER    | HEMATOLOGY AND ONCOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF LATERAL WALL OF BLADDER    | INTERNAL MEDICINE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF LATERAL WALL OF BLADDER    | UROLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF LEFT OVARY                 | GYNECOLOGY ONCOLOGY           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF LEFT OVARY                 | HEMATOLOGY AND ONCOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF LEFT OVARY                 | ONCOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF NASOPHARYNX UNSPECIFIED    | OTOLARYNGOLOGIST (ENT)        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF NASOPHARYNX UNSPECIFIED    | RADIATION ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF OROPHARYNX UNSPECIFIED     | SURGERY, ORAL & MAXILLOFACIAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF BRAIN | ONCOLOGY                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF OVERLAPPING SITES OF VULVA | ONCOLOGY                      |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED       | GENERAL PRACTICE              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED       | NURSE PRACTITIONER            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PANCREAS UNSPECIFIED       | Oncology                      | 7                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PANCREATIC DUCT            | Oncology                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PAROTID GLAND              | RADIATION ONCOLOGY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PROSTATE                   | HEMATOLOGY                    | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PROSTATE                   | INTERNAL MEDICINE             | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PROSTATE                   | ONCOLOGY                      | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PROSTATE                   | RADIATION ONCOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PROSTATE                   | RADIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF PROSTATE                   | UROLOGY                       | 8                  | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF RECTOSIGMOID JUNCTION      | GASTROENTEROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |



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|----------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | MALIGNANT NEOPLASM OF RECTUM  | HEMATOLOGY              | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF RECTUM  | SURGERY-GENERAL         | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF RIGHT OVARY   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF SIGMOID COLON   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF SIGMOID COLON   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF SIGMOID COLON, SECONDARY MALIGNANT NEOPLASM OF LEFT LUNG, SECONDARY MALIGNANT NEOPLASM OF RIGHT LUNG  | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF TONGUE UNSPECIFIED  | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED  | HEMATOLOGY AND ONCOLOGY | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED, SEC & UNS MALIG NEO LYMPH NODES HEAD FACE & NECK  | HEMATOLOGY AND ONCOLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF TONSILLAR FOSSA   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF TONSILLAR FOSSA   | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF TONSILLAR FOSSA, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF UNSPECIFIED OVARY   | GYNECOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF UNSPECIFIED OVARY   | GYNECOLOGY ONCOLOGY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF UTERUS PART UNSPECIFIED   | GYNECOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF VULVA UNSPECIFIED   | NURSE PRACTITIONER      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OF VULVA UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OVERLAP SITE LT BRONCH & LUNG  | ONCOLOGY                | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST  | SURGERY-PEDIATRIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS   | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OVERLAP SITE RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS   | UROLOGY                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | HEMATOLOGY AND ONCOLOGY | 2                  | 2                | 2               |  |                          |                        |                      |                 |

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|----------------------------|---|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | ONCOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM OVERLAPPING SITES OF BLADDER   | UROLOGY                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS  | HEMATOLOGY AND ONCOLOGY   | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS KIDNEY EXCEPT RENL PELVIS  | UROLOGY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG  | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART LEFT BRONCHUS/LUNG, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST, ENCOUNTER SCREENING MALIGNANT NEOPLASM OF COLON | HEMATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG   | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG   | HEMATOLOGY AND ONCOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG   | RADIATION ONCOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART RIGHT BRONCHUS/LUNG, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | ANESTHESIOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | Internal Medicine         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG   | ONCOLOGY                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | HEMATOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | OBSTETRICS & GYNECOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | SURGEON - BREAST          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE LEFT FEMALE BREAST  | SURGERY-GENERAL           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST   | GENERAL SURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST   | HEMATOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST   | RADIATION ONCOLOGY        |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST   | SURGERY-GENERAL           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS  | SURGERY-GENERAL           | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | HEMATOLOGY              | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | HEMATOLOGY AND ONCOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | ONCOLOGY                |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | PLASTIC SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | RADIATION ONCOLOGY      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | SURGERY-GENERAL         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST  | UROLOGY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, Unknown   | HEMATOLOGY              | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS TESTIS UNS DESC/UNDESCEND   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UNS TESTIS UNS DESC/UNDESCEND   | UROLOGY                 | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UPPER LOBE LT BRONCHUS/LUNG   | SURGERY-THORACIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG   | HEMATOLOGY              | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG   | HEMATOLOGY AND ONCOLOGY | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UPPER LOBE UNS BRONCHUS/LUNG  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT NEOPLASM UPPER LOBE UNS BRONCHUS/LUNG  | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MALIGNANT PRIMARY NEOPLASM UNSPECIFIED, SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES, SEC & UNS MALIG NEO LYMPH NODES HEAD FACE & NECK | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MARFANS SYNDROME UNSPECIFIED, THORACIC AORTIC ECTASIA, Unknown   | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MASTODYNIA, OTHER SPECIFIED PERSONAL RISK FACTORS NEC, FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST                                      | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MENSTRUAL MIGRAINE INTRACT W/O STAT MIGRAINOSUS, CHRONIC MIGRAINE W/O AURA INTRACT W/O STAT MIGR   | NEUROLOGY               | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | MERKEL CELL CARCINOMA UNSPECIFIED   | ONCOLOGY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MERKEL CELL CARCINOMA UNSPECIFIED PART OF FACE  | ONCOLOGY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | METATARSALGIA LEFT FOOT   | PODIATRY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | METATARSALGIA RIGHT FOOT  | PODIATRY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Microscopic colitis, unspecified  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS   | FAMILY PRACTICE        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS   | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/AURA INTRACT W/STATUS MIGRAINOSUS  | PAIN MANAGEMENT        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS  | FAMILY PRACTICE        | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS  | PEDIATRIC NEUROLOGIST  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/AURA NOT INTRACT W/STATUS MIGRAINOSUS  | INTERNAL MEDICINE      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/O AURA INTRACT W/O STAT MIGRAINOSUS  | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/O AURA INTRACT W/STAT MIGRAINOSUS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAIN  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/O AURA NOT INTRACT W/O STAT MIGRAIN, CEREBRAL ANEURYSM NONRUPTURED   | NEUROLOGY              | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MIGRAINE W/O AURA NOT INTRACT W/STAT MIGRAINOSUS  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MILD COGNITIVE IMPAIRMENT SO STATED   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MILD PERSISTENT ASTHMA UNCOMPLICATED  | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIX HEAR LOSS UNI RT EAR UNRESTRCT CONTRLAT SIDE, TINNITUS RIGHT EAR  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Mixed conductive and sensorineural hearing loss, unilateral, left ear with restricted hearing on the contralateral side   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIXED HYPERLIPIDEMIA, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERIPHERAL VASCULAR DISEASE UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, TYPE 2 DIABETES MELLITUS WITH HYPERGLYCEMIA, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MIXED HYPERLIPIDEMIA, PERIPHERAL VASCULAR DISEASE UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION   | CARDIOVASCULAR         |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | MIXED HYPERLIPIDEMIA, PERIPHERAL VASCULAR DISEASE UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | CARDIOVASCULAR                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MONOPLÉGIA UPPER LIMB AFFECTING UNSPECIFIED SIDE   | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MONOPLÉGIA UPPER LIMB LEFT NONDOMINANT SIDE  | NEUROLOGY                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MUCOPURULENT CHRONIC BRONCHITIS, NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MULTIPLE SCLEROSIS   | NEUROLOGY                          | 25                 | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | MULTIPLE SCLEROSIS   | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MULTIPLE SCLEROSIS   | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MULTIPLE SCLEROSIS   | PHYSICIAN ASSISTANT                |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MULTIPLE SCLEROSIS   | PSYCHIATRY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MULTIPLE SCLEROSIS, OTHER LONG TERM CURRENT DRUG THERAPY   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE SPASM OF BACK, LOW BACK PAIN, RADICULOPATHY LUMBAR REGION   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE WASTING & ATROPHY NEC LEFT LOWER LEG, ANESTHESIA OF SKIN, UNSPECIFIED DISTURBANCES OF SKIN SENSATION, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, URGENCY OF URINATION, DISEASE OF SPINAL CORD UNSPECIFIED, MULTIPLE SCLEROSIS | NEUROLOGY                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE WASTING & ATROPHY NEC LEFT LOWER LEG, UNSPECIFIED DISTURBANCES OF SKIN SENSATION  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE WASTING & ATROPHY NEC RIGHT THIGH, PAIN IN RIGHT THIGH  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE WASTING & ATROPHY NEC RIGHT THIGH, RADICULOPATHY LUMBAR REGION, OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION   | PAIN MANAGEMENT                    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE WEAKNESS GENERALIZED  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE WEAKNESS GENERALIZED  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE WEAKNESS GENERALIZED  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | MUSCLE WEAKNESS GENERALIZED, PAIN IN LEFT ANKLE, PAIN IN RIGHT ANKLE   | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | MYELOID SARCOMA NOT HAVING ACHIEVED REMISSION  | HEMATOLOGY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL CONGESTION   | ALLERGY                            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL CONGESTION   | INTERNAL MEDICINE                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | NASAL CONGESTION   | OTOLARYNGOLOGIST (ENT) | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL CONGESTION, ALLERGIC RHINITIS UNSPECIFIED, ACUTE RECURRENT MAXILLARY SINUSITIS, ATYPICAL FACIAL PAIN | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL CONGESTION, CHRONIC PANSINUSITIS, DEVIATED NASAL SEPTUM  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL CONGESTION, DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES, POLYP OF NASAL CAVITY            | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL CONGESTION, DEVIATED NASAL SEPTUM, OBSTRUCTIVE SLEEP APNEA ADULT PEDIATRIC                           | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL CONGESTION, OTHER CHRONIC SINUSITIS  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL POLYP UNSPECIFIED  | OTOLARYNGOLOGIST (ENT) | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL POLYP UNSPECIFIED, CHRONIC PANSINUSITIS  | OTOLARYNGOLOGIST (ENT) |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL POLYP UNSPECIFIED, CHRONIC SINUSITIS UNSPECIFIED   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NASAL POLYP UNSPECIFIED, OTHER CHRONIC SINUSITIS   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NAUSEA WITH VOMITING UNSPECIFIED   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NAUSEA WITH VOMITING UNSPECIFIED, CAR OCCUPANT INJURED UNS TRAFFIC ACC INIT ENC                            | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NDSPL BIMALLEOLAR FX LT LOW LEG INIT ENC CLOSED  | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNCERTAIN BEHAVIOR BRAIN UNSPECIFIED   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNCERTAIN BEHAVIOR OF PROSTATE, NODULAR PROS W/O LOWER URINARY TRACT SYMPTOMS, Unknown         | UROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNCERTAIN BEHAVIOR OTHER SPEC SITES  | Anesthesiology         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNCERTAIN BEHAVIOR OTHER SPEC SITES  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNS BEHAVIOR BONE SOFT TISSUE & SKIN   | SURGERY- ORTHOPEDIC    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNS BEHAVIOR DIGESTIVE SYSTEM  | INTERNAL MEDICINE      |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNS BHV ENDOCRN GLAND & OTH PART NS  | ENDOCRINOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNS BHV ENDOCRN GLAND & OTH PART NS  | NEUROSURGERY           | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Neoplasm of unspecified behavior of other genitourinary organ  | UROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NEOPLASM UNCERTAIN BHV LIVER GALLBLADDER & BD  | GASTROENTEROLOGY       | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | NEOPLASM UNCERTAIN BHV LIVER GALLBLADDER & BD   | ONCOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NEURALGIA AND NEURITIS UNSPECIFIED  | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NEUROFIBROMATOSIS UNSPECIFIED   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NEW DAILY PERSISTENT HEADACHE   | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NEW DAILY PERSISTENT HEADACHE   | INTERNAL MEDICINE  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NEW DAILY PERSISTENT HEADACHE   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | FAMILY PRACTICE    | 6                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | INTERNAL MEDICINE  | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | PULMONARY DISEASES | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS  | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, NICOTINE DEPENDENCE CIGARETTES W/UNS INDUCED D/O  | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED     | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED, TOBACCO USE                                       | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE CIGARETTES W/UNS INDUCED D/O  | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE OTH TOBACCO PRODUCT UNCOMP  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE OTH TOBACCO PRODUCT UNCOMP  | PULMONARY DISEASES | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE OTH TOBACCO PRODUCT UNCOMP, PERSONAL HISTORY OF NICOTINE DEPENDENCE         | INTERNAL MEDICINE  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE UNS W/UNS NIC-INDUCED D/O, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | Family Medicine    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | FAMILY PRACTICE    | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | INTERNAL MEDICINE  | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST  | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | INTERNAL MEDICINE  | 2                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED, PERSONAL HISTORY OF NICOTINE DEPENDENCE, TOBACCO ABUSE COUNSELING              | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NIPPLE DISCHARGE  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NODULAR PROS W/O LOWER URINARY TRACT SYMPTOMS   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NODULAR SCLEROSIS CLASS HL NODES HEAD FACE NECK   | ONCOLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NONALCOHOLIC STEATOHEPATITIS  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONALCOHOLIC STEATOHEPATITIS, UNSPECIFIED CIRRHOSIS OF LIVER  | HEPATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NONDISPLACED FX NAVICULAR RT FT INIT ENC CLOS FX  | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONDISPLACED FX NECK RT TALUS INIT ENC CLOSE FX   | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NON-HODGKIN LYMPHOMA UNS EXTRANODL & SOLID ORGAN  | GASTROENTEROLOGY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NON-HODGKIN LYMPHOMA UNS UNSPECIFIED SITE   | ONCOLOGY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NONINFECTIVE GASTROENTERITIS & COLITIS UNS  | GASTROENTEROLOGY        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NON-PRSS CHR ULCR OTH PRT UNS FOOT FAT LAY EXPOS, OTHER ACUTE OSTEOMYELITIS UNS ANKLE & FOOT, CUTANEOUS ABSCESS OF RIGHT FOOT | PODIATRY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONRHEUMATIC AORTIC VALVE DISORDER UNSPECIFIED  | SURGERY-VASCULAR        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NONRHEUMATIC AORTIC VALVE INSUFFICIENCY   | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONRHEUMATIC AORTIC VALVE STENOSIS  | CARDIOLOGIST            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONRHEUMATIC MITRAL VALVE STENOSIS, NONRHEUMATIC AORTIC VALVE STENOSIS  | Neurology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONSPEC REACTION CELL MED IMMUN MEAS GAMA   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NONSPEC REACTION CELL MED IMMUN MEAS GAMA   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONTRAUMATIC INTRACEREBRAL HEMORRHAGE UNS, QUADRIPLÉGIA UNSPECIFIED, NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN                | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | NONTRAUMATIC INTRACRANIAL HEMORRHAGE UNSPECIFIED  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONTRAUMATIC SUBARACHNOID HEMORRHAGE UNSPECIFIED  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | NONTRAUMATIC SUBARACHNOID HEMORRHAGE UNSPECIFIED, CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM                                | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |



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| SOCCPT                     | NONTRAUMATIC SUBDURAL HEMORRHAGE UNSPECIFIED  | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OBSTRUCTIVE AND REFLUX UROPATHY UNSPECIFIED   | UROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OBSTRUCTIVE SLEEP APNEA ADULT PEDIATRIC   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OBSTRUCTIVE SLEEP APNEA ADULT PEDIATRIC, Unknown  | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OCCLUSION & STENOSIS BILATERAL CAROTID ARTERIES   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OCCLUSION & STENOSIS BILATERAL VERTEBRAL ART  | NEUROLOGY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OCCLUSION AND STENOSIS OF RIGHT CAROTID ARTERY  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OCCLUSION AND STENOSIS OF RIGHT CAROTID ARTERY  | Rheumatology            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OCULAR HYPERTENSION BILATERAL, BENIGN INTRACRANIAL HYPERTENSION                                       | OPHTHALMOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OCULAR PAIN BILATERAL   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OCULAR PAIN RIGHT EYE   | OPHTHALMOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OCULAR PAIN RIGHT EYE, CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM                                   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OCULAR PAIN RIGHT EYE, DIZZINESS AND GIDDINESS, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM, Unknown | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OSTEOCHONDRITIS DISSECANS LT ANKLE JNTS LT FOOT   | PODIATRY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OSTEOCHONDROPATHY UNS UNSPECIFIED ANKLE & FOOT  | ORTHOPEDIC SURGERY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OSTEOMYELITIS UNSPECIFIED   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OSTEOPHYTE RIGHT FOOT   | SURGERY-PODIATRIST      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTALGIA UNSPECIFIED EAR, OTH MIGRAINE NOT INTRACT W/O STATUS MIGRAINOSUS                              | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST  | INTERNAL MEDICINE       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST  | RADIOLOGY - DIAGNOSTIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH ABNORM & INCONCLUSIVE FIND ON DX IMAG BREAST  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS, PROGRESSIVE EXTERNAL OPHTHALMOPLEGIA BILATERAL, BENIGN NEOPLASM OF MENINGES UNSPECIFIED  | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH ABNORMAL FIND ON DX IMAGING CNTRL NERV SYS, SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERV DISC DEGEN CERVICOTHORACIC REGION   | CHIROPRACTOR            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DEGENERATION UNS CERV REGION   | SURGERY- ORTHOPEDIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, PAIN IN LEFT SHOULDER  | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, RADICULOPATHY CERVICAL REGION  | GENERAL PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, RADICULOPATHY CERVICAL REGION  | ORTHOPEDIC SURGERY      |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DEGENERATION UNS CERV REGION, UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | ORTHOPEDIC SURGERY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DISORDERS UNS CERVICAL REGION, OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION  | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION   | ANESTHESIOLOGY          |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION   | CHIROPRACTOR            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CERVICAL DISC DISPLACEMENT UNS CERV REGION   | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL, ABNORMAL UTERINE & VAGINAL BLEEDING UNSPECIFIED   | Pediatric Surgery       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH COND ASSOC W/FE GEN ORGN & MENSTRUAL CYCL, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH CONGEN MALFORMATION PANCREAS PANCREATIC DUCT, OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | OTH CONGENITAL MALFORMATIONS MUSCULOSKELETAL SYS, CONGENITAL INSUFFICIENCY OF AORTIC VALVE, THORACIC AORTIC ECTASIA, AORTIC ECTASIA UNSPECIFIED SITE, OTHER SPECIFIED COUNSELING | PEDIATRIC CARDIOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH FRACTURE T11-T12 VERT INIT ENC CLOS FRACTURE   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH FX UPPER & LOWER RT FIBULA INIT ENC CLOS FX  | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH HYPERTROPHIC OSTEOARTHROPATHY MULTIPLE SITES   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH HYPERTROPHIC OSTEOARTHROPATHY MULTIPLE SITES, PAIN IN LEFT TOES, ARTHROPATHIC PSORIASIS UNSPECIFIED  | RHEUMATOLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH IA FX LOWER RT RADIUS INITIAL ENC CLOS FX  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INJURY FLEX M&T LT LF WRIST HAND LEVEL INIT  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INJURY FLEX M&T RT LF WRIST HAND LEVEL INIT, DSPL FX DIST PHAL RT LTL FNGR INIT ENC CLOS FX  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INJURY M&T OTH PART BICPS LT ARM INIT ENC  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | ANESTHESIOLOGY                     | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | ORTHOPEDIC SURGERY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | PAIN MANAGEMENT                    | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DEGEN LUMBAR REGION  | SURGERY- ORTHOPEDIC                |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DEGEN LUMBOSACRAL REGION, SPONDYLOLISTHESIS SITE UNSPECIFIED, OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION   | CHIROPRACTOR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LS REGION   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | Family Medicine                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | FAMILY PRACTICE         |                    | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | NEUROSURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | ORTHOPEDIC SURGERY      | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN  | PREVENTIVE MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION                     | PHYSICIAN ASSISTANT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, RADICULOPATHY LUMBAR REGION, PAIN IN RIGHT LEG  | NEUROSURGERY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, STRESS FRACTURE PELVIS INITIAL ENC FOR FRACTURE | ORTHOPEDIC SURGERY      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTERVERTEBRAL DISC DISPLACEMENT THOR REGION   | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH INTRA-ABD & PELVIC SWELLING MASS & LUMP  | SURGERY-GENERAL         | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH MENISCUS DERANGEMENTS UNS MENISCUS UNS KNEE  | SURGERY-ORTHOPEDIC      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH MENISCUS DERANGEMNT UNS LAT MENISCUS RT KNEE   | PREVENTIVE MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH NONDSPLC FX LOWER LT HUM INITIAL ENC CLOS FX   | SURGERY-ORTHOPEDIC      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH NONDSPLCD FX UP END LT HUM INIT ENC CLOS FX  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH NONINFLAMM D/O OVARY FALLOP TUBE & BROAD LIG   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH PULMONARY EMBOLISM W/O ACUTE COR PULMONALE   | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH PULMONARY EMBOLISM W/O ACUTE COR PULMONALE   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH PULMONARY EMBOLISM W/O ACUTE COR PULMONALE   | Rheumatology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SLEEP D/O NOT DUE SBSTNC/KNOWN PHYSIOLG COND   | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS  | FAMILY PRACTICE         |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPEC SX & SIGNS INVLV THE CIRC & RESP SYS, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER, PRIMARY OSTEOARTHRITIS LEFT SHOULDER, MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED, ENCOUNTER SCREENING MAMMO MALIG NEOPLASM BREAST | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPEC SX & SIGNS INVLV THE DIGESTV SYS & ABD   | GASTROENTEROLOGY                   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPEC SX & SIGNS INVLV THE DIGESTV SYS & ABD, URINARY TRACT INFECTION SITE NOT SPECIFIED   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION   | INTERNAL MEDICINE                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION   | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPONDYLOSIS W/RADICULOPATHY LUMBAR REGION, OTH SPONDYLOSIS W/RADICULOPATHY CERVICAL REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPONDYLOSIS W/RADICULOPATHY LUMBOSACRAL RGN, INTERVERTEBRAL DISC D/O W/RADICULOPATHY LS RGN   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SPONDYLOSIS W/RADICULOPATHY THORACIC REGION, RADICULOPATHY THORACIC REGION  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS   | PSYCHIATRY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, CERVICALGIA, BRACHIAL PLEXUS DISORDERS   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, OTHER CHRONIC PAIN, Unknown  | INTERNAL MEDICINE                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, RADICULOPATHY CERVICAL REGION, PAIN IN LEFT SHOULDER   | PREVENTIVE MEDICINE                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR LAT MENISC CURRNT INJ LT KNEE INIT ENC   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR LAT MENISC CURRNT INJ LT KNEE SEQUELA  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | OTH TEAR LAT MENISC CURRNT INJ RT KNEE SBSQT ENC  | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | DERMATOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | SPORTS MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC   | SURGERY- ORTHOPEDIC    | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ LT KNEE SBSQT ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC                    | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ LT KNEE SEQUELA  | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | SPORTS MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC   | SURGERY- ORTHOPEDIC    | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ RT KNEE SBSQT ENC  | CARDIOVASCULAR DISEASE | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR MED MENISCUS CURR INJ UNS KNEE INIT ENC  | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TEAR UNS MENISCUS CURR INJ RT KNEE INIT ENC   | SURGERY- ORTHOPEDIC    | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTH TRANSIENT CERBRAL ISCHEMIC ATTACKS & REL SYND   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ABNORMAL INVOLUNTARY MOVEMENTS, ABNORMAL REFLEX   | PEDIATRIC NEUROLOGIST  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ABNORMALITIES OF GAIT AND MOBILITY  | Family Medicine        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ABNORMALITIES OF GAIT AND MOBILITY  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ABNORMALITIES OF GAIT AND MOBILITY  | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ABNORMALITIES OF GAIT AND MOBILITY, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS, POLYNEUROPATHY UNSPECIFIED | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ABNORMALITIES OF GAIT AND MOBILITY, PARESTHESIA OF SKIN, MULTIPLE SCLEROSIS                                     | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ABNORMALITIES OF GAIT AND MOBILITY, TREMOR UNSPECIFIED, UNSPECIFIED FALL INITIAL ENCOUNTER                      | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ACQUIRED DEFORMITIES OF RIGHT FOOT, OTHER ACQUIRED DEFORMITIES OF LEFT FOOT                                     | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ACQUIRED DEFORMITIES OF UNSPECIFIED FOOT  | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ADRENOCORTICAL OVERACTIVITY   | GENERAL PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA   | INTERNAL MEDICINE      | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA   | NEUROLOGY              | 4                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | OTHER AMNESIA, ALTERED MENTAL STATUS UNSPECIFIED, UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER, HEMICRANIA CONTINUA  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA, ANXIETY DISORDER UNSPECIFIED, Unknown   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA, ANXIETY DISORDER UNSPECIFIED, Unknown   | NURSE PRACTITIONER        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA, DIZZINESS AND GIDDINESS, SARCOIDOSIS UNSPECIFIED, BRACHIAL PLEXUS DISORDERS, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA, OTH SX & SIGNS INVOLV COGNITIVE FUNC & AWARENESS  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA, OTHER ABNORMALITIES OF GAIT AND MOBILITY  | NEUROLOGY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER AMNESIA, TRANSIENT GLOBAL AMNESIA, Unknown   | NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ARTICULAR CARTILAGE DISORDERS LEFT HIP   | ORTHOPEDIC SURGERY        | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ARTICULAR CARTILAGE DISORDERS RIGHT HIP  | SURGERY- ORTHOPEDIC       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ARTICULAR CARTILAGE DISORDERS RT SHOULDER  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER BENIGN NEOPLASM OF UTERUS UNSPECIFIED  | OBSTETRICS & GYNECOLOGY   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER BENIGN NEUROENDOCRINE TUMORS   | ONCOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER BENIGN NEUROENDOCRINE TUMORS   | RADIATION ONCOLOGY        |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER BENIGN NEUROENDOCRINE TUMORS   | SURGERY                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER BENIGN NEUROENDOCRINE TUMORS, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS  | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER BENIGN NEUROENDOCRINE TUMORS, MALIGNANT NEOPLASM UPPER LOBE RT BRONCHUS/LUNG   | ONCOLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHEST PAIN   | EMERGENCY MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHEST PAIN   | FAMILY PRACTICE           | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHEST PAIN   | PULMONARY DISEASES        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHEST PAIN, DYSPNEA UNSPECIFIED, SHORTNESS OF BREATH   | Surgery, Thoracic         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHEST PAIN, ESSENTIAL PRIMARY HYPERTENSION   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC CYSTITIS WITH HEMATURIA  | UROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | OTHER CHRONIC OSTEOMYELITIS RIGHT HAND                  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC PAIN                                      | FAMILY PRACTICE                    | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC PAIN                                      | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC PAIN                                      | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC PAIN                                      | PEDIATRICS                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC PAIN                                      | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC PAIN                                      | PHYSICIAN ASSISTANT                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC PAIN                                      | RHEUMATOLOGY                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC PANCREATITIS                              | GASTROENTEROLOGY                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER CHRONIC SINUSITIS                                 | OTOLARYNGOLOGIST (ENT)             | 14                 | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER COMPLICATED HEADACHE SYNDROME                     | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Other congenital malformations of aorta                 | CARDIOVASCULAR DISEASE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Other diseases of mediastinum, not elsewhere classified | SURGERY-THORACIC                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISEASES OF PULMONARY VESSELS                     | CARDIOVASCULAR DISEASE             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISEASES OF SALIVARY GLANDS                       | INTERNAL MEDICINE                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISEASES OF SPLEEN                                | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISEASES OF SPLEEN                                | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISEASES OF SPLEEN                                | RADIOLOGY - DIAGNOSTIC             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISEASES OF STOMACH AND DUODENUM                  | Gastroenterology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISEASES OF STOMACH AND DUODENUM                  | ONCOLOGY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF LUNG                                 | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF LUNG                                 | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF LUNG                                 | PULMONARY DISEASES                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF LUNG                                 | SLEEP MEDICINE                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF LUNG                                 | SURGERY-THORACIC                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF PITUITARY GLAND                      | ENDOCRINOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF PITUITARY GLAND                      | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF PITUITARY GLAND                      | PEDIATRIC ENDOCRINOLOGIST          | 1                  |                  |                 |  |                          |                        |                      |                 |



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| SOCCPT                     | OTHER DISORDERS OF PITUITARY GLAND, BENIGN NEOPLASM OF PITUITARY GLAND   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF PITUITARY GLAND, HYPERPROLACTINEMIA   | ENDOCRINOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OF PLASMA-PROTEIN METABOLISM NEC, OTHER DISORDERS OF BILIRUBIN METABOLISM, ALCOHOLIC CIRRHOSIS OF LIVER WITH ASCITES, HEPATIC FAILURE UNSPECIFIED WITHOUT COMA | HEPATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISORDERS OPTIC NERVE NEC UNSPECIFIED EYE  | PSYCHIATRY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DISTURBANCES OF SKIN SENSATION   | NEUROLOGY               |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER DORSALGIA  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER ENTHESOPATHY OF LEFT FOOT, POSTERIOR TIBIAL TENDINITIS LEFT LEG, CELLULITIS OF LEFT LOWER LIMB   | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER FECAL ABNORMALITIES, LEFT LOWER QUADRANT PAIN  | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER FORMS OF ANGINA PECTORIS   | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER FORMS OF DYSPNEA   | PULMONARY DISEASES      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED  | NEUROSURGERY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED  | SURGERY- ORTHOPEDIC     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER GENERAL SYMPTOMS AND SIGNS   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER GENERAL SYMPTOMS AND SIGNS, ANESTHESIA OF SKIN, Unknown  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER GENERAL SYMPTOMS AND SIGNS, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER GENERAL SYMPTOMS AND SIGNS, MALIGNANT NEOPLASM OF TONSIL UNSPECIFIED   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER HALLUCINATIONS   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER HALLUCINATIONS   | OTOLARYNGOLOGIST (ENT)  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER HEADACHE SYNDROME  | INTERNAL MEDICINE       |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INFLAMMATORY AND IMMUNE MYOPATHIES NEC   | PEDIATRIC NEUROLOGIST   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INJ OTH SPEC M&T WRIST HAND RT HAND INIT   | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INSTABILITY LEFT ANKLE   | PODIATRY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INSTABILITY RIGHT ANKLE  | PODIATRY                | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INSTABILITY RIGHT ANKLE, PAIN IN RIGHT ANKLE, OTHER CHRONIC PAIN, UNSPECIFIED INJURY RIGHT ANKLE SUBSEQUENT ENCNTN   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | OTHER INSTABILITY RIGHT ELBOW  | Cardiovascular Disease | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INSTABILITY RIGHT KNEE   | GENERAL PRACTICE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INSTABILITY RIGHT KNEE   | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INSTABILITY RIGHT SHOULDER   | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INTERNAL DERANGEMENTS OF LEFT KNEE   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER INTERNAL DERANGEMENTS OF LEFT KNEE   | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER JUVENILE ARTHRITIS UNSPECIFIED SITE  | RHEUMATOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER LESIONS OF ORAL MUCOSA   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER MALIGNANT NEUROENDOCRINE TUMORS  | RADIOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Other microscopic hematuria  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Other microscopic hematuria  | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Other microscopic hematuria  | PHYSICIAN ASSISTANT    | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Other microscopic hematuria  | UROLOGY                | 10                 |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER MUSCLE SPASM   | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER MUSCLE SPASM, TREMOR UNSPECIFIED, PARESTHESIA OF SKIN  | NEUROLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | CRITICAL CARE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | FAMILY PRACTICE        | 10                 | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | GENERAL PRACTICE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | INFECTIOUS DISEASES    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | INTERNAL MEDICINE      | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | PULMONARY DISEASES     | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD   | Rheumatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, AORTIC ECTASIA UNSPECIFIED SITE  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, BRONCHIECTASIS UNCOMPLICATED   | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, DYSPNEA UNSPECIFIED, ESSENTIAL PRIMARY HYPERTENSION, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, MALIGNANT NEOPLASM OF RECTUM, PERSONAL HX OTH MAL NEO RECTUM RS JUNC & ANUS              | SURGERY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE   | PULMONARY DISEASES     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERSONAL HISTORY OF NICOTINE DEPENDENCE  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, PERSONAL HISTORY OF OTHER SPECIFIED CONDITIONS   | PULMONARY DISEASES     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER NONSPECIFIC LYMPHADENITIS  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER OSSIFICATION OF MUSCLE UNSPECIFIED SITE, UNSPECIFIED ABDOMINAL PAIN, OTHER INTRAOP POSTPROC COMP D/O MSK SYSTEM                      | Surgery, Vascular      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER PERIPHERAL VERTIGO UNSPECIFIED EAR   | OTOLARYNGOLOGIST (ENT) | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER PNEUMONIA UNSPECIFIED ORGANISM   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER POLYP OF SINUS   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SEIZURES   | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SHOULDER LESIONS LEFT SHOULDER   | SPORTS MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SHOULDER LESIONS LEFT SHOULDER   | SURGERY-HAND           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SHOULDER LESIONS LEFT SHOULDER, BURSITIS OF LEFT SHOULDER  | SURGERY-HAND           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SHOULDER LESIONS LEFT SHOULDER, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BURSITIS OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY   | GASTROENTEROLOGY       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY   | INTERNAL MEDICINE      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY, HEMATURIA UNSPECIFIED  | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPEC ABNORMAL FINDINGS BLOOD CHEMISTRY, OTHER CHEST PAIN, SHORTNESS OF BREATH  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPEC CONGENITAL MALFORMATIONS NS, EPILEPSY UNS INTRACTABLE W/O STATUS EPILEPTICUS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPEC INJURIES LT WRIST HAND FINGERS INIT   | SURGERY-HAND           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPEC INJURIES LT WRIST HAND FINGERS INIT, PAIN IN LEFT WRIST   | SURGERY-HAND           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPEC INJURIES RT LOWER LEG INITIAL ENCNR   | SPORTS MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | OTHER SPEC INJURIES RT WRIST HAND FINGERS INIT   | HAND SURGERY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIC ARTHROPATHIES NEC LEFT SHOULDER   | ORTHOPEDIC SURGERY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIC JOINT DERANGEMENTS RIGHT HIP NEC  | CHIROPRACTOR           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED CONGENITAL DEFORMITIES OF FEET   | ORTHOPEDIC SURGERY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED CONGENITAL DEFORMITIES OF FEET   | PODIATRY               |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED CONGENITAL MALFORMATIONS BRAIN, LOC-REL SX EPILEPSY W/CPS INTRACT W/O STAT EPI | SURGERY-NEUROLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISEASES OF ANUS AND RECTUM  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISEASES OF GALLBLADDER  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISEASES OF JAWS   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISEASES OF LIVER  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISEASES OF LIVER  | INTERNAL MEDICINE      | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISEASES OF LIVER  | ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Other specified diseases of pancreas   | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Other specified diseases of pancreas   | INTERNAL MEDICINE      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Other specified diseases of pancreas   | SURGERY-GENERAL        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISEASES OF SPINAL CORD  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS ARTERIES & ARTERIOLES  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS ARTERIES & ARTERIOLES  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS CHOROID  | OPHTHALMOLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS NOSE AND NASAL SINUSES   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS NOSE AND NASAL SINUSES   | OTOLARYNGOLOGIST (ENT) | 5                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS NOSE AND NASAL SINUSES, CHRONIC MAXILLARY SINUSITIS                  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND   | ENDOCRINOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF ADRENAL GLAND   | SURGERY-UROLOGICAL     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF BLADDER   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF BONE OTHER SITE   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF BRAIN   | RADIOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|-------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER   | UROLOGY                       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER, ACUTE CYSTITIS WITHOUT HEMATURIA, MALIGNANT NEOPLASM RT KIDNEY EXCEPT RENAL PELVIS               | UROLOGY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER, BLADDER DISORDER UNSPECIFIED   | UROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER, OTHER SPECIFIED DISEASES OF BILIARY TRACT  | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF MUSCLE, HYPERTROPHY OF SALIVARY GLAND   | SURGERY, ORAL & MAXILLOFACIAL | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DISORDERS OF PERITONEUM  | FAMILY PRACTICE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED DORSOPATHIES LUMBAR REGION   | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED HEARING LOSS LEFT EAR  | OTOLARYNGOLOGIST (ENT)        | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED HEARING LOSS UNSPECIFIED EAR, TINNITUS LEFT EAR  | OTOLARYNGOLOGIST (ENT)        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED JOINT DISORDERS LEFT SHOULDER, MALIGNANT NEOPLASM ANTERIOR 2/3 TONGUE PART UNS, SEC & UNS MALIG NEO LYMPH NODES HEAD FACE & NECK | HEMATOLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED JOINT DISORDERS LT ANKLE & FOOT  | SURGERY-PODIATRIST            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP  | SURGERY-ORTHOPEDIC            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED JOINT DISORDERS RIGHT HIP, LESION OF SCIATIC NERVE RIGHT LOWER LIMB  | FAMILY PRACTICE               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED JOINT DISORDERS RIGHT KNEE   | ORTHOPEDIC SURGERY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED JOINT DISORDERS RT ANKLE & FOOT  | ORTHOPEDIC SURGERY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED JOINT DISORDERS UNSPECIFIED HIP  | SURGERY-ORTHOPEDIC            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED MONONEUROPATHIES LT LOWER LIMB   | SURGERY-ORTHOPEDIC            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED NONPSYCHOTIC MENTAL DISORDERS  | NEUROLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED PERSONAL RISK FACTORS NEC  | ONCOLOGY                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED PERSONAL RISK FACTORS NEC, ENCOUNTER OTHER SCREENING MALIG NEOPLASM BREAST   | HEMATOLOGY AND ONCOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Other specified postprocedural states  | CARDIOLOGIST                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Other specified postprocedural states  | NEUROSURGERY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED SOFT TISSUE DISORDERS  | GENERAL SURGERY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED SOFT TISSUE DISORDERS  | INFECTIOUS DISEASES           | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | OTHER SPECIFIED SOFT TISSUE DISORDERS  | SURGERY-VASCULAR                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPECIFIED SPRAIN OF RIGHT WRIST SUBSQT ENC   | SURGERY-HAND                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPONDYLOSIS LUMBAR REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPONDYLOSIS W/MYELOPATHY CERVICAL REGION   | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPONDYLOSIS WITH MYELOPATHY LUMBAR REGION  | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPRAIN OF LEFT HIP INITIAL ENCOUNTER   | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPRAIN OF RIGHT ELBOW INITIAL ENCOUNTER  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SPRAIN UNS ELBOW SUBSEQUENT ENCOUNTER, SPRAIN INTERPHALANGEAL JOINT RT THUMB INITIAL, UNS FX LOWER END RT RADIUS INITIAL ENC CLOSED FX | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER SYNOVITIS & TENOSYNOVITIS LT ANKLE & FOOT  | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER TICS OF ORGANIC ORIGIN   | PSYCHIATRY                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER VISUAL DISTURBANCES  | EMERGENCY MEDICINE                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER VISUAL DISTURBANCES  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER VISUAL DISTURBANCES  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER VISUAL DISTURBANCES  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER VISUAL DISTURBANCES  | OPHTHALMOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER VISUAL DISTURBANCES, ANEURYSM OF CAROTID ARTERY, CHRONIC MIGRAINE W/O AURA INTRACT W/STAT MIGR, Unknown                                | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER VISUAL DISTURBANCES, PRIMARY THUNDERCLAP HEADACHE, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTHER VISUAL DISTURBANCES, UNSPECIFIED EXOPHTHALMOS  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | OTITIS MEDIA UNSPECIFIED LEFT EAR  | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Pain in joints of left hand  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE   | ORTHOPEDIC SURGERY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE   | PODIATRY                           | 2                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PAIN IN LEFT ANKLE  | SURGERY- ORTHOPEDIC                | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE, OTHER CHRONIC PAIN  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE, OTHER CHRONIC PAIN, PLANTAR FASCIAL FIBROMATOSIS, PAIN IN LEFT FOOT | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE, OTHER INSTABILITY LEFT ANKLE  | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE, PAIN IN LEFT FOOT   | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE, PERONEAL TENDINITIS LEFT LEG  | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ANKLE, STRESS FRACTURE LT FOOT INITIAL ENC FOR FRACTURE                    | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ARM  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ELBOW  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ELBOW  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ELBOW  | RHEUMATOLOGY                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT ELBOW, OTHER CHRONIC PAIN  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT FOOT   | FAMILY PRACTICE                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT FOOT   | PODIATRY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT FOOT   | SURGERY- ORTHOPEDIC                | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT FOOT, DISPLACED FX 5TH METATARSAL LT FT SUBSQ FX RTN                       | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HAND   | RHEUMATOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HAND   | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HIP  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HIP  | INTERNAL MEDICINE                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HIP  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HIP  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HIP  | PSYCHIATRY                         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HIP  | SURGERY- ORTHOPEDIC                | 6                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HIP, IDIOPATHIC ASEPTIC NECROSIS OF LEFT FEMUR                             | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT HIP, UNSPECIFIED INJURY LEFT HIP INITIAL ENCOUNTER                         | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | FAMILY PRACTICE                    | 3                  | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | GENERAL PRACTICE                   | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PAIN IN LEFT KNEE   | INTERNAL MEDICINE                  |                    | 5                | 5               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | NEUROLOGY                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | ORTHOPEDIC - NON SURGICAL          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | ORTHOPEDIC SURGERY                 | 9                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | PEDIATRICS                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | PHYSICIAN ASSISTANT                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE   | SURGERY- ORTHOPEDIC                | 27                 | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, CONTUSION OF LEFT KNEE INITIAL ENCOUNTER   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC  | GENERAL SURGERY                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN   | SURGERY- ORTHOPEDIC                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, OTHER CHRONIC PAIN, UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE                                      | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, OTHER INSTABILITY LEFT KNEE, PAIN IN RIGHT KNEE, OTHER INSTABILITY RIGHT KNEE, CHRONIC PAIN SYNDROME | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, PAIN IN RIGHT KNEE   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, PAIN IN RIGHT KNEE   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, PAIN IN RIGHT KNEE, OTHER CHRONIC PAIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL     | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL, COMPLEX TEAR MED MENISCUS CURR LT KNEE INIT ENC      | PREVENTIVE MEDICINE                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, TEAR ARTICULAR CARTILAGE LT KNEE CURR SUBSQT ENC   | PREVENTIVE MEDICINE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, Unknown  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |



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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PAIN IN LEFT KNEE, Unknown   | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, UNS INJURY LT LOWER LEG INITIAL ENCOUNTER   | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, UNS TEAR UNS MENISCUS CURR INJ LT KNEE INIT ENC   | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE   | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT LEG, PAIN IN RIGHT LEG  | INTERNAL MEDICINE  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT LEG, STRAIN OTH MUSC TEND POST GROUP LOW UNS LEG INIT, STRAIN OTH MUSCLES TENDON LOW LEG LT LEG INITIAL   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT LOWER LEG   | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT LOWER LEG, OTHER JUVENILE ARTHRITIS UNSPECIFIED SITE  | RHEUMATOLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT LOWER LEG, PAIN IN RIGHT LOWER LEG  | RHEUMATOLOGY       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER  | EMERGENCY MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER  | FAMILY PRACTICE    | 1                  | 7                | 7               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER  | INTERNAL MEDICINE  | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER  | Nephrology         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER  | ORTHOPEDIC SURGERY | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER  | SPORTS MEDICINE    | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER  | SURGERY-ORTHOPEDIC | 13                 | 7                | 7               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER, OTHER CHRONIC PAIN  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER, OTHER CHRONIC PAIN  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER, OTHER CHRONIC PAIN, UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER, OTHER SHOULDER LESIONS LEFT SHOULDER, OTHER CHRONIC PAIN, ADHESIVE CAPSULITIS OF LEFT SHOULDER, ANTERIOR SUBLUXATION LT HUMERUS INITIAL ENCNR | SPORTS MEDICINE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER, PAIN IN RIGHT SHOULDER  | ORTHOPEDIC SURGERY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER, PAIN IN RIGHT SHOULDER  | SURGERY-ORTHOPEDIC | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT SHOULDER, UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | SURGERY-ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PAIN IN LEFT THIGH, PAIN IN LEFT LEG, STRESS FRACTURE LT FEMUR INITIAL ENC FRACTURE  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT TOES  | RHEUMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT UPPER ARM   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT WRIST   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT WRIST   | SURGERY- ORTHOPEDIC       | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN LEFT WRIST, UNS FX LOWER LT RADIUS INITIAL ENC CLOS FRACTURE   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE  | FAMILY PRACTICE           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE  | INTERNAL MEDICINE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE  | PODIATRY                  | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE  | SURGERY- ORTHOPEDIC       | 6                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE, OTHER SPECIFIED DISORDERS OF BONE ANKLE AND FOOT  | GENERAL PRACTICE          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE, PAIN IN RIGHT FOOT  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE, PATHOLOGICAL FX RT ANKLE INITIAL ENC FRACTURE, SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE, SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ANKLE, SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC  | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ARM  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ELBOW  | ANESTHESIOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ELBOW  | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ELBOW  | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ELBOW  | ORTHOPEDIC SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ELBOW  | PHYSICIAN ASSISTANT       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ELBOW  | SPORTS MEDICINE           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ELBOW  | SURGERY- ORTHOPEDIC       | 7                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT ELBOW, ULNAR COLLATERAL LIG SPRAIN RT ELBOW INITIAL, UNSPECIFIED DISLOC RT ULNOHUMERAL JOINT INITIAL, DSPL FX MEDIAL EPICONDYLE RT HUMERUS SEQUELA | SPORTS MEDICINE           | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT FINGERS  | SURGERY-HAND              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT FOOT   | PODIATRY                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HAND   | SURGERY- ORTHOPEDIC       | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PAIN IN RIGHT HIP  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HIP  | INTERNAL MEDICINE                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HIP  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HIP  | ORTHOPEDIC SURGERY                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HIP  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HIP  | SURGERY- ORTHOPEDIC                | 2                  | 5                | 5               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HIP, OTHER BURSTITIS OF HIP RIGHT HIP                                      | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HIP, OTHER CHRONIC PAIN  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT HIP, TROCHANTERIC BURSTITIS RIGHT HIP                                      | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | CHIROPRACTOR                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | FAMILY PRACTICE                    | 3                  | 5                | 5               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | INTERNAL MEDICINE                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | NURSE PRACTITIONER                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | ORTHOPEDIC SURGERY                 | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | PHYSICIAN ASSISTANT                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | SPORTS MEDICINE                    | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | SURGERY- ORTHOPEDIC                | 24                 | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE   | URGENT CARE                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE  | SPORTS MEDICINE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE, OTH TEAR LAT MENISC CURRNT INJ RT KNEE INIT ENC | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, EFFUSION RIGHT KNEE, OTHER CHRONIC PAIN                              | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC                      | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, OTHER CHRONIC PAIN   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, OTHER CHRONIC PAIN   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, OTHER CHRONIC PAIN   | SURGERY- ORTHOPEDIC                | 4                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PAIN IN RIGHT KNEE, OTHER INSTABILITY RIGHT KNEE                                       | SPORTS MEDICINE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, SPRAIN UNSPECIFIED SITE RT KNEE INITIAL ENC NTR                    | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE                       | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, Unknown  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE                     | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT KNEE, UNSPECIFIED SUBLUXATION RT PATELLA INITIAL ENC                     | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT LEG  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT LEG  | PEDIATRICS          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT LOWER LEG  | FAMILY PRACTICE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT LOWER LEG  | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER   | FAMILY PRACTICE     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER   | GASTROENTEROLOGY    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER   | INTERNAL MEDICINE   |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER   | NURSE PRACTITIONER  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER   | ORTHOPEDIC SURGERY  | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER   | PREVENTIVE MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER   | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER   | SURGERY- ORTHOPEDIC | 12                 | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, ADHESIVE CAPSULITIS OF RIGHT SHOULDER                          | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, ADHESIVE CAPSULITIS OF RIGHT SHOULDER                          | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, BICIPITAL TENDINITIS RIGHT SHOULDER                            | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, CALCIFIC TENDINITIS OF LEFT SHOULDER                           | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, OTHER CHRONIC PAIN   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, OTHER CHRONIC PAIN   | PEDIATRICS          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, PAIN IN LEFT ELBOW   | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, PAIN IN RIGHT ARM, UNS FX RT FOREARM INITIAL ENC CLOS FRACTURE | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, STIFFNESS OF RIGHT SHOULDER NEC                                | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description   | Provider Specialty        | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PAIN IN RIGHT SHOULDER, STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, UNS DISORDER SYNOVIUM & TENDON RT SHOULDER   | ORTHOPEDIC SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, UNS DISORDER SYNOVIUM & TENDON RT SHOULDER, UNS INJURY RT SHOULDER UPPER ARM INITIAL ENCNR   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | INTERNAL MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT SHOULDER, UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT THIGH  | SURGERY-GENERAL           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT WRIST  | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT WRIST  | HAND SURGERY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT WRIST  | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT WRIST  | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT WRIST  | Pediatrics                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN RIGHT WRIST  | SURGERY-ORTHOPEDIC        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE   | ANESTHESIOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE   | NEUROLOGY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE   | NURSE PRACTITIONER        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE   | PAIN MANAGEMENT           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE, CERVICALGIA  | NEUROSURGERY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE, CERVICALGIA  | SURGERY-NEUROLOGY         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE, CERVICOBRACHIAL SYNDROME, CERVICALGIA, RADICULOPATHY CERVICOTHORACIC REGION, POSTURAL KYPHOSIS THORACIC REGION, SEGMENTAL & SOMATIC DYSFUNCTION CERVICAL REGION, SEGMENTAL AND SOMATIC DYSFUNCTION OF HEAD REGION, Unknown | CHIROPRACTOR              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE, OTHER CHRONIC PAIN   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE, PERSONAL HISTORY OTHER MALIGNANT NEOPLASM KIDNEY, PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN   | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN THORACIC SPINE, RADICULOPATHY THORACIC REGION, CYST OF KIDNEY ACQUIRED   | ANESTHESIOLOGY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED ANKLE  | SURGERY-GENERAL           |                    | 2                | 2               |  |                          |                        |                      |                 |

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|----------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PAIN IN UNSPECIFIED ANKLE, PAIN IN LEFT ANKLE, PAIN IN RIGHT ANKLE  | GENERAL PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED HIP   | CHIROPRACTOR            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED HIP   | FAMILY PRACTICE         |                    | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED HIP   | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED KNEE  | SURGERY- ORTHOPEDIC     | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED KNEE, UNSPECIFIED SUPERFICIAL INJURY LT KNEE INIT ENC   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED SHOULDER  | FAMILY PRACTICE         |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED SHOULDER  | SPORTS MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN IN UNSPECIFIED SHOULDER  | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN UNSPECIFIED  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAIN UNSPECIFIED  | PODIATRY                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PAPILLEDEMA WITH INCREASED INTRACRANIAL PRESSURE  | OPHTHALMOLOGY           | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PAPILLOMAVIRUS CAUSE OF DZ CLASSIFIED ELSEWHERE, MALIGNANT NEOPLASM OF HEAD FACE AND NECK                           | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PARESTHESIA OF SKIN   | INTERNAL MEDICINE       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | PARESTHESIA OF SKIN   | NEUROLOGY               | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PARESTHESIA OF SKIN   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PARESTHESIA OF SKIN, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS, CHRONIC MIGRAINE W/O AURA NOT INTRACT W/O SM | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PARESTHESIA OF SKIN, MULTIPLE SCLEROSIS   | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PARESTHESIA OF SKIN, OTHER SPECIFIED SOFT TISSUE DISORDERS, PAIN IN UNSPECIFIED LIMB                                | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PARESTHESIA OF SKIN, PAIN IN RIGHT WRIST, PAIN IN RIGHT HAND  | PEDIATRICS              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PARKINSONS DISEASE  | NEUROLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PATELLOFEMORAL DISORDERS RIGHT KNEE   | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PATHOLOGICAL FX LT FINGER INITIAL ENC FRACTURE  | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PECTUS EXCAVATUM  | SURGERY-PEDIATRIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PELVIC AND PERINEAL PAIN  | FAMILY PRACTICE         | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | PELVIC AND PERINEAL PAIN  | GENERAL SURGERY         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PELVIC AND PERINEAL PAIN  | OBSTETRICS & GYNECOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PELVIC AND PERINEAL PAIN, HYDROCELE UNSPECIFIED   | UROLOGY                 |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PELVIC AND PERINEAL PAIN, MALIGNANT NEOPLASM PELVIC BONES SACRUM & COCCYX                 | SURGERY-ORTHOPEDIC      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PELVIC AND PERINEAL PAIN, POLYCYSTIC OVARIAN SYNDROME                                     | OBSTETRICS & GYNECOLOGY | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PERIPHERAL TEAR MED MENISC CURR RT KNEE INIT ENC  | PREVENTIVE MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERIPHERAL TEAR MED MENISC CURR RT KNEE SUBSQ   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERIPHERAL VASCULAR DISEASE UNSPECIFIED   | CARDIOLOGIST            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PERITONEAL ABSCESS  | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERIUMBILICAL PAIN  | GASTROENTEROLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERIUMBILICAL PAIN  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERIUMBILICAL PAIN, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS                         | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PERONEAL TENDINITIS RIGHT LEG   | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERONEAL TENDINITIS RIGHT LEG   | SURGERY-ORTHOPEDIC      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSISTENT HYPERPLASIA OF THYMUS  | SURGERY-THORACIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF LIVER   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF NICOTINE DEPENDENCE   | FAMILY PRACTICE         | 10                 | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF NICOTINE DEPENDENCE   | GERIATRICS              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF NICOTINE DEPENDENCE   | INTERNAL MEDICINE       | 5                  | 7                | 7               |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF NICOTINE DEPENDENCE   | PULMONARY DISEASES      | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF NICOTINE DEPENDENCE   | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF NICOTINE DEPENDENCE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | FAMILY PRACTICE         | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF NICOTINE DEPENDENCE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF NICOTINE DEPENDENCE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | PULMONARY DISEASES      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF PULMONARY EMBOLISM  | CARDIOVASCULAR DISEASE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF PULMONARY EMBOLISM  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF URINARY CALCULI   | UROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OF URINARY TRACT INFECTIONS  | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY OTH DISEASES NS & SENSE ORGANS   | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST                                     | GENERAL SURGERY         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST                                     | SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST                                     | SURGERY-GENERAL         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HX OTH DZ MUSCULOSKEL SYS&amp;CONNECTV TISS                               | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HX OTH MALIG NEOPLASM BRONCHUS &amp; LUNG                                 | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HX OTH MALIG NEOPLASM LARGE INTESTINE                                     | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HX TIA &amp; CEREB INFARCT NO RESID DEFICIT                               | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HX TIA &amp; CEREB INFARCT NO RESID DEFICIT                               | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PERSONAL HX TIA &amp; CEREB INFARCT NO RESID DEFICIT                               | UROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PLACENTA ACCRETA SECOND TRIMESTER, MALFORMATION PLACENTA UNS UNSPECIFIED TRIMESTER | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PLACENTA PERCRETA THIRD TRIMESTER  | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PLANTAR FASCIAL FIBROMATOSIS   | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PLANTAR FASCIAL FIBROMATOSIS   | SURGERY- ORTHOPEDIC     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PLANTAR FASCIAL FIBROMATOSIS, PAIN IN LEFT FOOT                                    | PODIATRY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PLEURAL EFFUSION NOT ELSEWHERE CLASSIFIED  | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PLEURODYNIA  | PAIN MANAGEMENT         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | Pneumonia due to coronavirus disease 2019  | Family Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PNEUMONIA DUE TO OTHER SPECIFIED BACTERIA  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PNEUMONIA UNSPECIFIED ORGANISM   | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PNEUMONIA UNSPECIFIED ORGANISM   | PULMONARY DISEASES      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PNEUMONITIS D/T INHALATION OTH SOLIDS &amp; LIQUIDS                                | PULMONARY DISEASES      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | POLYCYSTIC KIDNEY ADULT TYPE   | NEPHROLOGY              | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | POLYNEUROPATHY UNSPECIFIED   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POLYP OF CERVIX UTERI, LEIOMYOMA OF UTERUS UNSPECIFIED                             | GYNECOLOGY ONCOLOGY     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POLYP OF CORPUS UTERI, Unknown   | OBSTETRICS & GYNECOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POLYP OF NASAL CAVITY  | OTOLARYNGOLOGIST (ENT)  | 2                  |                  |                 |  |                          |                        |                      |                 |



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|----------------------------|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PORTAL HYPERTENSION, ALCOHOLIC CIRRHOSIS OF LIVER WITHOUT ASCITES                             | RADIOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POSTCONCUSSIONAL SYNDROME   | NEUROLOGY              | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | POSTERIOR TIBIAL TENDINITIS LEFT LEG  | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POSTLAMINECTOMY SYNDROME NEC  | ANESTHESIOLOGY         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | POSTLAMINECTOMY SYNDROME NEC  | PAIN MANAGEMENT        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | POSTNASAL DRIP  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | POSTNASAL DRIP  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POSTNASAL DRIP, MOUTH BREATHING, DEVIATED NASAL SEPTUM, HYPERTROPHY OF NASAL TURBINATES       | OTOLARYNGOLOGIST (ENT) |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | POSTNASAL DRIP, NASAL CONGESTION, OTHER CHRONIC POSTPROCEDURAL PAIN, Unknown                  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POSTNASAL DRIP, NASAL CONGESTION, Unknown   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POST-TRAUMATIC OSTEOARTHRITIS LEFT ANKLE & FOOT   | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | POST-TRAUMATIC STRESS DISORDER UNSPECIFIED  | SURGERY-GENERAL        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PRESENCE OF LEFT ARTIFICIAL HIP JOINT   | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PRESENCE OF PROSTHETIC HEART VALVE  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PRETERM NEWBORN GESTATIONAL AGE 32 CMPL WEEKS, OTH NEONATAL ASPIRATION W/RESPIRATORY SYMPTOMS | PEDIATRICS             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PRETERM NEWBORN GESTATIONAL AGE 35 CMPL WEEKS   | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PRIMARY HYPERPARATHYROIDISM   | SURGERY-HEAD AND NECK  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PRIMARY HYPERPARATHYROIDISM   | SURGERY-THORACIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PRIMARY OSTEOARTHRITIS LEFT SHOULDER  | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PRIMARY OSTEOARTHRITIS LEFT SHOULDER, ENCOUNTER SCREENING MAMMO MALIG NEOPLASM BREAST,        | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PRIMARY OSTEOARTHRITIS RIGHT WRIST  | SURGERY- ORTHOPEDIC    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PRIMARY OSTEOARTHRITIS UNSPECIFIED SHOULDER   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PRIMARY RESPIRATORY TUBERCULOSIS  | HEPATOLOGY             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PRIMARY THUNDERCLAP HEADACHE  | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PSORIASIS UNSPECIFIED   | RHEUMATOLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PULMONARY BLASTOMYCOSIS UNSPECIFIED   | PULMONARY DISEASES     | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description                                      | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | PULMONARY FIBROSIS UNSPECIFIED                                  | PULMONARY DISEASES                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | PULMONARY FIBROSIS UNSPECIFIED                                  | Surgery, Thoracic                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PULMONARY MYCOBACTERIAL INFECTION                               | PEDIATRIC PULMONOLOGIST            | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | Pulsatile tinnitus, right ear                                   | OTOLARYNGOLOGIST (ENT)             | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | PYOTHORAX WITHOUT FISTULA                                       | PULMONARY DISEASES                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | QUADRIPLEGIA UNSPECIFIED  | CARDIOLOGIST                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADIAL STYLOID TENOSYNOVITIS DE QUERVAIN                        | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | ANESTHESIOLOGY                     | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | CHIROPRACTOR                       | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | FAMILY PRACTICE                    | 2                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | INTERNAL MEDICINE                  | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | NEUROLOGY                          | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | NEUROSURGERY                       | 4                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | ORTHOPEDIC SURGERY                 |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | PAIN MANAGEMENT                    | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | PCP/Pediatrician                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | PHYSICAL MEDICINE & REHABILITATION | 4                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | PHYSICIAN ASSISTANT                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | Surgery, Thoracic                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION                                   | SURGERY- ORTHOPEDIC                | 4                  | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, CERVICALGIA                      | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, CERVICALGIA                      | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, CERVICALGIA                      | PAIN MANAGEMENT                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, CERVICALGIA                      | SURGERY- NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, CERVICALGIA                      | SURGERY- ORTHOPEDIC                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, CERVICALGIA, PARESTHESIA OF SKIN | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN              | FAMILY PRACTICE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN              | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, POSTLAMINECTOMY SYNDROME NEC     | SURGERY- NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, Unknown  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, Unknown, Unknown                                   | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICAL REGION, UNS DSPL FX 6TH CERV VERT INITIAL ENC CLOS FX      | ORTHOPEDIC SURGERY                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY CERVICOTHORACIC REGION  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | ANESTHESIOLOGY                     | 3                  | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | CHIROPRACTOR                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | FAMILY PRACTICE                    | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | INTERNAL MEDICINE                  | 3                  | 4                | 4               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | NEUROLOGY                          |                    | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | NEUROSURGERY                       | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | ORTHOPEDIC SURGERY                 | 2                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | PAIN MANAGEMENT                    | 6                  | 8                | 8               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | PHYSICAL MEDICINE & REHABILITATION | 5                  | 6                | 6               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | SPORTS MEDICINE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | SURGERY-NEUROLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION   | SURGERY-ORTHOPEDIC                 | 15                 | 18               | 18              |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, ARTHRODESIS STATUS                                   | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, LUMBAGO WITH SCIATICA RIGHT SIDE, OTHER CHRONIC PAIN | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, OTH SYMPTOMS & SIGNS INVOLV MUSCULOSKELETAL SYS      | SPORTS MEDICINE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, OTHER SPECIFIED DISEASES OF SPINAL CORD              | NEUROSURGERY                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, PAIN IN RIGHT HIP                                    | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, PAIN IN THORACIC SPINE                               | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, PARESTHESIA OF SKIN                                  | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, RADICULOPATHY CERVICAL REGION                        | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, RADICULOPATHY THORACIC REGION                        | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, SPONDYLOLISTHESIS LUMBAR REGION  | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, SPONDYLOLISTHESIS LUMBAR REGION  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN                                       | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBAR REGION, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN                                       | SURGERY- ORTHOPEDIC                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBOSACRAL REGION  | ANESTHESIOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBOSACRAL REGION  | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBOSACRAL REGION  | PHYSICAL MEDICINE & REHABILITATION | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBOSACRAL REGION  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY LUMBOSACRAL REGION, PARESTHESIA OF SKIN   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY SITE UNSPECIFIED  | NEUROSURGERY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY SITE UNSPECIFIED, PARESTHESIA OF SKIN   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY SITE UNSPECIFIED, RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN, NONTRAUMATIC HEMATOMA OF SOFT TISSUE | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY SITE UNSPECIFIED, RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN, Unknown                              | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY THORACIC REGION   | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY THORACIC REGION   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY THORACIC REGION   | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY THORACIC REGION   | PAIN MANAGEMENT                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY THORACIC REGION   | SURGERY- NEUROLOGY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RADICULOPATHY THORACOLUMBAR REGION  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | REBOUND ABDOMINAL TENDERNESS UNSPECIFIED SITE, MALE ERECTILE DYSFUNCTION UNSPECIFIED                                | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RECURRENT DISLOCATION OF PATELLA LEFT KNEE  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RECURRENT DISLOCATION UNSPECIFIED SHOULDER  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | REPEATED FALLS  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RETENTION OF URINE UNSPECIFIED  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RETROBULBAR NEURITIS RIGHT EYE  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RHEUMATIC MITRAL VALVE DISEASE UNSPECIFIED  | SURGERY- CARDIOVASCULAR            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | FAMILY PRACTICE                    | 2                  | 4                | 4               |  |                          |                        |                      |                 |

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|----------------------------|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | GASTROENTEROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | INTERNAL MEDICINE  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | NEUROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | Pediatrics         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | Rheumatology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | SURGERY            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | SURGERY-GENERAL    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN   | UROLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN, OTHER CHRONIC PAIN                                       | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN, PAIN IN RIGHT HIP, GLUTEAL TENDINITIS RIGHT HIP, Unknown | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN, PAIN IN RIGHT HIP, OTHER CHRONIC PAIN, PAIN IN RIGHT LEG | SPORTS MEDICINE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT LOWER QUADRANT PAIN, UNSPECIFIED ACUTE APPENDICITIS                           | EMERGENCY MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT UPPER QUADRANT PAIN   | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT UPPER QUADRANT PAIN   | GASTROENTEROLOGY   | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT UPPER QUADRANT PAIN   | GENERAL SURGERY    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT UPPER QUADRANT PAIN, BARRETTS ESOPHAGUS WITHOUT DYSPLASIA                     | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RIGHT UPPER QUADRANT PAIN, RIGHT LOWER QUADRANT PAIN, CYST OF KIDNEY ACQUIRED       | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | RT LOWER QUADRANT ABDOMINAL SWELLING MASS & LUMP                                    | INTERNAL MEDICINE  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | RUQ ABDOMINAL SWELLING MASS & LUMP  | GENERAL PRACTICE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SACROCOCCYGEAL DISORDERS NEC  | FAMILY PRACTICE    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | SACROCOCCYGEAL DISORDERS NEC, UNSPECIFIED INJURY LOWER BACK INITIAL ENCOUNTER       | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA LEFT SIDE  | FAMILY PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA LEFT SIDE  | INTERNAL MEDICINE  |                    | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA LEFT SIDE, LOW BACK PAIN   | FAMILY PRACTICE    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA LEFT SIDE, LOW BACK PAIN   | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA LEFT SIDE, RADICULOPATHY LUMBAR REGION                                     | FAMILY PRACTICE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA LEFT SIDE, SCIATICA RIGHT SIDE, RADICULOPATHY LUMBAR REGION                | NEUROLOGY          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA RIGHT SIDE   | FAMILY PRACTICE    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA RIGHT SIDE   | INTERNAL MEDICINE  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA RIGHT SIDE, OTHER SPONDYLOSIS W/MYELOPATHY CERVICAL REGION                 | INTERNAL MEDICINE  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SCIATICA RIGHT SIDE, SPONDYLOLISTHESIS LUMBOSACRAL REGION                           | CHIROPRACTOR       |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | SCIATICA UNSPECIFIED SIDE   | SURGERY-ORTHOPEDIC      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD  | HEMATOLOGY AND ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD  | RADIOLOGY               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, MALIGNANT NEOPLASM UNS SITE RIGHT FEMALE BREAST, ENC F/U EXAM AFTR CMPL TX OTH THAN MALIG NEOPLSM   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIG NEOPLASM UPPER-OUTER QUAD RT FEMALE BREAST, ESTROGEN RECEPTOR POSITIVE STATUS   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OF PROSTATE  | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM OVERLAP SITE LT FEMALE BREAST  | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | HEMATOLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | ONCOLOGY                | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY  | HEMATOLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BONE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST, HISTORY OF FALLING   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BONE, SECONDARY MALIGNANT NEOPLASM OF BRAIN, HYPHEMA RIGHT EYE, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG, SECONDARY MALIG NEOPLASM LIVER & INTRAHEPATIC BD | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BRAIN   | RADIATION ONCOLOGY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF BRAIN, MALIGNANT NEOPLASM UNS PART UNS BRONCHUS/LUNG  | ONCOLOGY                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF UNSPECIFIED LUNG  | Gynecologic Oncology    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OF UNSPECIFIED SITE, MALIGNANT NEOPLASM OF VULVA UNSPECIFIED   | ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | SECONDARY MALIGNANT NEOPLASM OTH SPECIFIED SITES, MALIG NEOPLASM UPPER-OUTER QUAD LT FEMALE BREAST   | HEMATOLOGY AND ONCOLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SENSORINEURAL HEARING LOSS BILATERAL   | OTOLARYNGOLOGIST (ENT)    | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SENSORINEURAL HEARING LOSS BILATERAL, UNS PERFORATION OF TYMPANIC MEMBRANE LT EAR  | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Sensorineural hearing loss, unilateral, right ear, with restricted hearing on the contralateral side                                       | Surgery, General          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SENSORINURL HL UNI LT EAR UNRESTRCT CNTRLAT SIDE   | OTOLARYNGOLOGIST (ENT)    | 5                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SENSORINURL HL UNI LT EAR UNRESTRCT CNTRLAT SIDE   | Surgery, General          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SENSORINURL HL UNI RT EAR UNRESTRCT CNTRLAT SIDE, TINNITUS RIGHT EAR   | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SHORTNESS OF BREATH  | CARDIOVASCULAR DISEASE    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SHORTNESS OF BREATH  | EMERGENCY MEDICINE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SHORTNESS OF BREATH  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SHORTNESS OF BREATH  | INTERNAL MEDICINE         | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SHORTNESS OF BREATH  | PULMONARY DISEASES        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SHORTNESS OF BREATH, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS   | INTERNAL MEDICINE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SHORTNESS OF BREATH, CONTACT&EXPOSURE OTH HAZARDOUS NONMEDICINAL CHEM  | PULMONARY DISEASES        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SHORTNESS OF BREATH, OTH PULMONARY EMBOLISM W/O ACUTE COR PULMONALE  | PULMONARY DISEASES        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SITUS INVERSUS, UMBILICAL HERNIA W/OBSTRUCTION WITHOUT GANGRENE  | GENERAL SURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SLURRED SPEECH   | FAMILY PRACTICE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SNORING, SHORTNESS OF BREATH, CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS, OBESITY UNSPECIFIED, TYPE 2 DIABETES MELLITUS W/UNS COMPLICATIONS | PULMONARY DISEASES        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SOFT TISSUE DISORDER UNSPECIFIED, Unknown  | PODIATRY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY BONE CYST LEFT PELVIS   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY CYST OF LEFT BREAST   | ONCOLOGY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | FAMILY PRACTICE           | 15                 | 8                | 8               |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | GASTROENTEROLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | GERIATRICS                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | HEMATOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | SOLITARY PULMONARY NODULE  | HEMATOLOGY AND ONCOLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | INTERNAL MEDICINE                      | 16                 | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | NURSE PRACTITIONER                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | PULMONARY DISEASES                     | 7                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | SURGERY-HEAD AND NECK                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | SURGERY-THORACIC                       | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE  | SURGERY-VASCULAR                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, ANEMIA UNSPECIFIED, MALIG NEOPLASM CENTRAL PORTION RT FEMALE BREAST                             | HEMATOLOGY                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, COUGH, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED  | PULMONARY DISEASES                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, COUGH, UNSPECIFIED ABNORMAL FINDINGS IN URINE, Unknown  | FAMILY PRACTICE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM OF PROSTATE  | FAMILY PRACTICE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, MALIGNANT NEOPLASM UNS SITE UNS FEMALE BREAST   | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, NICOTINE DEPENDENCE CIGARETTES UNCOMPLICATED  | FAMILY PRACTICE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | INTERNAL MEDICINE                      | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, NICOTINE DEPENDENCE UNSPECIFIED UNCOMPLICATED   | NURSE PRACTITIONER                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, OTH TYPES NON-HODGKIN LYMPHOMA INTRA-ABD NODES  | ONCOLOGY                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD  | FAMILY PRACTICE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SOLITARY PULMONARY NODULE, OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD, SHORTNESS OF BREATH, ATELECTASIS, TOBACCO USE | PULMONARY DISEASES                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION  | INTERNAL MEDICINE                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION  | NEUROSURGERY                           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION  | Rheumatology                           | 1                  |                  |                 |  |                          |                        |                      |                 |



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| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION   | SURGERY-NEUROLOGY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION, CERVICALGIA  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION, CERVICALGIA  | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION, DEFORMING DORSOPATHY UNSPECIFIED, OTHER FORMS OF SCOLIOSIS SITE UNSPECIFIED                                      | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS CERVICAL REGION, MULTIPLE SCLEROSIS   | SURGERY-NEUROLOGY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS LUMBOSACRAL REGION  | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPINAL STENOSIS LUMBOSACRAL REGION, OTH INTERVERTEBRAL DISC DISPLACEMENT LUMBAR RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN             | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPLENOMEGALY NOT ELSEWHERE CLASSIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PERSONAL HISTORY OF NICOTINE DEPENDENCE                   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPLENOMEGALY NOT ELSEWHERE CLASSIFIED, CYST OF SPLEEN   | INTERNAL MEDICINE   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLISTHESIS LUMBAR REGION   | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLISTHESIS LUMBAR REGION   | NEUROSURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLISTHESIS LUMBAR REGION   | ORTHOPEDIC SURGERY  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLISTHESIS LUMBAR REGION   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLISTHESIS LUMBAR REGION, SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION, UNSTABLE BURST FX 1ST LUMB VERT INIT ENC CLOS FX | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLISTHESIS LUMBOSACRAL REGION  | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLYSIS CERVICAL REGION   | SURGERY-ORTHOPEDIC  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLYSIS LUMBAR REGION   | PREVENTIVE MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOLYSIS SITE UNSPECIFIED  | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | PAIN MANAGEMENT     | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN  | SURGERY-ORTHOPEDIC  |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, RADICULOPATHY CERVICAL REGION, CERVICALGIA, OTHER CHRONIC PAIN, NEURALGIA AND NEURITIS UNSPECIFIED  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, SPINAL STENOSIS CERVICAL REGION, CERVICALGIA, POSTURAL KYPHOSIS CERVICOTHORACIC REGION  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY CERV RGN, Unknown   | PAIN MANAGEMENT                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | ANESTHESIOLOGY                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN  | PAIN MANAGEMENT                    | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY LUMB RGN, OTHER CHRONIC PAIN, Unknown, Unknown  | SURGERY-NEUROLOGY                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULOPATHY THOR RGN  | SURGERY-ORTHOPEDIC                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN   | PHYSICAL MEDICINE & REHABILITATION |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPONDYLOSIS W/O MYELOPATH/RADICULPATHY LS RGN   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONTANEOUS ECCHYMOSES  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPONTANEOUS RUPTURE FLEXOR TENDONS LT ANKLE FOOT  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC  | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, BUCKET-HANDLE TEAR MED MENISC CURR LT KNEE INIT   | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQ ENC  | SURGERY-ORTHOPEDIC                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQ ENC, SPRAIN ANT CRUCIATE LIGAMENT LT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ LT KNEE INIT ENC, ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE | SURGERY-ORTHOPEDIC                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT LT KNEE SUBSQ ENC, SPRAIN MED COLLATERAL LIGAMENT LT KNEE SUBSQ  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC  | SURGERY-ORTHOPEDIC                 | 2                  |                  |                 |  |                          |                        |                      |                 |

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| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE        | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT RT KNEE INITIAL ENC, OTH TEAR MED MENISCUS CURR INJ RT KNEE INIT ENC | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN ANT CRUCIATE LIGAMENT UNS KNEE INIT ENC  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN CALCANEOFIBULAR LIGAMENT LT ANKLE SEQUELA  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN DELTOID LIGAMENT RT ANKLE INITIAL ENC NTR  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN LAT COLLATERAL LIGAMENT RT KNEE INITIAL  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN LAT COLLATERAL LIGAMENT UNS KNEE INITIAL   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN LT ROTATOR CUFF CAPSULE INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN MED COLLATERAL LIGAMENT LT KNEE INITIAL  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN MED COLLATERAL LIGAMENT RT KNEE SUBSQT   | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN METACARPOPHALANGEAL JOINT RT THUMB INIT  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN METACARPOPHALANGEAL JOINT RT THUMB INIT  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN OF OTHER LIGAMENT OF RIGHT ANKLE SEQUELA   | SURGERY-PODIATRIST                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN OTHER SPEC PARTS RIGHT KNEE INITIAL ENC  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN OTHER SPEC PARTS RIGHT KNEE INITIAL ENC  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN SC JOINT LIGAMENT INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN SUP TIBIOFIBULAR JNT LIG LT KNEE SUBSQT  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN TIBIOFIBULAR LIGAMENT LT ANKLE INIT ENC  | PODIATRY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN UNS CRUCIATE LIGAMENT UNS KNEE INIT ENC  | ORTHOPEDIC SURGERY                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN UNS LIGAMENT LEFT ANKLE INITIAL ENCOUNTER  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN UNSPEC LIGAMENT ROGHT ANKLE INITIAL ENC  | PEDIATRICS                         |                    | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | SPRAIN UNSPECIFIED SITE LT KNEE INITIAL ENCNR   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN UNSPECIFIED SITE RT KNEE INITIAL ENCNR   | SPORTS MEDICINE           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SPRAIN UNSPECIFIED SITE RT KNEE INITIAL ENCNR   | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SQUAMOUS CELL CARCINOMA SKIN OTHER PARTS OF FACE  | OTOLARYNGOLOGIST (ENT)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STAPHYLOCOCCAL ARTHRITIS LEFT ANKLE AND FOOT  | INFECTIOUS DISEASES       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STIFFNESS OF LEFT KNEE NOT ELSEWHERE CLASSIFIED   | PHYSICIAN ASSISTANT       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN LEFT ACHILLES TENDON SUBSEQUENT ENCOUNTER  | PODIATRY                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSC & TEND ROTATOR CUFF LT SHLDR SUB ENC  | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSC FASC TEND OTH PART BICPS LA INIT ENC  | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSC TEND PERONEAL GROUP LOW LT LEG INIT, OTH FRACTURE UNS LOWER LEG INIT ENC CLOS FX      | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSC TEND PERONEAL GROUP LOW RT LEG INIT   | PODIATRY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC   | SURGERY- ORTHOPEDIC       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSC TEND ROTATOR CUFF LT SHLDR INIT ENC, STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC | SURGERY- ORTHOPEDIC       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSCLE FASC TEND POST THIGH RT INIT ENC  | ORTHOPEDIC - NON SURGICAL | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSCLE FASC TEND POST THIGH RT INIT ENC  | SURGERY- ORTHOPEDIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSCLE FASC TEND POST THIGH UNS INIT ENC   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSCLE FASCIA & TENDON LOW BACK SUBSQT   | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSCLE FASCIA TENDON RT HIP INITIAL ENC  | SURGERY- ORTHOPEDIC       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN MUSCLE FASCIA TENDON RT HIP SUBSQT ENC   | PEDIATRIC ORTHOPEDIST     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN OTH MUSC TEND ANK FT LEVL RT INITIAL ENC   | PODIATRY                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN OTH MUSC TEND POST GROUP LOW LT LEG INIT   | PHYSICIAN ASSISTANT       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN RT QUAD MUSCLE FASCIA TENDON INITIAL ENC   | ORTHOPEDIC SURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN UNS MUSCLE FASC TEND THIGH RT INITIAL ENC  | FAMILY PRACTICE           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRAIN UNS MUSCLE TENDON LOW LEG LT LEG INIT ENC  | ORTHOPEDIC SURGERY        |                    | 1                | 1               |  |                          |                        |                      |                 |

Prior Authorization Statistics - IL - CY 2021

| Procedure Code Description | Diagnosis Code Description  | Provider Specialty                 | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|------------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | STRESS FRACTURE LT FEMUR INITIAL ENC FRACTURE   | SURGERY- ORTHOPEDIC                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRESS FRACTURE LT FOOT INITIAL ENC FOR FRACTURE  | PODIATRY                           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRESS FRACTURE RT FOOT INITIAL ENC FOR FRACTURE  | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRESS FX RT FEMUR SUBSEQUENT ENC FX RTN HEAL   | SPORTS MEDICINE                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | STRN MUSC FASC TEND LNG HD BICPS RT ARM INIT ENC, IMPINGEMENT SYNDROME OF RIGHT SHOULDER  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, UNS INJURY RT SHOULDER UPPER ARM INITIAL ENC NTR  | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | STUPOR, ORTHOSTATIC HYPOTENSION, UNS DISORDER VESTIBULAR FUNCTION RIGHT EAR   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SUDDEN IDIOPATHIC HEARING LOSS RIGHT EAR  | OTOLARYNGOLOGIST (ENT)             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT   | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE  | INTERNAL MEDICINE                  | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, OTHER CHRONIC PAIN, Unknown  | NEUROLOGY                          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, TENSION-TYPE HEADACHE UNS NOT INTRACTABLE  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE, DIZZINESS AND GIDDINESS, UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER, TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE, ESSENTIAL PRIMARY HYPERTENSION  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS  | NEUROLOGY                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SYNCOPE AND COLLAPSE, PERSONAL HX TIA & CERE B INFARCT NO RESID DEFICIT   | INTERNAL MEDICINE                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SYNOVIAL CYST POPLITEAL SPACE BAKER UNS KNEE  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | SYNOVITIS AND TENOSYNOVITIS UNSPECIFIED   | SURGERY- ORTHOPEDIC                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | SYRINGOMYELIA AND SYRINGOBULBIA   | NEUROLOGY                          | 2                  |                  |                 |  |                          |                        |                      |                 |

Prior Authorization Statistics - IL - CY 2021

| Procedure Code Description | Diagnosis Code Description  | Provider Specialty      | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|-------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | TARSAL TUNNEL SYNDROME LEFT LOWER LIMB, PLANTAR FASCIAL FIBROMATOSIS  | SURGERY- ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TEAR ARTICULAR CARTILAGE RT KNEE CURR INIT ENC  | ORTHOPEDIC SURGERY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE   | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE, MIGRAINE UNS NOT INTRACT W/O STATUS MIGRAINOSUS, ACQUIRED ABSENCE OF BILATERAL BREASTS & NIPPLES, PERSONAL HISTORY PRIMARY MALIG NEOPLASM BREAST | NEUROLOGY               | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | TENSION-TYPE HEADACHE UNS NOT INTRACTABLE, PRIMARY EXERTIONAL HEADACHE  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | TESTICULAR HYPOFUNCTION   | FAMILY PRACTICE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE  | CARDIOLOGIST            | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE  | CARDIOVASCULAR DISEASE  | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE  | INTERNAL MEDICINE       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE  | SURGERY- CARDIOVASCULAR | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE  | SURGERY-THORACIC        | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE, ESSENTIAL PRIMARY HYPERTENSION  | PHYSICIAN ASSISTANT     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | THORACIC AORTIC ANEURYSM WITHOUT RUPTURE, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM  | SURGERY-THORACIC        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | THORACIC AORTIC ECTASIA   | CARDIOLOGIST            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | THYROTOXICOSIS W/TMNG NO THYROTOXIC CRISIS/STORM  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TINNITUS BILATERAL  | NURSE PRACTITIONER      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | TINNITUS LEFT EAR   | FAMILY PRACTICE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TINNITUS LEFT EAR   | OTOLARYNGOLOGIST (ENT)  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TINNITUS UNSPECIFIED EAR  | FAMILY PRACTICE         |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | TINNITUS UNSPECIFIED EAR  | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TINNITUS UNSPECIFIED EAR  | OTOLARYNGOLOGIST (ENT)  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TINNITUS UNSPECIFIED EAR, OTHER PERIPHERAL VERTIGO UNSPECIFIED EAR, UNSPECIFIED SENSORINEURAL HEARING LOSS  | INTERNAL MEDICINE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TINNITUS UNSPECIFIED EAR, POSTCONCUSSIONAL SYNDROME   | NEUROLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TOBACCO USE   | FAMILY PRACTICE         | 5                  | 3                | 3               |  |                          |                        |                      |                 |
| SOCCPT                     | TOBACCO USE   | INTERNAL MEDICINE       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | TOBACCO USE   | SLEEP MEDICINE          | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description                                    | Provider Specialty              | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|---|---------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | TOBACCO USE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | NURSE PRACTITIONER              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TOBACCO USE, ENCOUNTER SCREENING MALIG NEOPLASM RESPIR ORGANS | PHYSICIAN ASSISTANT             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TRANSIENT ALTERATION OF AWARENESS                             | NEUROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED                | INTERNAL MEDICINE               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | TRANSIENT CEREBRAL ISCHEMIC ATTACK UNSPECIFIED                | NEUROLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TRAUMATIC RUPTURE RT ULNAR COLLATERAL LIG INIT                | SURGERY-HAND                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TRAUMATIC RUPTURE RT ULNAR COLLATERAL LIG INIT                | SURGERY- ORTHOPEDIC             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TRAUMATIC RUPTURE UNS ULNAR COLLATERAL LIG INIT               | ORTHOPEDIC - NON SURGICAL       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TRAUMATIC SUBDURAL HEMORRHAGE W/LOC UNS DUR INIT              | NEUROSURGERY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | TREMOR UNSPECIFIED  | FAMILY PRACTICE                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | TRIGEMINAL NEURALGIA  | INTERNAL MEDICINE               |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | TRIGEMINAL NEURALGIA  | NEUROLOGY                       | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ULCERATIVE CHRONIC PANCOLITIS W/O COMPLICATIONS               | PEDIATRICS                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ULCERATIVE CHRONIC PANCOLITIS W/RECTAL BLEEDING               | GASTROENTEROLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ULCERATIVE CHRONIC PANCOLITIS WITH UNS COMP, Unknown          | GASTROENTEROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ULCERATIVE CHRONIC RECTOSIGMOIDITIS W/O COMP                  | PEDIATRICS                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | ULCERATIVE COLITIS UNS W/UNS COMPLICATIONS                    | GASTROENTEROLOGY                | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ULNAR COLLATERAL LIG SPRAIN RT ELBOW INITIAL                  | FAMILY PRACTICE                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | ULNAR COLLATERAL LIG SPRAIN RT ELBOW INITIAL                  | SURGERY- ORTHOPEDIC             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UMBILICAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE              | Pediatrics                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNEQUAL LIMB LENGTH ACQUIRED UNS TIBIA & FIBULA               | PODIATRY                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNI OSTEOARTHRITIS RSLT HIP DYSPLASIA RT HIP                  | PREVENTIVE MEDICINE             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNI OSTEOARTHRITIS RSLT HIP DYSPLASIA RT HIP                  | SURGERY- ORTHOPEDIC             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNIFOVAL LANGERHANS-CELL HISTIOCYTOSIS                        | PEDIATRIC HEMATOLOGY - ONCOLOGY | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR               | INTERNAL MEDICINE               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR               | UROLOGY                         | 1                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description | Diagnosis Code Description                               | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | UNILAT INGUINAL HERN W/O OBST/GANGREN NOT RECUR, Unknown | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT HIP               | SURGERY- ORTHOPEDIC | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE              | ORTHOPEDIC SURGERY  | 3                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE              | RHEUMATOLOGY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNILATERAL PRIMARY OSTEOARTHRITIS LEFT KNEE              | SURGERY- ORTHOPEDIC | 7                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT HIP              | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE             | ORTHOPEDIC SURGERY  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNILATERAL PRIMARY OSTEOARTHRITIS RIGHT KNEE             | SURGERY- ORTHOPEDIC | 7                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNQUALIFIED VISUAL LOSS BOTH EYES                        | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNQUALIFIED VISUAL LOSS LT EYE NORM VIS RT EYE           | Rheumatology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ABDOMINAL HERNIA W/OBSTRUCTION W/O GANGRENE          | INTERNAL MEDICINE   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS DISORDER VESTIBULAR FUNCTION LEFT EAR                | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS FRACTURE OCCIPUT INITIAL ENC CLOS FRACTURE           | NEUROSURGERY        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS FRACTURE RT TALUS INITIAL ENC CLOS FRACTURE          | PODIATRY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS FRACTURE SHAFT RT TIBIA INIT ENC CLOS FX             | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS FX UPPER END RT HUMERUS SUBSQT FX RTN HNLG, Unknown  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJ MUSC FASC TEND POST THIGH LT INITIAL ENC         | SURGERY- ORTHOPEDIC |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJ MUSC FASC TEND POST THIGH RT INITIAL ENC         | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJ MUSC TEND ROTAT CUFF LT SHLDR INIT ENC           | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER                | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER                | SPORTS MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY LT LOWER LEG INITIAL ENCOUNTER                | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY M&T OTH PART BICPS LT ARM INIT ENC            | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY RT LOWER LEG INITIAL ENCOUNTER                | FAMILY PRACTICE     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY RT LOWER LEG INITIAL ENCOUNTER                | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY RT LOWER LEG INITIAL ENCOUNTER                | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY RT LOWER LEG SUBSEQUENT ENCOUNTER             | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS INJURY RT SHOULDER UPPER ARM INITIAL ENCNT           | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |



Prior Authorization Statistics - IL - CY 2021

| Procedure Code Description | Diagnosis Code Description   | Provider Specialty  | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|----------------------------|--|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | UNS INTERNAL DERANGEMENT UNSPECIFIED KNEE, PAIN IN RIGHT KNEE  | SURGERY- ORTHOPEDIC | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS OPN WND RT FRONT WALL THOR NO PEN TH CAV INT   | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT   | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | PREVENTIVE MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | FAMILY PRACTICE     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | ORTHOPEDIC SURGERY  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | PREVENTIVE MEDICINE |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | SURGERY- ORTHOPEDIC | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT, OTHER SPECIFIC ARTHROPATHIES NEC RIGHT SHOULDER  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS ROT CUFF TEAR/RUPT UNS SHOULDER NOT TRAUMAT  | SURGERY- ORTHOPEDIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS SX & SIGNS INVLV COGNITIVE FUNC & AWARENESS, DIZZINESS AND GIDDINESS, UNSPECIFIED VISUAL DISTURBANCE, MIGRAINE W/AURA NOT INTRACT W/O STAT MIGRAINOSUS | NEUROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS TEAR UNS MENISCUS CURR INJ LT KNEE INIT ENC  | SURGERY- ORTHOPEDIC | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS TEAR UNS MENISCUS CURR INJ LT KNEE SUBSQT  | INTERNAL MEDICINE   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNS TEAR UNS MENISCUS CURR INJ RT KNEE SEQUELA   | PHYSICIAN ASSISTANT | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS THOR THORACOLUMBAR LUMBOSACRAL IV DISC D/O   | NURSE PRACTITIONER  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNS THOR THORACOLUMBAR LUMBOSACRAL IV DISC D/O, RADICULOPATHY LUMBAR REGION, RADICULOPATHY THORACIC REGION, LONG TERM CURRENT USE OF OPIATE ANALGESIC      | PAIN MANAGEMENT     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | FAMILY PRACTICE     | 13                 | 14               | 14              |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | GASTROENTEROLOGY    | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | GENERAL PRACTICE    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | HEMATOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | INTERNAL MEDICINE   | 10                 | 11               | 11              |  |                          |                        |                      |                 |

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|----------------------------|--|----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | Neurology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | PEDIATRIC GASTROENTEROLOGY |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | PEDIATRICS                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | PHYSICIAN ASSISTANT        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | RADIOLOGY - DIAGNOSTIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | SURGERY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | URGENT CARE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN   | UROLOGY                    | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, CALCULUS OF KIDNEY, Unknown  | FAMILY PRACTICE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, CHANGE IN BOWEL HABIT, FAMILY HISTORY OTHER DISEASES DIGESTIVE SYSTEM, FAMILY HISTORY OF COLONIC POLYPS        | GASTROENTEROLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, DISEASE OF GALLBLADDER UNSPECIFIED   | SURGERY-GENERAL            |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, GROSS HEMATURIA  | NEPHROLOGY                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED  | EMERGENCY MEDICINE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED  | FAMILY PRACTICE            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED  | INTERNAL MEDICINE          |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED  | UROLOGY                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, HEMATURIA UNSPECIFIED, ANGIONEUROTIC EDEMA INITIAL ENCOUNTER, PERSONAL HISTORY OF URINARY CALCULI              | FAMILY PRACTICE            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, LEFT LOWER QUADRANT PAIN, Unknown  | Rheumatology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, NAUSEA   | GASTROENTEROLOGY           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, OTHER CHRONIC PAIN   | INTERNAL MEDICINE          | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN   | GASTROENTEROLOGY           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN   | OBSTETRICS & GYNECOLOGY    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, PELVIC AND PERINEAL PAIN, MELENA, HEMORRHAGE OF ANUS AND RECTUM, FAMILY HX MALIGNANT NEOPLASM DIGESTIVE ORGANS | INTERNAL MEDICINE          |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, RIGHT LOWER QUADRANT PAIN                                   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, RIGHT UPPER QUADRANT PAIN, POLYCYSTIC OVARIAN SYNDROME      | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, STRAIN MUSCLE FASCIA & TENDON ABD INITIAL ENCNT             | SURGERY-COLON/RECTAL   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, Unknown   | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, Unknown   | INTERNAL MEDICINE      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ABDOMINAL PAIN, Unknown   | UROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ACQUIRED DEFORMITY OF LEFT LOWER LEG  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED ACUTE APPENDICITIS  | GENERAL PRACTICE       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED BENIGN MAMMARY DYSPLASIA LEFT BREAST  | SURGERY-GENERAL        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED BENIGN MAMMARY DYSPLASIA RT BREAST  | Neurology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED BENIGN MAMMARY DYSPLASIA RT BREAST  | SURGERY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED CHOLESTEATOMA LEFT EAR  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED CONVULSIONS   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED CONVULSIONS   | NEUROLOGY              | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED CONVULSIONS   | PEDIATRICS             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED DISLOCATION LT AC JOINT INITIAL ENC   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED DISLOCATION LT PATELLA INITIAL ENC  | SURGERY-ORTHOPEDIC     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED DISLOCATION OF RIGHT PATELLA SEQUELA  | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED DISORDER OF EAR UNSPECIFIED EAR   | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED DISTURBANCES OF SKIN SENSATION, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS | NEUROLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED DISTURBANCES OF SKIN SENSATION, PARESTHESIA OF SKIN                         | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED EXOPHTHALMOS  | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED FALL INITIAL ENCOUNTER  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED HEARING LOSS RIGHT EAR  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED HEARING LOSS RIGHT EAR  | NEUROSURGERY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED HEARING LOSS UNSPECIFIED EAR  | NEUROLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED HEARING LOSS UNSPECIFIED EAR  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED HYDRONEPHROSIS  | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |

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| SOCCPT                     | UNSPECIFIED HYDRONEPHROSIS  | INTERNAL MEDICINE                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED HYDRONEPHROSIS  | UROLOGY                            | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED HYDRONEPHROSIS, CALCULUS OF KIDNEY  | UROLOGY                            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INJURY BLADDER SUBSEQUENT ENCOUNTER   | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INJURY OF FACE INITIAL ENCOUNTER  | DERMATOLOGY                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER  | FAMILY PRACTICE                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER  | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INJURY OF HEAD SUBSEQUENT ENCOUNTER   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INJURY OF RIGHT ANKLE SEQUELA   | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INJURY RIGHT ANKLE INITIAL ENCOUNTER  | INTERNAL MEDICINE                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INJURY RT WRIST HAND FINGERS INITIAL  | SURGERY- ORTHOPEDIC                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE   | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE   | NURSE PRACTITIONER                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE   | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INTERNAL DERANGEMENT OF LEFT KNEE   | SURGERY- ORTHOPEDIC                | 4                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE  | FAMILY PRACTICE                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE  | ORTHOPEDIC SURGERY                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE  | SURGERY- ORTHOPEDIC                | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED INTERNAL DERANGEMENT OF RIGHT KNEE, UNSPECIFIED DISLOCATION LT AC JOINT INITIAL ENC | PHYSICAL MEDICINE & REHABILITATION | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED OPEN WOUND UNS LOWER LEG INITIAL ENC  | INFECTIOUS DISEASES                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED OPTIC NEURITIS  | NEUROLOGY                          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED OPTIC NEURITIS, OTHER COMPLICATED HEADACHE SYNDROME                                 | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Unspecified ovarian cyst, left side   | OBSTETRICS & GYNECOLOGY            | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Unspecified ovarian cyst, right side  | OBSTETRICS & GYNECOLOGY            | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | Unspecified ovarian cyst, unspecified side  | OBSTETRICS & GYNECOLOGY            | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED PAPILLEDEMA   | NEUROLOGY                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED PAPILLEDEMA   | OPHTHALMOLOGY                      | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | UNSPECIFIED PAPILLEDEMA, BENIGN INTRACRANIAL HYPERTENSION  | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED RENAL COLIC, PERSONAL HISTORY OF URINARY CALCULI   | UROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED SENSORINEURAL HEARING LOSS   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED SENSORINEURAL HEARING LOSS   | OTOLARYNGOLOGIST (ENT) | 5                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED SENSORINEURAL HEARING LOSS   | PHYSICIAN ASSISTANT    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED SPRAIN LEFT ELBOW INITIAL ENCOUNTER  | SURGERY- ORTHOPEDIC    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED SPRAIN LT WRIST SUBSEQUENT ENCOUNTER   | ORTHOPEDIC SURGERY     |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED SPRAIN RT SHOULDER JOINT INITIAL ENC   | RADIOLOGY - DIAGNOSTIC |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED URINARY INCONTINENCE   | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED VISUAL DISTURBANCE   | INTERNAL MEDICINE      | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED VISUAL DISTURBANCE   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED VISUAL DISTURBANCE, ANESTHESIA OF SKIN, CERVICALGIA  | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED VISUAL DISTURBANCE, NAUSEA, Unknown  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED VISUAL FIELD DEFECTS, UNSPECIFIED PAPILLEDEMA, BENIGN INTRACRANIAL HYPERTENSION, Unknown     | OPHTHALMOLOGY          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSPECIFIED VISUAL LOSS, ISCHEMIC OPTIC NEUROPATHY LEFT EYE, OTHER DISORDERS OF OPTIC NERVE NEC LEFT EYE | OPHTHALMOLOGY          | 2                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSTABLE ANGINA  | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSTEADINESS ON FEET, ORTHOSTATIC HYPOTENSION  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UNSTEADINESS ON FEET, OTHER PERIPHERAL VERTIGO RIGHT EAR   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UNSTEADINESS ON FEET, RADICULOPATHY LUMBAR REGION  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UPPER ABDOMINAL PAIN UNSPECIFIED   | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | UPPER ABDOMINAL PAIN UNSPECIFIED   | GASTROENTEROLOGY       |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | UPPER ABDOMINAL PAIN UNSPECIFIED   | INTERNAL MEDICINE      | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | UPPER ABDOMINAL PAIN UNSPECIFIED, LOWER ABDOMINAL PAIN UNSPECIFIED, Unknown                              | ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UPPER ABDOMINAL PAIN UNSPECIFIED, PAIN IN THORACIC SPINE   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | UPPER ABDOMINAL PAIN UNSPECIFIED, Unknown,   | ONCOLOGY               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | URETHRAL DIVERTICULUM  | UROLOGY                | 1                  |                  |                 |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOCCPT                     | URINARY TRACT INFECTION SITE NOT SPECIFIED   | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | URINARY TRACT INFECTION SITE NOT SPECIFIED   | UROLOGY                | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | VENOUS INSUFFICIENCY CHRONIC PERIPHERAL  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE   | FAMILY PRACTICE        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE   | PHYSICIAN ASSISTANT    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SOCCPT                     | VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE   | SURGERY-GENERAL        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | VESTIBULAR NEURONITIS BILATERAL  | OTOLARYNGOLOGIST (ENT) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | VISUAL HALLUCINATIONS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | VITAMIN D DEFICIENCY UNSPECIFIED, MULTIPLE SCLEROSIS   | NEUROLOGY              |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | VOMITING UNSPECIFIED, DIVERTICULITIS SM INTEST W/PERF & ABSC W/BLEED   | GASTROENTEROLOGY       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | VOMITING UNSPECIFIED, MALIGNANT NEOPLASM UNSITE RIGHT FEMALE BREAST, Unknown   | ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WEAKNESS   | PEDIATRIC NEUROLOGIST  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | WEAKNESS, CERVICALGIA, PAIN IN LEFT ARM, Unknown   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WEDGE COMPRS FX 1ST LUMBAR VERT INIT ENC CLOS FX, WEDGE COMPRS FX T11-T12 VERT INIT ENC CLOS FX  | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WEDGE COMPRS FX T9-T10 VERT INIT ENC CLOS FX   | NEUROSURGERY           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | WEDGE COMPRS FX UNS LUMBAR VERT INIT ENC CLOS FX   | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WEDGE COMPRS FX UNS THOR VERT INIT ENC CLOS FX   | SURGERY-ORTHOPEDIC     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WHITE MATTER DISEASE UNSPECIFIED   | NEUROLOGY              | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| SOCCPT                     | WHITE MATTER DISEASE UNSPECIFIED, ABNORMAL IMMUNOLOGICAL FIND IN CEREBROSPINAL FL, MULTIPLE SCLEROSIS  | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WHITE MATTER DISEASE UNSPECIFIED, OTHER SPONDYLOSIS W/MYELOPATHY CERVICAL REGION, OTH ORGAN/SYS INVLV SYSTEMIC LUPUS ERYTHEMATOSUS                                 | RHEUMATOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WHITE MATTER DISEASE UNSPECIFIED, SPINAL STENOSIS CERVICAL REGION, RADICULOPATHY CERVICAL REGION, PARESTHESIA OF SKIN, DEMYELINATING DZ CENTRAL NERVOUS SYSTEM UNS | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WHITE MATTER DISEASE UNSPECIFIED, UNSPECIFIED OPTIC NEURITIS   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SOCCPT                     | WHITE MATTER DISEASE UNSPECIFIED, UNSPECIFIED URINARY INCONTINENCE, ATAXIA UNSPECIFIED   | NEUROLOGY              | 2                  |                  |                 |  |                          |                        |                      |                 |

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|--|--|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SOFOSBUVIR-VELPATASVIR 400-100 MG TABLET |  | Other                 | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SOOLANTRA                                | Rosacea, unspecified   | Surgery, Thoracic     |                    |                  |                 |  |                          |                        | 1                    |                 |
| SOOLANTRA 1 % CREAM (G)                  |  | Dermatology           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SOOLANTRA 1 % CREAM (G)                  |  | Other                 | 6                  | 4                | 4               |  |                          |                        |                      |                 |
| SORILUX 0.005 % FOAM                     |  | Dermatology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | CERVICAL DISC DISORDER W RADICULOPATHY, UNSP CERVICAL REGION | Surgery, Orthopedic   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION        | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | OTHER SECONDARY SCOLIOSIS, LUMBAR REGION                     | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED     | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | RADICULOPATHY, CERVICAL REGION                               | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Orthopedic   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological |                    | 2                | 2               |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Orthopedic   |                    | 3                | 3               |  |                          |                        |                      |                 |
| SP BONE AGRFT LOCAL ADD-ON               | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| SP BONE AGRFT STRUCT ADD-ON              | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | CERVICAL DISC DISORDER W RADICULOPATHY, UNSP CERVICAL REGION | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | INTERVERTEBRAL DISC DISORDERS W RADICULOPATHY, LUMBAR REGION | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION        | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | OTHER SECONDARY SCOLIOSIS, LUMBAR REGION                     | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | OTHER SPECIFIED DEFORMING DORSOPATHIES, SITE UNSPECIFIED     | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | RADICULOPATHY, LUMBAR REGION                                 | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Neurological | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | SPINAL STENOSIS, CERVICAL REGION                             | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION  | Surgery, Orthopedic   | 2                  | 4                | 4               |  |                          |                        |                      |                 |
| SP BONE ALGRFT MORSEL ADD-ON             | SPONDYLOSIS W/O MYELOPATHY OR RADICULOPATHY, CERVICAL REGION | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |

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| SP BONE ALGRFT STRUCT ADD-ON | OTHER SECONDARY SCOLIOSIS, LUMBAR REGION                    | Surgery, Orthopedic                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SP BONE ALGRFT STRUCT ADD-ON | SPINAL STENOSIS, CERVICAL REGION                            | Surgery, Orthopedic                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SPECIAL RADIATION TREATMENT  | SEC AND UNSP MALIG NEOPLASM OF NODES OF HEAD, FACE AND NECK | Radiation Oncology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPECIALTY CARE TRANSPORT     | CLEFT PALATE  | Pediatrics                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPECIALTY CARE TRANSPORT     | FEEDING DIFFICULTIES  | Hospital                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPECIALTY CARE TRANSPORT     | SLOW FEEDING OF NEWBORN                                     | Hospital                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH SOUND LANG COMPREHEN  | AUTISTIC DISORDER   | Pediatric Neurology                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH SOUND LANG COMPREHEN  | EXPRESSIVE LANGUAGE DISORDER                                | Speech Therapy                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH SOUND LANG COMPREHEN  | SENSORINEURAL HEARING LOSS, BILATERAL                       | Speech Therapy                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH SOUND LANG COMPREHEN  | UNSPECIFIED SPEECH DISTURBANCES                             | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | APHASIA   | Speech Therapy                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | APHASIA FOLLOWING CEREBRAL INFARCTION                       | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | ATTENTION-DEFICIT HYPERACTIVITY DISORDER, UNSPECIFIED TYPE  | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | AUTISTIC DISORDER   | Family Medicine                        | 3                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | AUTISTIC DISORDER   | Neurodevelopmental Disabilities        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | AUTISTIC DISORDER   | Neurology                              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | AUTISTIC DISORDER   | Pediatric Neurology                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | AUTISTIC DISORDER   | Pediatrics                             | 3                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | AUTISTIC DISORDER   | Speech Therapy                         | 9                  | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | CEREB INFRC D/T UNSP OCCLS OR STENOS OF LEFT MID CEREB ART  | Physical Medicine                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | CEREB INFRC D/T UNSP OCCLS OR STENOS OF RIGHT MID CEREB ART | Family Medicine                        | 3                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | CHILDHOOD ONSET FLUENCY DISORDER                            | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | CHILDHOOD ONSET FLUENCY DISORDER                            | Speech Therapy                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | Cough   | Other                                  |                    |                  |                 |  |                          | 1                      |                      |                 |
| SPEECH/HEARING THERAPY       | DELAYED MILESTONE IN CHILDHOOD                              | Pediatrics                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | DEVELOPMENTAL DISORDER OF SPEECH AND LANGUAGE, UNSPECIFIED  | Family Medicine                        | 3                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | DEVELOPMENTAL DISORDER OF SPEECH AND LANGUAGE, UNSPECIFIED  | Pediatrics                             | 13                 | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | DEVELOPMENTAL DISORDER OF SPEECH AND LANGUAGE, UNSPECIFIED  | Speech Therapy                         | 3                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | DISTURBANCES OF SALIVARY SECRETION                          | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | DYSARTHRIA FOLLOWING CEREBRAL INFARCTION                    | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | EXPRESSIVE LANGUAGE DISORDER                                | Pediatrics                             | 6                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | EXPRESSIVE LANGUAGE DISORDER                                | Physical Therapy                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | EXPRESSIVE LANGUAGE DISORDER                                | Speech Therapy                         | 6                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | FEEDING DIFFICULTIES  | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY       | HYPERNASALITY   | Pediatrics                             | 2                  |                  |                 |  |                          |                        |                      |                 |



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|--|---|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SPEECH/HEARING THERAPY                         | LARYNGEAL SPASM   | Allergy/Immunology                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | MIXED RECEPTIVE-EXPRESSIVE LANGUAGE DISORDER              | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | MIXED RECEPTIVE-EXPRESSIVE LANGUAGE DISORDER              | Pediatrics                             | 6                  | 2                | 2               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | MIXED RECEPTIVE-EXPRESSIVE LANGUAGE DISORDER              | Speech Therapy                         | 2                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | NODULES OF VOCAL CORDS                                    | Speech Therapy                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | OTHER CEREBRAL PALSY                                      | Pediatrics                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | OTHER DEVELOPMENTAL DISORDERS OF SPEECH AND LANGUAGE      | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | OTHER DEVELOPMENTAL DISORDERS OF SPEECH AND LANGUAGE      | Speech Therapy                         | 2                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | OTHER DISEASES OF VOCAL CORDS                             | Otolaryngology (Ear, Nose, And Throat) | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | OTHER SPEECH DISTURBANCES                                 | Pediatrics                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | OTHER SYMBOLIC DYSFUNCTIONS                               | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | PARKINSON'S DISEASE                                       | Physical Medicine                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | PHONOLOGICAL DISORDER                                     | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | PHONOLOGICAL DISORDER                                     | Pediatrics                             | 5                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | PHONOLOGICAL DISORDER                                     | Speech Therapy                         | 10                 |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | SECONDARY MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES     | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | SENSORINEURAL HEARING LOSS, BILATERAL                     | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | SOCIAL PRAGMATIC COMMUNICATION DISORDER                   | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | SOCIAL PRAGMATIC COMMUNICATION DISORDER                   | Speech Therapy                         | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | SPEECH AND LANGUAGE DEVELOPMENT DELAY DUE TO HEARING LOSS | Pediatrics                             | 3                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | UNSP LACK OF EXPECTED NORMAL PHYSIOL DEV IN CHILDHOOD     | Pediatrics                             | 2                  |                  |                 |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | UNSPECIFIED SPEECH DISTURBANCES                           | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPEECH/HEARING THERAPY                         | UNSPECIFIED SPEECH DISTURBANCES                           | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPIN/BRAIN PUMP REFIL & MAIN                   | AMYOTROPHIC LATERAL SCLEROSIS                             | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPINAL DISK SURGERY ADD-ON                     | OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REGION     | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| Spinal Instrumentation Procedures on the Spine | Osteophyte, vertebrae                                     | Surgery, Neurological                  |                    |                  |                 |  |                          |                        |                      | 1               |
| SPINE SURGERY PROCEDURE                        | RADICULOPATHY CERVICAL REGION, CERVICALGIA                | NEUROSURGERY                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPIRIVA 18 MCG CAP W/DEV                       |   | Oncology                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPIRIVA 18 MCG CAP W/DEV                       |   | Other                                  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SPIRIVA 18 MCG CAP W/DEV                       |   | PCP/Pediatrician                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| SPIRIVA RESPIMAT 1.25 MCG MIST INHAL           |   | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SPIRIVA RESPIMAT 2.5 MCG MIST INHAL            |   | Other                                  |                    | 2                | 2               |  |                          |                        |                      |                 |
| SPIRIVA RESPIMAT 2.5 MCG MIST INHAL            |   | PCP/Pediatrician                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| SPIRIVA RESPIMAT 2.5 MCG MIST INHAL            |   | Pulmonology                            |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SPLIT NIGHT TITRATION STUDY, >= 6 YEARS OLD | OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)  | Respiratory Therapy                    |                    | 2                | 2               |  |                          |                        |                      |                 |
| SPRAVATO 84 MG SPRAY                        |  | Other                                  | 6                  |                  |                 |  |                          |                        |                      |                 |
| STAB PHLEB VEINS XTR 10-20                  | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN  | Surgery, Thoracic                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| STAB PHLEB VEINS XTR 10-20                  | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN  | Surgery, Vascular                      | 2                  |                  |                 |  |                          |                        |                      |                 |
| STAB PHLEB VEINS XTR 10-20                  | VARICOSE VEINS OF LEFT LOWER EXTREMITY WITH PAIN   | Surgery, Vascular                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| STAB PHLEB VEINS XTR 10-20                  | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH INFLAMMATION  | Surgery, Vascular                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| STAB PHLEB VEINS XTR 10-20                  | VARICOSE VEINS OF RIGHT LOWER EXTREMITY WITH PAIN  | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| STEGLATRO 5 MG TABLET                       |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| STELARA 45MG/0.5ML SYRINGE                  |  | Dermatology                            | 3                  |                  |                 |  |                          |                        |                      |                 |
| STELARA 45MG/0.5ML SYRINGE                  |  | Other                                  | 6                  |                  |                 |  |                          |                        |                      |                 |
| STELARA 90 MG/ML SYRINGE                    |  | Gastroenterology                       | 12                 | 1                | 1               |  |                          |                        |                      |                 |
| STELARA 90 MG/ML SYRINGE                    |  | Other                                  | 9                  | 1                | 1               |  |                          |                        |                      |                 |
| STELARA 90 MG/ML SYRINGE                    |  | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| STERILE WATER/SALINE, 10 ML                 | OTHER INTRAOPERATIVE COMPLICATIONS OF THE SPLEEN   | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| STIMULATION PACING HEART                    | LONGSTANDING PERSISTENT ATRIAL FIBRILLATION  | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| STIMULATION PACING HEART                    | OTHER PERSISTENT ATRIAL FIBRILLATION   | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| STIMULATION PACING HEART                    | PAROXYSMAL ATRIAL FIBRILLATION   | Cardiac Electrophysiology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| STIMULATION PACING HEART                    | PAROXYSMAL ATRIAL FIBRILLATION   | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| STIMULATION PACING HEART                    | PAROXYSMAL ATRIAL FIBRILLATION   | Pediatric Cardiology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| STIMULATION PACING HEART                    | SUPRAVENTRICULAR TACHYCARDIA   | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| STIMULATION PACING HEART                    | VENTRICULAR TACHYCARDIA  | Cardiac Electrophysiology              | 2                  |                  |                 |  |                          |                        |                      |                 |
| STIOLTO RESPIMAT 2.5-2.5MCG MIST INHAL      |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| STIOLTO RESPIMAT 2.5-2.5MCG MIST INHAL      |  | PCP/Pediatrician                       |                    | 2                | 2               |  |                          |                        |                      |                 |
| STORAGE/YEAR OOCYTE(S)                      | OTHER OVARIAN DYSFUNCTION  | Reproductive Endocrinology/Infertility |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | ABNORMAL ELECTROCARDIOGRAM   | CARDIOLOGIST                           | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | ABNORMAL ELECTROCARDIOGRAM   | FAMILY PRACTICE                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | ABNORMAL ELECTROCARDIOGRAM   | GENERAL PRACTICE                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | ABNORMAL ELECTROCARDIOGRAM   | INTERNAL MEDICINE                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | ABNORMAL ELECTROCARDIOGRAM, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PAROXYSMAL ATRIAL FIBRILLATION, OLD MYOCARDIAL INFARCTION | CARDIOVASCULAR DISEASE                 | 1                  |                  |                 |  |                          |                        |                      |                 |

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| STRESS TTE COMPLETE        | ABNORMAL ELECTROCARDIOGRAM, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, PRESENCE OF CORONARY ANGIOPLASTY IMPLANT & GRAFT  | FAMILY PRACTICE                | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL ELECTROCARDIOGRAM, BRADYCARDIA UNSPECIFIED, CHEST PAIN UNSPECIFIED  | CARDIOLOGIST                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL ELECTROCARDIOGRAM, DYSPNEA UNSPECIFIED  | FAMILY PRACTICE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL ELECTROCARDIOGRAM, ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION  | INTERNAL MEDICINE              | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL ELECTROCARDIOGRAM, MIXED HYPERLIPIDEMIA, ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH, PRE-EXCITATION SYNDROME, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM | CARDIOLOGY & INTERNAL MEDICINE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL ELECTROCARDIOGRAM, OTHER CHEST PAIN, SHORTNESS OF BREATH, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOVASCULAR DISEASE         | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL ELECTROCARDIOGRAM, OTHER FORMS OF DYSPNEA   | CARDIOVASCULAR DISEASE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL ELECTROCARDIOGRAM, PALPITATIONS, PRECORDIAL PAIN, SUPRAVENTRICULAR TACHYCARDIA  | CARDIOLOGIST                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL RESULT CV FUNCTION STUDY UNS  | CARDIOLOGIST                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ABNORMAL RESULT OTH CARDIOVASCULR FUNCTION STUDY, CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH  | CARDIOVASCULAR DISEASE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ANGINA PECTORIS UNSPECIFIED  | CARDIOVASCULAR DISEASE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOLOGIST                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | CARDIOVASCULAR DISEASE         | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | FAMILY PRACTICE                |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS  | INTERNAL MEDICINE              | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CARDIOMYOPATHY UNSPECIFIED   | CARDIOVASCULAR DISEASE         | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED   | CARDIOLOGIST                   | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED   | CARDIOVASCULAR DISEASE         | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED   | EMERGENCY MEDICINE             | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED   | FAMILY PRACTICE                | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED   | INTERNAL MEDICINE              | 3                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED   | Rheumatology                   |                    | 2                | 2               |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED, DYSPNEA UNSPECIFIED  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED, DYSPNEA UNSPECIFIED, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED, PAROXYSMAL ATRIAL FIBRILLATION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED, SHORTNESS OF BREATH, ESSENTIAL PRIMARY HYPERTENSION  | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CHEST PAIN UNSPECIFIED, VENTRICULAR PREMATURE DEPOLARIZATION, OTHER SPECIFIED HYPOTHYROIDISM, ESSENTIAL PRIMARY HYPERTENSION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | CONGENITAL INSUFFICIENCY OF AORTIC VALVE, AORTIC ECTASIA UNSPECIFIED SITE, NONRHEUMATIC AORTIC VALVE STENOSIS, PRESENCE OF PROSTHETIC HEART VALVE, ENCOUNTER FOR IMMUNIZATION, PERSONS ENCOUNTER HEALTH SRVC OTH CIRCUMSTANCES | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | COR ATHEROSCLER D/T CALCIFIED CORONARY LESION  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | DIZZINESS AND GIDDINESS  | FAMILY PRACTICE        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | DIZZINESS AND GIDDINESS, CHEST PAIN UNSPECIFIED, PAROXYSMAL TACHYCARDIA UNSPECIFIED, NONRHEUMATIC MITRAL VALVE INSUFFICIENCY, NONRHEUMATIC MITRAL VALVE PROLAPSE   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | DYSPNEA UNSPECIFIED  | CARDIOLOGIST           | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | DYSPNEA UNSPECIFIED  | CARDIOVASCULAR DISEASE | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | DYSPNEA UNSPECIFIED  | EMERGENCY MEDICINE     | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | DYSPNEA UNSPECIFIED  | INTERNAL MEDICINE      | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ENCOUNTER FOR OTHER PREPROCEDURAL EXAMINATION  | CARDIOVASCULAR         |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ESSENTIAL PRIMARY HYPERTENSION   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ESSENTIAL PRIMARY HYPERTENSION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | ESSENTIAL PRIMARY HYPERTENSION   | INTERNAL MEDICINE      | 3                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | HYPERLIPIDEMIA UNSPECIFIED, ABNORMAL FINDINGS ON DX IMAGING HEART & COR CIRC, OTHER LONG TERM CURRENT DRUG THERAPY   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | HYPERLIPIDEMIA UNSPECIFIED, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | HYPERLIPIDEMIA UNSPECIFIED, CHEST PAIN UNSPECIFIED   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|--|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| STRESS TTE COMPLETE        | HYPERLIPIDEMIA UNSPECIFIED, OTHER FATIGUE, OTHER CHEST PAIN, SHORTNESS OF BREATH                                   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | HYPERLIPIDEMIA UNSPECIFIED, PALPITATIONS, OTHER CHEST PAIN, ESSENTIAL PRIMARY HYPERTENSION, TOBACCO USE            | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | HYPOCALCEMIA, VENTRICULAR PREMATURE DEPOLARIZATION, OTHER SPECIFIED HYPOTHYROIDISM, ESSENTIAL PRIMARY HYPERTENSION | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | MIXED HYPERLIPIDEMIA, ASHD NATIVE CORONARY ARTERY W/O ANGINA PECTORIS, ESSENTIAL PRIMARY HYPERTENSION              | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | MIXED HYPERLIPIDEMIA, PALPITATIONS, SUPRAVENTRICULAR TACHYCARDIA, ESSENTIAL PRIMARY HYPERTENSION                   | CARDIOVASCULAR         | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | NONRHEUMATIC AORTIC VALVE STENOSIS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OBESITY UNSPECIFIED, GENERALIZED ANXIETY DISORDER, Unknown   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTH SPECIFIED CONGENITAL MALFORMATIONS OF HEART  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN   | CARDIOLOGIST           | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN   | CARDIOVASCULAR DISEASE | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN   | FAMILY PRACTICE        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN   | INTERNAL MEDICINE      | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN   | NEUROLOGY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN   | NURSE PRACTITIONER     | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN   | Rheumatology           | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN, ANESTHESIA OF SKIN   | INTERNAL MEDICINE      |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN, BRADYCARDIA UNSPECIFIED, NONRHEUMATIC MITRAL VALVE PROLAPSE                                      | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER CHEST PAIN, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM, Unknown  | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | OTHER FORMS OF DYSPNEA   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | PALPITATIONS   | CARDIOLOGIST           | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | PALPITATIONS   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | PALPITATIONS, ESSENTIAL PRIMARY HYPERTENSION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | PALPITATIONS, OTHER CHEST PAIN   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | PALPITATIONS, OTHER CHEST PAIN   | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE        | PALPITATIONS, PAIN IN LEFT ARM, FAMILY HX ISCHEMIC HRT DZ OTH DZ CIRC SYSTEM                                       | FAMILY PRACTICE        | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| STRESS TTE COMPLETE                         | PRECORDIAL PAIN   | CARDIOVASCULAR DISEASE | 2                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | PRECORDIAL PAIN   | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | PRECORDIAL PAIN, DYSPNEA UNSPECIFIED  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SHORTNESS OF BREATH   | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SHORTNESS OF BREATH   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SHORTNESS OF BREATH   | INTERNAL MEDICINE      | 3                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SHORTNESS OF BREATH, PAROXYSMAL ATRIAL FIBRILLATION   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | ST ELEVATION MYOCARDIAL INFARCTION INVOLV LADCA   | CARDIOVASCULAR DISEASE |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SYNCOPE AND COLLAPSE  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SYNCOPE AND COLLAPSE  | FAMILY PRACTICE        |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SYNCOPE AND COLLAPSE  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SYNCOPE AND COLLAPSE, ABNORMAL ELECTROCARDIOGRAM, OTHER CHEST PAIN, SHORTNESS OF BREATH, OVERWEIGHT | CARDIOLOGIST           |                    | 1                | 1               |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SYNCOPE AND COLLAPSE, PALPITATIONS, DIZZINESS AND GIDDINESS   | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | SYNCOPE AND COLLAPSE, SHORTNESS OF BREATH   | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | TACHYCARDIA UNSPECIFIED, DIZZINESS AND GIDDINESS, ESSENTIAL PRIMARY HYPERTENSION                    | CARDIOVASCULAR DISEASE | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | TACHYCARDIA UNSPECIFIED, PALPITATIONS, SHORTNESS OF BREATH  | CARDIOLOGIST           | 1                  |                  |                 |  |                          |                        |                      |                 |
| STRESS TTE COMPLETE                         | TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| Substance Abuse Residential                 | Alcohol dependence, uncomplicated   | Behavioral Health      | 3                  |                  |                 |  |                          |                        |                      |                 |
| Substance Abuse Residential                 | Opioid dependence, uncomplicated  | Behavioral Health      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SULCONAZOLE NITRATE 1 % CREAM (G)           |   | Other                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SUMATRIPTAN SUCCINATE 100 MG TABLET         |   | Other                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SUMATRIPTAN SUCCINATE 6 MG/0.5ML PEN INJCTR |   | Other                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SUNOSI 150 MG TABLET                        |   | Other                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUNOSI 75 MG TABLET                         |   | Other                  | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| SUPARTZ FX 10 MG/ML SYRINGE                 |   | Other                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES                        | Burkitt lymphoma, unspecified site  | HEMATOLOGY             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES                        | Intrahepatic bile duct carcinoma  | ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES                        | Intrahepatic bile duct carcinoma  | PHYSICAL THERAPY       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES                        | Malignant neoplasm of central portion of left female breast   | ONCOLOGY               | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES                        | Malignant neoplasm of central portion of right female breast  | INTERNAL MEDICINE      | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES                        | Malignant neoplasm of descending colon  | INTERNAL MEDICINE      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES                        | Malignant neoplasm of head, face and neck   | ONCOLOGY               | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-----------------------------------|--|--------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SUPPORTIVE THERAPIES              | Malignant neoplasm of larynx, unspecified                              | OUTPATIENT REHAB FACILITY      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of left ovary                                       | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of lower-inner quadrant of left female breast       | ONCOLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of overlapping sites of nasopharynx                 | ONCOLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of overlapping sites of right female breast         | Internal Medicine              | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of right ovary                                      | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of trigone of bladder                               | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of trigone of bladder                               | ONCOLOGY                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of unspecified part of left bronchus or lung        | Oncology/Radiation             | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of unspecified part of unspecified bronchus or lung | DIAGNOSTIC RADIOLOGY           | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of unspecified part of unspecified bronchus or lung | INTERNAL MEDICINE              | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of unspecified site of right female breast          | HOSPITALIST - INTERNAL MEDICIN | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of unspecified site of unspecified female breast    | HEMATOLOGY<br>ONCOLOGY         | 3                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of unspecified site of unspecified female breast    | ONCOLOGY                       | 4                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of upper-outer quadrant of left female breast       | HEMATOLOGY                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Malignant neoplasm of upper-outer quadrant of right female breast      | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Myeloid sarcoma, not having achieved remission                         | HEMATOLOGY                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Other general symptoms and signs                                       | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPORTIVE THERAPIES              | Secondary malignant neoplasm of bone                                   | ONCOLOGY                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUPPRELIN LA IMPLANT              | OTHER HYPERFUNCTION OF PITUITARY GLAND                                 | Family Medicine                | 1                  |                  |                 |  |                          |                        |                      |                 |
| SURGERY FOR LIVER LESION          | OTHER SPECIFIED DISEASES OF LIVER                                      | Surgery, General               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SUSPENSION OF BREAST              | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                       | Surgery, Plastic               | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SYMBICORT 160-4.5MCG HFA AER AD   |  | Family Medicine                |                    | 1                | 1               |  |                          |                        |                      |                 |
| SYMBICORT 160-4.5MCG HFA AER AD   |  | Other                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNJARDY 12.5-1000 TABLET         |  | Other                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNJARDY XR 12.5-1000 TAB BP 24H  |  | Other                          | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| SYNJARDY XR 25-1000 MG TAB BP 24H |  | Other                          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SYNTHROID                         | Autoimmune thyroiditis   | Endocrinology                  |                    |                  |                 |  |                          |                        |                      | 1               |
| SYNTHROID                         | HYPOTHYROIDISM   | Surgery, Thoracic              |                    |                  |                 |  |                          | 1                      |                      |                 |
| SYNTHROID 112 MCG TABLET          |  | Other                          | 2                  |                  |                 |  |                          |                        |                      |                 |
| SYNTHROID 125 MCG TABLET          |  | Other                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNTHROID 150 MCG TABLET          |  | Other                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNTHROID 175 MCG TABLET          |  | Endocrinology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNTHROID 175 MCG TABLET          |  | Other                          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SYNTHROID 200 MCG TABLET          |  | Other                          |                    | 1                | 1               |  |                          |                        |                      |                 |

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|----------------------------|---|---------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| SYNTHROID 25 MCG TABLET    |   | PCP/Pediatrician    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SYNTHROID 50 MCG TABLET    |   | Other               | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| SYNTHROID 50 MCG TABLET    |   | PCP/Pediatrician    |                    | 1                | 1               |  |                          |                        |                      |                 |
| SYNTHROID 75 MCG TABLET    |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                | Family Medicine     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                | Pain Management     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                | Physical Medicine   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                | Sports Medicine     | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE                | Surgery, Orthopedic | 7                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | OSTEOARTHRITIS OF KNEE, UNSPECIFIED                     | Internal Medicine   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | PAIN IN RIGHT KNEE                                      | Anesthesiology      | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | SPRAIN OF ANTERIOR CRUCIATE LIGAMENT OF UNSP KNEE, INIT | Family Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | STRAIN OF MUSC/TEND AT LOWER LEG LEVEL, LEFT LEG, INIT  | Family Medicine     |                    | 1                |                 |  | 1                        |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE            | Family Medicine     | 2                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE            | Internal Medicine   | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE            | Sports Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE            | Surgery, Orthopedic | 14                 | 2                | 2               |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE           | General Practice    | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE           | Pain Management     | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE           | Rheumatology        | 1                  |                  |                 |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE           | Sports Medicine     | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE           | Surgery, Orthopedic | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| SYNVISC OR SYNVISC-ONE     | UNILATERAL PRIMARY OSTEOARTHRITIS, UNSPECIFIED KNEE     | Surgery, Orthopedic | 1                  |                  |                 |  |                          |                        |                      |                 |
| T:SLIM X2 CONTROL-IQ EACH  |   | Other               | 1                  |                  |                 |  |                          |                        |                      |                 |
| TABRECTA 200 MG TABLET     |   | Oncology/Radiation  | 1                  |                  |                 |  |                          |                        |                      |                 |
| TADALAFIL                  | Enlarged prostate with lower urinary tract symptoms     | Other               |                    |                  |                 |  |                          |                        |                      | 1               |
| TADALAFIL                  | Male erectile dysfunction, unspecified                  | Family Medicine     |                    |                  |                 |  |                          |                        |                      | 1               |
| TADALAFIL 10 MG TABLET     |   | Other               |                    | 3                | 3               |  |                          |                        |                      |                 |
| TADALAFIL 10 MG TABLET     |   | PCP/Pediatrician    |                    | 5                | 5               |  |                          |                        |                      |                 |
| TADALAFIL 2.5 MG TABLET    |   | Other               |                    | 1                | 1               |  |                          |                        |                      |                 |
| TADALAFIL 20 MG TABLET     |   | Other               | 1                  | 5                | 5               |  |                          |                        |                      |                 |
| TADALAFIL 20 MG TABLET     |   | PCP/Pediatrician    |                    | 5                | 5               |  |                          |                        |                      |                 |
| TADALAFIL 5 MG TABLET      |   | Internal Medicine   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TADALAFIL 5 MG TABLET      |   | Other               |                    | 5                | 5               |  |                          |                        |                      |                 |
| TADALAFIL 5 MG TABLET      |   | PCP/Pediatrician    | 3                  | 7                | 7               |  |                          |                        |                      |                 |
| TADALAFIL 5 MG TABLET      |   | Urology             | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| TAGRISSO 40 MG TABLET      |   | Hematology          | 1                  |                  |                 |  |                          |                        |                      |                 |



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|---|---|----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| TAGRISSO 80 MG TABLET                           |   | Hematology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TAGRISSO 80 MG TABLET                           |   | Oncology/Radiation   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TAH RAD DEBULK/LYMPH REMOVE                     | OTHER INTRA-ABDOMINAL AND PELVIC SWELLING, MASS AND LUMP  | Gynecologic Oncology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TALICIA 10MG-250MG CAP IR DR                    |   | Other                |                    | 1                | 1               |  |                          |                        |                      |                 |
| TALTZ   | Psoriasis vulgaris  | Dermatology          |                    |                  |                 |  |                          |                        |                      | 1               |
| TALTZ   | Psoriasis, unspecified  | Dermatology          |                    |                  |                 |  |                          |                        |                      | 1               |
| TALTZ AUTOINJECTOR (2 PACK) 80 MG/ML AUTO INJCT |   | Dermatology          | 3                  |                  |                 |  |                          |                        |                      |                 |
| TALTZ AUTOINJECTOR (2 PACK) 80 MG/ML AUTO INJCT |   | Other                | 3                  |                  |                 |  |                          |                        |                      |                 |
| TALTZ AUTOINJECTOR (2 PACK) 80 MG/ML AUTO INJCT |   | PCP/Pediatrician     | 2                  |                  |                 |  |                          |                        |                      |                 |
| TALTZ AUTOINJECTOR (3 PACK) 80 MG/ML AUTO INJCT |   | Dermatology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| TALTZ AUTOINJECTOR (3 PACK) 80 MG/ML AUTO INJCT |   | Other                | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| TALTZ AUTOINJECTOR 80 MG/ML AUTO INJCT          |   | Dermatology          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| TALTZ AUTOINJECTOR 80 MG/ML AUTO INJCT          |   | Other                | 10                 | 2                | 2               |  |                          |                        |                      |                 |
| TALTZ AUTOINJECTOR 80 MG/ML AUTO INJCT          |   | Rheumatology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| TALTZ SYRINGE 80 MG/ML SYRINGE                  |   | Dermatology          | 2                  |                  |                 |  |                          |                        |                      |                 |
| TARGADOX 50 MG TABLET                           |   | Other                | 1                  |                  |                 |  |                          |                        |                      |                 |
| TAVABOROLE 5 % SOL W/APPL                       |   | Dermatology          | 1                  |                  |                 |  |                          |                        |                      |                 |
| TAVABOROLE 5 % SOL W/APPL                       |   | Orthopedic Surgery   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TAZORAC 0.05 % CREAM(GM)                        |   | Other                |                    | 1                | 1               |  |                          |                        |                      |                 |
| TAZORAC 0.1 % GEL                               |   | Other                |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| TECFIDERA 120-240 MG CAPSULE DR                 |   | Neurology            |                    | 3                | 3               |  |                          |                        |                      |                 |
| TECFIDERA 240 MG CAPSULE DR                     |   | Neurology            | 1                  | 3                | 3               |  |                          |                        |                      |                 |
| TECFIDERA 240 MG CAPSULE DR                     |   | Other                |                    | 3                | 3               |  |                          |                        |                      |                 |
| TEMOZOLOMIDE 100 MG CAPSULE                     |   | Neurology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| TEMOZOLOMIDE 180 MG CAPSULE                     |   | Neurology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| TEMOZOLOMIDE 20 MG CAPSULE                      |   | Neurology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps              | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | ORTHOPEDIC SURGERY   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps              | COMPLETE ROT CUFF TEAR/RUPT RT SHLDR NOT TRAUMAT  | SURGERY-ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps              | IMPINGEMENT SYNDROME OF LEFT SHOULDER   | ORTHOPEDIC SURGERY   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps              | LOOSE BODY IN LEFT SHOULDER   | SURGERY-ORTHOPEDIC   |                    | 1                | 1               |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps              | OTHER INSTABILITY LEFT SHOULDER, STRN MUSC FASC TEND LNG HD BICPS LT ARM INIT ENC, BURSITIS OF LEFT SHOULDER, INCMPL ROT CUFF TEAR/RUPT LT SHOULDR NOT TRAUMAT, SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT | SURGERY-ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps              | SPRAIN RT ROTATOR CUFF CAPSULE SUBSEQUENT ENCENR  | SURGERY-ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps              | STRAIN OTH M&T SHLDR UP ARM LVL UNS ARM INIT ENC, SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT   | SURGERY-ORTHOPEDIC   | 1                  |                  |                 |  |                          |                        |                      |                 |

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|------------------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| Tenodesis of long tendon of biceps | STRN MUSC FASC TEND LNG HD BICPS RT ARM INIT ENC, INCMPL RC TEAR/RUPT RT SHOULDER NOT SPEC TRAUM, SUPERIOR GLENOID LABRUM LESION RT SHOULDER INIT, PRIMARY OSTEOARTHRITIS RIGHT SHOULDER | SURGERY-ORTHOPEDIC                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps | STRN MUSC TEND ROTATOR CUFF RT SHLDR INITIAL ENC, BICIPITAL TENDINITIS RIGHT SHOULDER, IMPINGEMENT SYNDROME OF RIGHT SHOULDER  | SURGERY-ORTHOPEDIC                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps | SUPERIOR GLENOID LABRUM LESION LT SHOULDER INIT  | SURGERY-ORTHOPEDIC                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps | UNS ROT CUFF TEAR/RUPT LT SHLDR NOT SPEC TRAUMAT, IMPINGEMENT SYNDROME OF LEFT SHOULDER, BICIPITAL TENDINITIS LEFT SHOULDER  | SURGERY-ORTHOPEDIC                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| Tenodesis of long tendon of biceps | UNS ROT CUFF TEAR/RUPT RT SHLDR NOT SPEC TRAUMAT   | SURGERY-ORTHOPEDIC                     | 2                  |                  |                 |  |                          |                        |                      |                 |
| TENSION BASED SCOLIOSIS ORTH       | ADOLESCENT IDIOPATHIC SCOLIOSIS, THORACIC REGION   | Chiropractic                           |                    | 1                | 1               |  |                          |                        |                      |                 |
| TESTIM 50 MG (1%) GEL (GRAM)       |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE                       | Testicular hypofunction  | Urology                                |                    |                  |                 |  |                          | 1                      |                      |                 |
| TESTOSTERONE 1.25G-1.62 GEL PACKET |  | Other                                  | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| TESTOSTERONE 10 MG (2%) GEL MD PMP |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |
| TESTOSTERONE 12.5/1.25G GEL MD PMP |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE 2.5G-1.62% GEL PACKET |  | Other                                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE 20.25/1.25 GEL MD PMP |  | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| TESTOSTERONE 20.25/1.25 GEL MD PMP |  | Other                                  | 11                 | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE 20.25/1.25 GEL MD PMP |  | PCP/Pediatrician                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE 25MG(1%) GEL PACKET   |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE 30MG/1.5ML SOL MD PMP |  | Other                                  | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE 30MG/1.5ML SOL MD PMP |  | Urology                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE 50 MG (1%) GEL (GRAM) |  | Other                                  | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE 50 MG (1%) GEL PACKET |  | Other                                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| TESTOSTERONE PELLET 75 MG          | TESTICULAR HYPOFUNCTION  | Urology                                | 2                  |                  |                 |  |                          |                        |                      |                 |
| THAWING CRYOPRESERVED OOCYTE       | OTHER OVARIAN DYSFUNCTION  | Reproductive Endocrinology/Infertility | 1                  |                  |                 |  |                          |                        |                      |                 |
| THER CGM RECEIVER/MONITOR          | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA  | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| THER CGM SUPPLY ALLOWANCE          | TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA  | Family Medicine                        | 4                  |                  |                 |  |                          |                        |                      |                 |
| THER CGM SUPPLY ALLOWANCE          | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS   | Endocrinology And Metabolism           |                    | 1                | 1               |  |                          |                        |                      |                 |
| THER CGM SUPPLY ALLOWANCE          | TYPE 1 DIABETES MELLITUS WITHOUT COMPLICATIONS   | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| THER CGM SUPPLY ALLOWANCE          | TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS   | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| THERAPEUTIC ACTIVITIES             | PAIN IN RIGHT HIP  | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| THERAPEUTIC ACTIVITIES             | PRESENCE OF LEFT ARTIFICIAL KNEE JOINT   | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| THERAPEUTIC EXERCISES              | PAIN IN RIGHT HIP  | Family Medicine                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| THERAPEUTIC EXERCISES              | PRESENCE OF LEFT ARTIFICIAL KNEE JOINT   | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---------------------------------|--|----------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| THIOLA EC 300 MG TABLET DR      |  | Other                      |                    | 1                | 1               |  |                          |                        |                      |                 |
| THORACOSCOPY LYMPH NODE EXC     | MALIGNANT NEOPLASM OF UNSP PART OF LEFT BRONCHUS OR LUNG     | Surgery, Thoracic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| THORACOSCOPY REMOVE SEGMENT     | SOLITARY PULMONARY NODULE                                    | Surgery, Thoracic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| THORACOSCOPY W/ TH NRV EXC      | PRIMARY FOCAL HYPERHIDROSIS, PALMS                           | Surgery, General           | 1                  |                  |                 |  |                          |                        |                      |                 |
| THORACOSCOPY W/LOBECTOMY        | MALIGNANT NEOPLASM OF UNSP PART OF LEFT BRONCHUS OR LUNG     | Surgery, Thoracic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| THORACOSCOPY W/LOBECTOMY        | MALIGNANT NEOPLASM OF UPPER LOBE, LEFT BRONCHUS OR LUNG      | Surgery, Thoracic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| THORACOSCOPY W/WEDGE RESECT     | SOLITARY PULMONARY NODULE                                    | Surgery, Thoracic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| TIB/PER REVASC W/STENT          | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED                     | Cardiology, Interventional |                    | 1                | 1               |  |                          |                        |                      |                 |
| TIB/PER REVASC W/TLA            | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED                     | Cardiology, Interventional |                    | 1                | 1               |  |                          |                        |                      |                 |
| TIROSINT 100 MCG CAPSULE        |  | Endocrinology              |                    | 1                | 1               |  |                          |                        |                      |                 |
| TIROSINT 112 MCG CAPSULE        |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| TIROSINT 125 MCG CAPSULE        |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| TIROSINT 137 MCG CAPSULE        |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| TIROSINT 25 MCG CAPSULE         |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| TIROSINT 50 MCG CAPSULE         |  | Other                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| TIROSINT-SOL 75 MCG/ML SOLUTION |  | Oncology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TIROSINT-SOL 88 MCG/ML SOLUTION |  | Oncology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | ACQUIRED ABSENCE OF BILATERAL BREASTS AND NIPPLES            | Surgery, Plastic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | GENETIC SUSCEPTIBILITY TO MALIGNANT NEOPLASM OF BREAST       | Surgery, Plastic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIG NEOPLASM OF LOWER-OUTER QUADRANT OF LEFT FEMALE BREAST | Surgery, Plastic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIG NEOPLASM OF UPPER-OUTER QUADRANT OF LEFT FEMALE BREAST | Surgery, Plastic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIG NEOPLM OF UPPER-INNER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic           | 2                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIG NEOPLM OF UPPER-OUTER QUADRANT OF RIGHT FEMALE BREAST  | Surgery, Plastic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT FEMALE BREAST     | Surgery, Plastic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST       | Surgery, Plastic           | 2                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST | Surgery, General           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIGNANT NEOPLASM OF UNSP SITE OF UNSPECIFIED FEMALE BREAST | Surgery, Plastic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, Plastic           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| TISS XPNDR PLMT BRST RCNSTJ     | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST             | Surgery, Plastic           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TLH UTERUS 250 G OR LESS        | LEIOMYOMA OF UTERUS, UNSPECIFIED                             | Obstetrics/Gynecology      |                    | 1                | 1               |  |                          |                        |                      |                 |

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|---------------------------------|---|-----------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| TLH W/T/O UTERUS OVER 250 G     | LEIOMYOMA OF UTERUS, UNSPECIFIED                            | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOBI PODHALER 28 MG CAP W/DEV   |   | Other                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| TOBRAMYCIN 300 MG/5ML AMPUL-NEB |   | Other                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOBRAMYCIN 300 MG/5ML AMPUL-NEB |   | Pulmonology           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOBRAMYCIN SULFATE INJECTION    | BRONCHIECTASIS WITH (ACUTE) EXACERBATION                    | Pulmonary Disease     | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOCILIZUMAB INJECTION           | JUVENILE RHEUMATOID ARTHRITIS W SYSTEMIC ONSET, RIGHT KNEE  | Internal Medicine     | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT 1NTRSPC     | CERVICAL DISC DISORDER AT C6-C7 LEVEL WITH MYELOPATHY       | Surgery, Neurological | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT 1NTRSPC     | CERVICAL DISC DISORDER AT C6-C7 LEVEL WITH RADICULOPATHY    | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT 1NTRSPC     | OSTEOPHYTE, VERTEBRAE                                       | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT 1NTRSPC     | OTHER CERVICAL DISC DISPLACEMENT, UNSP CERVICAL REGION      | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT 1NTRSPC     | RADICULOPATHY, CERVICAL REGION                              | Surgery, Orthopedic   |                    | 1                | 1               |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT 1NTRSPC     | TRAUMATIC SPONDYLOPATHY, CERVICAL REGION                    | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT 2ND LVL     | OSTEOPHYTE, VERTEBRAE                                       | Surgery, Neurological |                    | 1                | 1               |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT 2ND LVL     | OTHER CERVICAL DISC DISPLACEMENT, UNSP CERVICAL REGION      | Surgery, Orthopedic   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOT DISC ARTHRP ANT LUMBAR      | RADICULOPATHY, LUMBOSACRAL REGION                           | Family Medicine       |                    | 1                | 1               |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | ABNORMAL UTERINE AND VAGINAL BLEEDING, UNSPECIFIED          | Gynecologic Oncology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | EXCESSIVE AND FREQUENT MENSTRUATION WITH IRREGULAR CYCLE    | Obstetrics/Gynecology | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | EXCESSIVE AND FREQUENT MENSTRUATION WITH REGULAR CYCLE      | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | INTRA-ABD AND PELVIC SWELLING, MASS AND LUMP, UNSP SITE     | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | INTRAMURAL LEIOMYOMA OF UTERUS                              | Gynecology (No OB)    | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | INTRAMURAL LEIOMYOMA OF UTERUS                              | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | LEIOMYOMA OF UTERUS, UNSPECIFIED                            | Obstetrics/Gynecology | 2                  |                  |                 |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | OTH NONINFLAMMATORY DISORD OF OVARY, FALLOP AND BROAD LIGMT | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | OTHER INTRA-ABDOMINAL AND PELVIC SWELLING, MASS AND LUMP    | Gynecologic Oncology  | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOTAL HYSTERECTOMY              | PELVIC AND PERINEAL PAIN                                    | Obstetrics/Gynecology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TOVIAZ 4 MG TAB ER 24H          |   | Other                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| TPRNL PLMT BIODEGRDABL MATRL    | MALIGNANT NEOPLASM OF PROSTATE                              | Radiation Oncology    | 1                  |                  |                 |  |                          |                        |                      |                 |

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|-----------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| TRACH/LARYN TUBE NON-CUFFED | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRACH/LARYN TUBE NON-CUFFED | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRACHEOSTOMY CLEANING BRUSH | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRACHEOSTOMY CLEANING BRUSH | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRACHEOSTOMY SHOWER PROTECT | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRACHEOSTOMY SHOWER PROTECT | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRACHEOSTOMY TUBE COLLAR    | MALIGNANT NEOPLASM OF HEAD, FACE AND NECK                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRACHEOSTOMY TUBE COLLAR    | MALIGNANT NEOPLASM OF LARYNX, UNSPECIFIED                  | Otolaryngology (Ear, Nose, And Throat) | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRADJENTA 5 MG TABLET       |  | Endocrinology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRADJENTA 5 MG TABLET       |  | Other                                  | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| TRADJENTA 5 MG TABLET       |  | PCP/Pediatrician                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSAB ESOPH HIAT HERN RPR | MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES             | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSCATH CLOSURE OF ASD    | ATRIAL SEPTAL DEFECT                                       | Cardiology, Interventional             | 2                  |                  |                 |  |                          |                        |                      |                 |
| TRANSCATH OCCLUSION CNS     | OTHER MALFORMATIONS OF CEREBRAL VESSELS                    | Radiology, Diagnostic                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSCATH STENT CCA W/EPS   | CEREBRAL ANEURYSM, NONRUPTURED                             | Surgery, Neurological                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRANSCATH STENT CCA W/EPS   | OCCLUSION AND STENOSIS OF RIGHT CAROTID ARTERY             | Surgery, Vascular                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSCATH STENT CCA W/O EPS | CEREBRAL ANEURYSM, NONRUPTURED                             | Surgery, Neurological                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRANSLUM DIL EYE CANAL      | COMBINED FORMS OF AGE-RELATED CATARACT, LEFT EYE           | Ophthalmology                          |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| TRANSLUM DIL EYE CANAL      | PRIMARY OPEN-ANGLE GLAUCOMA, RIGHT EYE, MILD STAGE         | Ophthalmology                          | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPL ALLOGRAFT PANCREAS  | TYPE 2 DIABETES MELLITUS W DIABETIC CHRONIC KIDNEY DISEASE | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF HEART    | CARDIOMYOPATHY, UNSPECIFIED                                | Cardiovascular Disease                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF HEART    | CARDIOMYOPATHY, UNSPECIFIED                                | Hospital                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF HEART    | HEART FAILURE, UNSPECIFIED                                 | Internal Medicine                      | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description                    | Diagnosis Code Description                                   | Provider Specialty                               | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|---|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| TRANSPLANTATION OF KIDNEY                     | ACUTE KIDNEY FAILURE, UNSPECIFIED                            | Nephrology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF KIDNEY                     | CHRONIC KIDNEY DISEASE, UNSPECIFIED                          | Nephrology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF KIDNEY                     | CHRONIC KIDNEY DISEASE, UNSPECIFIED                          | Surgery, General                                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF KIDNEY                     | END STAGE RENAL DISEASE                                      | Hospital   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF KIDNEY                     | END STAGE RENAL DISEASE                                      | Nephrology                                       | 5                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF KIDNEY                     | END STAGE RENAL DISEASE                                      | Surgery, General                                 | 12                 |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF KIDNEY                     | RECUR AND PERST HEMATUR W DIFFUS MESANGIAL PROLIF GLOMRLNEPH | Surgery, General                                 | 2                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF LIVER                      | ALCOHOLIC CIRRHOSIS OF LIVER WITH ASCITES                    | Hepatology                                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLANTATION OF LIVER                      | ALCOHOLIC CIRRHOSIS OF LIVER WITH ASCITES                    | Surgery, General                                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT ALLO HCT/DONOR                       | ACUTE LEUKEMIA OF UNSPECIFIED CELL TYPE, IN REMISSION        | Hematology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT ALLO HCT/DONOR                       | ACUTE LYMPHOBLASTIC LEUKEMIA NOT HAVING ACHIEVED REMISSION   | Hematology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT ALLO HCT/DONOR                       | ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION                    | Hematology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT ALLO HCT/DONOR                       | ACUTE MYELOBLASTIC LEUKEMIA, NOT HAVING ACHIEVED REMISSION   | Hematology                                       | 9                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT ALLO HCT/DONOR                       | MYELOFIBROSIS  | Hematology                                       | 4                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT ALLO HCT/DONOR                       | MYELOID SARCOMA, IN REMISSION                                | Hematology                                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT ALLO LYMPHOCYTES                     | ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION                    | Hematology                                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT AUTOL HCT/DONOR                      | DIFFUSE LARGE B-CELL LYMPHOMA, UNSPECIFIED SITE              | Hematology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT AUTOL HCT/DONOR                      | DIFFUSE LARGE B-CELL LYMPHOMA, UNSPECIFIED SITE              | Hospital   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT AUTOL HCT/DONOR                      | MANTLE CELL LYMPHOMA, UNSPECIFIED SITE                       | Oncology   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT AUTOL HCT/DONOR                      | MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION               | Hematology                                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRANSPLT AUTOL HCT/DONOR                      | MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION               | Oncology   | 4                  |                  |                 |  |                          |                        |                      |                 |
| TRELEGY ELLIPTA 100-62.5 BLST W/DEV           |  | Other  | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| TRELEGY ELLIPTA 100-62.5 BLST W/DEV           |  | PCP/Pediatrician                                 | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| TRELEGY ELLIPTA 200-62.5 BLST W/DEV           |  | PCP/Pediatrician                                 |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| TREMFYA 100 MG/ML AUTO INJCT                  |  | Dermatology                                      | 3                  |                  |                 |  |                          |                        |                      |                 |
| TREMFYA 100 MG/ML AUTO INJCT                  |  | Other  | 10                 |                  |                 |  |                          |                        |                      |                 |
| TREMFYA 100 MG/ML AUTO INJCT                  |  | Physician Assistant                              | 2                  |                  |                 |  |                          |                        |                      |                 |
| TREMFYA 100 MG/ML AUTO INJCT                  |  | Rheumatology                                     | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| TREMFYA 100 MG/ML SYRINGE                     |  | Other  | 5                  |                  |                 |  |                          |                        |                      |                 |
| TREPROSTINIL INJECTION                        | PRIMARY PULMONARY HYPERTENSION                               | Advanced Heart Failure And Transplant Cardiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRESIBA FLEXTOUCH U-100 100/ML (3) INSULN PEN |  | Endocrinology                                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRESIBA FLEXTOUCH U-200 200/ML (3) INSULN PEN |  | Other  | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRESIBA FLEXTOUCH U-200 200/ML (3) INSULN PEN |  | PCP/Pediatrician                                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRETINOIN 0.025 % CREAM(GM)                   |  | Dermatology                                      | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| TRETINOIN 0.025 % CREAM(GM)                   |  | Other  | 11                 | 1                | 1               |  |                          |                        |                      |                 |
| TRETINOIN 0.025 % CREAM(GM)                   |  | PCP/Pediatrician                                 |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRETINOIN 0.05 % CREAM(GM)                    |  | Dermatology                                      | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRETINOIN 0.05 % CREAM(GM)                    |  | Other  | 6                  | 1                | 1               |  |                          |                        |                      |                 |

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|---|--|--------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| TRETINOIN 0.05 % GEL (GRAM)             |  | Dermatology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRETINOIN 0.05 % GEL (GRAM)             |  | Other                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRETINOIN 0.1 % CREAM(GM)               |  | Other                    | 5                  |                  |                 |  |                          |                        |                      |                 |
| TRETINOIN 0.1 % CREAM(GM)               |  | PCP/Pediatrician         | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| TRETINOIN MICROSPHERE 0.04 % GEL (GRAM) |  | Other                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRGT GEN SEQ ALYS PNL 311+              | MALIGNANT NEOPLASM OF PROSTATE                           | Hematology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRGT GEN SEQ ALYS PNL 311+              | MALIGNANT NEOPLASM OF UNSP SITE OF RIGHT FEMALE BREAST   | Oncology                 | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRGT GEN SEQ ALYS PNL 55-74             | MALIGNANT NEOPLASM OF ENDOMETRIUM                        | Hematology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRGT GEN SEQ ALYS PNL 55-74             | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG | Hematology               |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRGT GEN SEQ DNA 324 GENES              | MALIGNANT NEOPLASM OF PROSTATE                           | Hematology               | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRGT GEN SEQ DNA 324 GENES              | MALIGNANT NEOPLASM OF PROSTATE                           | Urology                  |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRIJARDY XR 12.5-2.5MG TAB BP 24H       |  | Other                    | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| TRIKAFTA 100-50-75 TABLET SEQ           |  | Other                    | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| TRIKAFTA 100-50-75 TABLET SEQ           |  | Pediatric Pulmonology    | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRINTELLIX                              | Major depressive disorder, single episode, unspecified   | Psychiatry               |                    |                  |                 |  |                          |                        | 1                    |                 |
| TRINTELLIX 10 MG TABLET                 |  | Internal Medicine        | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRINTELLIX 10 MG TABLET                 |  | Other                    | 12                 | 2                | 2               |  |                          |                        |                      |                 |
| TRINTELLIX 10 MG TABLET                 |  | PCP/Pediatrician         |                    | 2                | 2               |  |                          |                        |                      |                 |
| TRINTELLIX 20 MG TABLET                 |  | Internal Medicine        | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRINTELLIX 20 MG TABLET                 |  | Neurology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRINTELLIX 20 MG TABLET                 |  | Other                    | 9                  |                  |                 |  |                          |                        |                      |                 |
| TRINTELLIX 5 MG TABLET                  |  | Other                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRINTELLIX 5 MG TABLET                  |  | PCP/Pediatrician         | 3                  |                  |                 |  |                          |                        |                      |                 |
| TRIVISC 10 MG/ML SYRINGE                |  | Other                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRLUML BALO ANGIOP 1ST VEIN             | COMPRESSION OF VEIN                                      | Cardiovascular Disease   | 2                  |                  |                 |  |                          |                        |                      |                 |
| TRLUML BALO ANGIOP ADDL VEIN            | COMPRESSION OF VEIN                                      | Cardiovascular Disease   | 2                  |                  |                 |  |                          |                        |                      |                 |
| TROKENDI XR 100 MG CAP ER 24H           |  | Other                    | 1                  |                  |                 |  |                          |                        |                      |                 |
| TROKENDI XR 100 MG CAP ER 24H           |  | Psychiatry               |                    | 2                | 2               |  |                          |                        |                      |                 |
| TROKENDI XR 200 MG CAP ER 24H           |  | Behavioral Health        | 1                  |                  |                 |  |                          |                        |                      |                 |
| TROKENDI XR 200 MG CAP ER 24H           |  | Other                    |                    | 3                | 3               |  |                          |                        |                      |                 |
| TROKENDI XR 25 MG CAP ER 24H            |  | Other                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| TROKENDI XR 50 MG CAP ER 24H            |  | Other                    | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| TRUE METRIX GLUCOSE TEST STRIP STRIP    |  | Other                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRULANCE                                | Other  | Other                    |                    |                  |                 |  |                          |                        |                      | 1               |
| TRULANCE 3 MG TABLET                    |  | Gastroenterology         |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRULANCE 3 MG TABLET                    |  | Other                    | 6                  | 8                | 7               | 1                                      |                          |                        |                      |                 |
| TRULANCE 3 MG TABLET                    |  | PCP/Pediatrician         |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRULICITY 0.75MG/0.5 PEN INJCTR         |  | Other                    | 9                  | 4                | 4               |  |                          |                        |                      |                 |
| TRULICITY 0.75MG/0.5 PEN INJCTR         |  | PCP/Pediatrician         | 2                  |                  |                 |  |                          |                        |                      |                 |
| TRULICITY 0.75MG/0.5 PEN INJCTR         |  | Physiatry/Rehabilitative | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRULICITY 1.5 MG/0.5 PEN INJCTR         |  | Endocrinology            | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| TRULICITY 1.5 MG/0.5 PEN INJCTR         |  | Other                    | 10                 |                  |                 |  |                          |                        |                      |                 |

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|--|--|---------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| TRULICITY 1.5 MG/0.5 PEN INJCTR                        |  | PCP/Pediatrician          | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| TRULICITY 3 MG/0.5ML PEN INJCTR                        |  | Other                     | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| TRULICITY 4.5 MG/0.5 PEN INJCTR                        |  | Other                     | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| TRURL DSTRJ PRST8 TISS RF WV                           | BENIGN PROSTATIC HYPERPLASIA WITH LOWER URINARY TRACT SYMP   | Urology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| TRURL DSTRJ PRST8 TISS RF WV                           | STRESS INCONTINENCE (FEMALE) (MALE)                          | Urology                   |                    | 1                | 1               |  |                          |                        |                      |                 |
| TRUVADA 200-300 MG TABLET                              |  | Other                     |                    | 9                | 9               |  |                          |                        |                      |                 |
| TRUVADA 200-300 MG TABLET                              |  | PCP/Pediatrician          |                    | 1                | 1               |  |                          |                        |                      |                 |
| TTE W/DOPPLER COMPLETE                                 | ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS | Internal Medicine         |                    | 1                | 1               |  |                          |                        |                      |                 |
| TX L/R ATRIAL FIB ADDL                                 | LONGSTANDING PERSISTENT ATRIAL FIBRILLATION                  | Internal Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| TX L/R ATRIAL FIB ADDL                                 | OTHER PERSISTENT ATRIAL FIBRILLATION                         | Cardiac Electrophysiology | 3                  |                  |                 |  |                          |                        |                      |                 |
| TX L/R ATRIAL FIB ADDL                                 | PAROXYSMAL ATRIAL FIBRILLATION                               | Cardiac Electrophysiology | 1                  |                  |                 |  |                          |                        |                      |                 |
| TX L/R ATRIAL FIB ADDL                                 | PAROXYSMAL ATRIAL FIBRILLATION                               | Cardiovascular Disease    | 1                  |                  |                 |  |                          |                        |                      |                 |
| TX L/R ATRIAL FIB ADDL                                 | TYPICAL ATRIAL FLUTTER                                       | Cardiac Electrophysiology |                    | 1                | 1               |  |                          |                        |                      |                 |
| TYMLOS 80MCG/DOSE PEN INJCTR                           |  | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| TYRVAYA 0.03/SPRAY SPRAY METP                          |  | Other                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| TYVASO REFILL KIT 1.74MG/2.9 AMPUL-NEB                 |  | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| UBRELVY 100 MG TABLET                                  |  | Neurology                 | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| UBRELVY 100 MG TABLET                                  |  | Other                     | 17                 | 10               | 8               | 2                                      |                          |                        |                      |                 |
| UBRELVY 100 MG TABLET                                  |  | Pain Management           | 1                  |                  |                 |  |                          |                        |                      |                 |
| UBRELVY 100 MG TABLET                                  |  | PCP/Pediatrician          |                    | 1                | 1               |  |                          |                        |                      |                 |
| UBRELVY 50 MG TABLET                                   |  | Neurology                 | 7                  | 5                | 5               |  |                          |                        |                      |                 |
| UBRELVY 50 MG TABLET                                   |  | Other                     | 18                 | 4                | 4               |  |                          |                        |                      |                 |
| UBRELVY 50 MG TABLET                                   |  | PCP/Pediatrician          | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| UCERIS 2 MG FOAM/APPL                                  |  | Other                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| ULTRALIGHTWEIGHT WHEELCHAIR                            | LUMBAR SPINA BIFIDA WITH HYDROCEPHALUS                       | Family Medicine           | 1                  |                  |                 |  |                          |                        |                      |                 |
| ULTRALIGHTWEIGHT WHEELCHAIR                            | PERIPHERAL VASCULAR DISEASE, UNSPECIFIED                     | Physical Medicine         | 1                  |                  |                 |  |                          |                        |                      |                 |
| ULTRAVATE 0.05 % LOTION                                |  | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNCLASSIFIED BIOLOGICS                                 | OTH ORGAN OR SYSTEM INVOLV IN SYSTEMIC LUPUS ERYTHEMATOSUS   | Rheumatology              | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNITHROID 125 MCG TABLET                               |  | Other                     |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNITHROID 137 MCG TABLET                               |  | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNITHROID 150 MCG TABLET                               |  | Other                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| Unlisted CT procedure (eg, diagnostic, interventional) | TRIGEMINAL NEURALGIA   | NEUROSURGERY              | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | ACUTE LYMPHOBLASTIC LEUKEMIA NOT HAVING ACHIEVED REMISSION   | Hematology                | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | ACUTE LYMPHOBLASTIC LEUKEMIA, IN REMISSION                   | Hematology                | 2                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | CUTANEOUS MASTOCYTOSIS                                       | Pediatrics                |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | ENCOUNTER FOR ASSISTED REPRODCTV FERTILITY PROCEDURE CYCLE   | Obstetrics/Gynecology     |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | ENCOUNTER FOR OTH GENETIC TESTING OF FEMALE FOR PRO MGMT     | Genetics                  |                    | 1                | 1               |  |                          |                        |                      |                 |



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|------------------------------|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| UNLISTED MOLECULAR PATHOLOGY | ENCOUNTER FOR PROCREATIVE GENETIC COUNSELING                 | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | ESTROGEN RECEPTOR NEGATIVE STATUS [ER-]                      | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | ESTROGEN RECEPTOR NEGATIVE STATUS [ER-]                      | Surgery, General                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | FAMILY HISTORY OF CARRIER OF GENETIC DISEASE                 | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | FAMILY HISTORY OF MALIG NEOPLASM OF TRACHEA, BRONC AND LUNG  | Gynecologic Oncology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST               | Gynecology (No OB)                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST               | Hematology                             |                    | 2                | 2               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST               | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST               | Surgery, General                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | FAMILY HISTORY OF MALIGNANT NEOPLASM OF PROSTATE             | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | GENERALIZED IDIOPATHIC EPILEPSY, INTRACTABLE, W/O STAT EPI   | Neurology                              |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | GENETIC CARRIER OF OTHER DISEASE                             | Reproductive Endocrinology/Infertility | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MALIGNANT NEOPLASM OF ENDOMETRIUM                            | Hematology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MALIGNANT NEOPLASM OF PROSTATE                               | Hematology                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MALIGNANT NEOPLASM OF RIGHT MAIN BRONCHUS                    | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MALIGNANT NEOPLASM OF UNSP PART OF RIGHT BRONCHUS OR LUNG    | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG     | Hematology                             | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MALIGNANT NEOPLASM OF UNSPECIFIED SITE OF LEFT FEMALE BREAST | Surgery, General                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MATERNAL CARE FOR CHROMOSOMAL ABNORMALITY IN FETUS, UNSP     | Genetics                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | MATERNAL CARE FOR HEREDITARY DISEASE IN FETUS, UNSP          | Genetics                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | NEUROFIBROMATOSIS, TYPE 1                                    | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | OTH SYMPTOMS AND SIGNS INVOLVING THE MUSCULOSKELETAL SYSTEM  | Pediatric Nurse Practitioner           | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | PECTUS EXCAVATUM   | Pediatrics                             |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | PERSONAL HISTORY OF COLONIC POLYPS                           | Gastroenterology                       |                    | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | PERSONAL HISTORY OF COLONIC POLYPS                           | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY | PERSONAL HISTORY OF IN-SITU NEOPLASM OF BREAST               | Obstetrics/Gynecology                  |                    | 1                | 1               |  |                          |                        |                      |                 |

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|--|--|--|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| UNLISTED MOLECULAR PATHOLOGY                           | PERSONAL HISTORY OF IN-SITU NEOPLASM OF BREAST                                     | Surgery, General                       | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                                   | Hematology                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                                   | Oncology                               | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST                                   | Surgery, General                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | PERSONAL HISTORY OF MALIGNANT NEOPLASM OF LARGE INTESTINE                          | Obstetrics/Gynecology                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED MOLECULAR PATHOLOGY                           | PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF KIDNEY                             | Oncology                               |                    | 1                | 1               |  |                          |                        |                      |                 |
| Unlisted MR procedure (eg, diagnostic, interventional) | OTHER CHRONIC OSTEOMYELITIS UNSPECIFIED SITE                                       | RHEUMATOLOGY                           |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| Unlisted MR procedure (eg, diagnostic, interventional) | OTHER CHRONIC OSTEOMYELITIS UNSPECIFIED SITE, OTHER LONG TERM CURRENT DRUG THERAPY | RHEUMATOLOGY                           | 1                  |                  |                 |  |                          |                        |                      |                 |
| UNLISTED REPROD MED LAB PROC                           | OTHER OVARIAN DYSFUNCTION  | Reproductive Endocrinology/Infertility |                    | 1                | 1               |  |                          |                        |                      |                 |
| UPPER ARM/ELBOW SURGERY                                | DISP FX OF HEAD OF LEFT RADIUS, INIT FOR CLOS FX                                   | Surgery, Orthopedic                    |                    | 1                | 1               |  |                          |                        |                      |                 |
| UROGRAPHY IV +-KUB TOMOG                               | CALCULUS OF KIDNEY   | Urology                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| UROGRAPHY RTRGR +-KUB                                  | CALCULUS OF KIDNEY   | Urology                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| US TRANSRECTAL   | ELEVATED PROSTATE SPECIFIC ANTIGEN [PSA]   | Urology                                |                    | 1                | 1               |  |                          |                        |                      |                 |
| USTEKINUMAB SUB CU INJ, 1 MG                           | CROHN'S DISEASE OF SMALL INTESTINE WITH UNSP COMPLICATIONS                         | Gastroenterology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| USTEKINUMAB, IV INJECT, 1 MG                           | CROHN'S DISEASE OF BOTH SMALL AND LG INT W OTH COMPLICATION                        | Gastroenterology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| USTEKINUMAB, IV INJECT, 1 MG                           | CROHN'S DISEASE OF BOTH SMALL AND LG INT W OTH COMPLICATION                        | Pediatrics                             | 1                  |                  |                 |  |                          |                        |                      |                 |
| USTEKINUMAB, IV INJECT, 1 MG                           | CROHN'S DISEASE OF BOTH SMALL AND LG INT W/O COMPLICATIONS                         | Family Medicine                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| USTEKINUMAB, IV INJECT, 1 MG                           | CROHN'S DISEASE OF LARGE INTESTINE WITHOUT COMPLICATIONS                           | Gastroenterology                       | 1                  |                  |                 |  |                          |                        |                      |                 |
| USTEKINUMAB, IV INJECT, 1 MG                           | CROHN'S DISEASE OF SMALL INTESTINE WITH UNSP COMPLICATIONS                         | Gastroenterology                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| USTEKINUMAB, IV INJECT, 1 MG                           | CROHN'S DISEASE OF SMALL INTESTINE WITHOUT COMPLICATIONS                           | Infectious Disease                     | 1                  |                  |                 |  |                          |                        |                      |                 |
| USTEKINUMAB, IV INJECT, 1 MG                           | CROHN'S DISEASE, UNSPECIFIED, WITHOUT COMPLICATIONS                                | Gastroenterology                       | 2                  |                  |                 |  |                          |                        |                      |                 |
| VALTOCO 10MG/SPRAY SPRAY                               |  | Other                                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| VASC EMBOLIZE/OCCLUDE BLEED                            | LEIOMYOMA OF UTERUS, UNSPECIFIED   | Radiology, Diagnostic                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| VASC EMBOLIZE/OCCLUDE VENOUS                           | LEIOMYOMA OF UTERUS, UNSPECIFIED   | Radiology, Diagnostic                  | 1                  |                  |                 |  |                          |                        |                      |                 |
| VASC EMBOLIZE/OCCLUDE VENOUS                           | PELVIC VARICES   | Vascular & Interventional Radiology    |                    | 1                | 1               |  |                          |                        |                      |                 |
| VASCEPA 0.5 GRAM CAPSULE                               |  | Other                                  | 2                  |                  |                 |  |                          |                        |                      |                 |

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| Procedure Code Description           | Diagnosis Code Description                                  | Provider Specialty | Total UM Approvals | Total UM Denials | Med Nec Denials | Experimental & Investigational Denials | Network Adequacy Denials | Total Appeals Approved | Total Appeals Denied | Approved by IRO |
|--------------------------------------|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| VASCEPA 1 G CAPSULE                  |   | Cardiology         | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| VASCEPA 1 G CAPSULE                  |   | Family Medicine    | 1                  |                  |                 |  |                          |                        |                      |                 |
| VASCEPA 1 G CAPSULE                  |   | Other              | 31                 | 9                | 9               |  |                          |                        |                      |                 |
| VASCEPA 1 G CAPSULE                  |   | PCP/Pediatrician   | 8                  | 1                | 1               |  |                          |                        |                      |                 |
| VASCULAR SURGERY PROCEDURE           | VARICOSE VEINS OF BILATERAL LOWER EXTREMITIES WITH PAIN     | Surgery, Vascular  | 2                  |                  |                 |  |                          |                        |                      |                 |
| VEEG EA 12-26HR CONT MNTR            | EPILEPSY, UNSP, NOT INTRACTABLE, WITHOUT STATUS EPILEPTICUS | Neurology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| VEEG EA 12-26HR CONT MNTR            | UNSPECIFIED CONVULSIONS                                     | Neurology          |                    | 1                | 1               |  |                          |                        |                      |                 |
| VELPHORO 500MG IRON TAB CHEW         |   | Nephrology         |                    | 1                | 1               |  |                          |                        |                      |                 |
| VENCLEXTA 10 MG TABLET               |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| VENCLEXTA 100 MG TABLET              |   | Oncology/Radiation | 2                  |                  |                 |  |                          |                        |                      |                 |
| VENCLEXTA 50 MG TABLET               |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| VENLAFAXINE HCL ER 150 MG CAP.SR 24H |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| VENTOLIN HFA 90 MCG HFA AER AD       |   | Other              |                    | 2                | 2               |  |                          |                        |                      |                 |
| VERZENIO 150 MG TABLET               |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| VICTOZA 2-PAK 0.6 MG/0.1 PEN INJCTR  |   | Other              | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| VICTOZA 3-PAK 0.6 MG/0.1 PEN INJCTR  |   | Endocrinology      | 3                  |                  |                 |  |                          |                        |                      |                 |
| VICTOZA 3-PAK 0.6 MG/0.1 PEN INJCTR  |   | Other              | 4                  | 1                | 1               |  |                          |                        |                      |                 |
| VICTOZA 3-PAK 0.6 MG/0.1 PEN INJCTR  |   | PCP/Pediatrician   | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| VIIBRYD                              | Anxiety and Depression                                      | Family Medicine    |                    |                  |                 |  |                          | 1                      |                      |                 |
| VIIBRYD                              | Other   | Psychiatry         |                    |                  |                 |  |                          |                        | 1                    |                 |
| VIIBRYD 10 MG TABLET                 |   | Other              | 4                  |                  |                 |  |                          |                        |                      |                 |
| VIIBRYD 20 MG TABLET                 |   | Other              | 6                  | 3                | 3               |  |                          |                        |                      |                 |
| VIIBRYD 20 MG TABLET                 |   | PCP/Pediatrician   |                    | 1                | 1               |  |                          |                        |                      |                 |
| VIIBRYD 40 MG TABLET                 |   | Other              | 7                  | 2                | 2               |  |                          |                        |                      |                 |
| VIMPAT 150 MG TABLET                 |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| VIMPAT 200 MG TABLET                 |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| VIVELLE-DOT .075MG/24H PATCH TDSW    |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| VIVITROL 380 MG SUS SR REC           |   | Other              | 3                  | 1                | 1               |  |                          |                        |                      |                 |
| VORICONAZOLE 200 MG TABLET           |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| VOSEVI 400-100 MG TABLET             |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| VRAYLAR 1.5 MG CAPSULE               |   | Other              | 7                  | 4                | 4               |  |                          |                        |                      |                 |
| VRAYLAR 1.5 MG CAPSULE               |   | PCP/Pediatrician   | 1                  |                  |                 |  |                          |                        |                      |                 |
| VRAYLAR 3 MG CAPSULE                 |   | Other              | 3                  |                  |                 |  |                          |                        |                      |                 |
| VRAYLAR 4.5 MG CAPSULE               |   | Other              | 2                  |                  |                 |  |                          |                        |                      |                 |
| VUMERITY                             | MULTIPLE SCLEROSIS  | Neurology          |                    |                  |                 |  |                          | 1                      |                      |                 |
| VUMERITY                             | Multiple sclerosis  | Surgery, Thoracic  |                    |                  |                 |  |                          |                        | 1                    |                 |
| VUMERITY 231 MG CAPSULE DR           |   | Neurology          | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| VUMERITY 231 MG CAPSULE DR           |   | Other              | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| VYVANSE                              | ADHD  | Internal Medicine  |                    |                  |                 |  |                          |                        |                      | 1               |
| VYVANSE 10 MG CAPSULE                |   | Other              | 2                  | 9                | 9               |  |                          |                        |                      |                 |
| VYVANSE 10 MG TAB CHEW               |   | Other              | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| VYVANSE 20 MG CAPSULE                |   | Other              | 13                 | 7                | 7               |  |                          |                        |                      |                 |
| VYVANSE 20 MG CAPSULE                |   | PCP/Pediatrician   | 3                  |                  |                 |  |                          |                        |                      |                 |
| VYVANSE 20 MG TAB CHEW               |   | Other              | 2                  |                  |                 |  |                          |                        |                      |                 |
| VYVANSE 30 MG CAPSULE                |   | Neurology          | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| VYVANSE 30 MG CAPSULE                |   | Other              | 17                 | 13               | 13              |  |                          |                        |                      |                 |

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|---------------------------------|--|------------------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| VYVANSE 30 MG CAPSULE           |  | PCP/Pediatrician             | 3                  | 2                | 2               |  |                          |                        |                      |                 |
| VYVANSE 40 MG CAPSULE           |  | Other                        | 21                 | 2                | 2               |  |                          |                        |                      |                 |
| VYVANSE 40 MG CAPSULE           |  | PCP/Pediatrician             | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| VYVANSE 50 MG CAPSULE           |  | Other                        | 20                 | 3                | 3               |  |                          |                        |                      |                 |
| VYVANSE 50 MG CAPSULE           |  | PCP/Pediatrician             | 2                  |                  |                 |  |                          |                        |                      |                 |
| VYVANSE 60 MG CAPSULE           |  | Other                        | 10                 |                  |                 |  |                          |                        |                      |                 |
| VYVANSE 60 MG CAPSULE           |  | PCP/Pediatrician             | 2                  |                  |                 |  |                          |                        |                      |                 |
| VYVANSE 70 MG CAPSULE           |  | Other                        | 9                  | 1                | 1               |  |                          |                        |                      |                 |
| VYVANSE 70 MG CAPSULE           |  | PCP/Pediatrician             | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| VYZULTA 0.024 % DROPS           |  | General Surgery              |                    | 1                | 1               |  |                          |                        |                      |                 |
| VYZULTA 0.024 % DROPS           |  | Other                        | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| WEDGE BIOPSY OF LIVER           | SPLENOMEGALY, NOT ELSEWHERE CLASSIFIED | Surgery, General             | 1                  |                  |                 |  |                          |                        |                      |                 |
| WEGOVY 0.25MG/0.5 PEN INJCTR    |  | Endocrinology And Metabolism | 1                  |                  |                 |  |                          |                        |                      |                 |
| WEGOVY 0.25MG/0.5 PEN INJCTR    |  | Other                        | 5                  | 1                | 1               |  |                          |                        |                      |                 |
| WEGOVY 0.5MG/.5ML PEN INJCTR    |  | Other                        | 5                  |                  |                 |  |                          |                        |                      |                 |
| WEGOVY 1.7MG/0.75 PEN INJCTR    |  | Other                        | 6                  |                  |                 |  |                          |                        |                      |                 |
| WEGOVY 1MG/0.5ML PEN INJCTR     |  | Other                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| WEGOVY 2.4MG/0.75 PEN INJCTR    |  | Other                        | 2                  |                  |                 |  |                          |                        |                      |                 |
| WELLBUTRIN XL 150 MG TAB ER 24H |  | Other                        |                    | 1                | 1               |  |                          |                        |                      |                 |
| XARELTO 10 MG TABLET            |  | Oncology/Radiation           | 1                  |                  |                 |  |                          |                        |                      |                 |
| XARELTO 10 MG TABLET            |  | Other                        | 8                  | 3                | 3               |  |                          |                        |                      |                 |
| XARELTO 10 MG TABLET            |  | PCP/Pediatrician             | 1                  |                  |                 |  |                          |                        |                      |                 |
| XARELTO 10 MG TABLET            |  | Surgery, Orthopedic          | 1                  |                  |                 |  |                          |                        |                      |                 |
| XARELTO 15 MG TABLET            |  | Other                        | 4                  |                  |                 |  |                          |                        |                      |                 |
| XARELTO 15 MG TABLET            |  | PCP/Pediatrician             | 1                  |                  |                 |  |                          |                        |                      |                 |
| XARELTO 15 MG-20MG TAB DS PK    |  | Other                        | 3                  |                  |                 |  |                          |                        |                      |                 |
| XARELTO 2.5 MG TABLET           |  | Other                        | 2                  | 1                | 1               |  |                          |                        |                      |                 |
| XARELTO 20 MG TABLET            |  | Cardiology                   | 1                  |                  |                 |  |                          |                        |                      |                 |
| XARELTO 20 MG TABLET            |  | Oncology/Radiation           | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| XARELTO 20 MG TABLET            |  | Other                        | 30                 | 2                | 2               |  |                          |                        |                      |                 |
| XARELTO 20 MG TABLET            |  | PCP/Pediatrician             | 5                  |                  |                 |  |                          |                        |                      |                 |
| XARELTO 20 MG TABLET            |  | Surgery, General             |                    | 1                | 1               |  |                          |                        |                      |                 |
| XCAPSL CTRC RMVL W/O ECP        | AGE-RELATED NUCLEAR CATARACT, LEFT EYE | Ophthalmology                |                    | 1                | 1               |  |                          |                        |                      |                 |
| XELJANZ 10 MG TABLET            |  | Gastroenterology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| XELJANZ 5 MG TABLET             |  | Gastroenterology             | 1                  |                  |                 |  |                          |                        |                      |                 |
| XELJANZ 5 MG TABLET             |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| XELJANZ 5 MG TABLET             |  | Rheumatology                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| XELJANZ XR 11 MG TAB ER 24H     |  | PCP/Pediatrician             | 2                  |                  |                 |  |                          |                        |                      |                 |
| XELJANZ XR 11 MG TAB ER 24H     |  | Rheumatology                 | 3                  |                  |                 |  |                          |                        |                      |                 |
| XELPROS 0.005 % DRPS EMULS      |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| XENICAL 120 MG CAPSULE          |  | Other                        | 1                  |                  |                 |  |                          |                        |                      |                 |
| XEOMIN                          | Blepharospasm                          | Neurology                    |                    |                  |                 |  |                          |                        |                      | 1               |
| XEOMIN                          | Spasmodic torticollis                  | Neurology                    |                    |                  |                 |  |                          |                        |                      | 1               |
| XHANCE 93 MCG AER BR.ACT        |  | Other                        | 1                  | 2                | 2               |  |                          |                        |                      |                 |
| XIFAXAN 550 MG TABLET           |  | Gastroenterology             | 1                  |                  |                 |  |                          |                        |                      |                 |

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|---|---|--------------------|--------------------|------------------|-----------------|--|--------------------------|------------------------|----------------------|-----------------|
| XIFAXAN 550 MG TABLET                   |   | Other              | 3                  |                  |                 |  |                          |                        |                      |                 |
| XIFAXAN 550 MG TABLET                   |   | PCP/Pediatrician   |                    | 1                | 1               |  |                          |                        |                      |                 |
| XIGDUO XR 10-1000 MG TAB BP 24H         |   | Other              | 2                  |                  |                 |  |                          |                        |                      |                 |
| XIGDUO XR 5MG-1000MG TAB BP 24H         |   | Other              | 2                  |                  |                 |  |                          |                        |                      |                 |
| XIIDRA                                  | Dry eye syndrome of bilateral lacrimal glands               | Ophthalmology      |                    |                  |                 |  |                          |                        | 1                    |                 |
| XIIDRA 5 % DROPERETTE                   |   | Other              | 4                  | 16               | 16              |  |                          |                        |                      |                 |
| XIIDRA 5 % DROPERETTE                   |   | Rheumatology       | 1                  |                  |                 |  |                          |                        |                      |                 |
| XIMINO 90 MG CAP ER 24H                 |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| X-LINKED INTELLECTUAL DBLT              | MALIGNANT NEOPLASM OF UNSP PART OF UNSP BRONCHUS OR LUNG    | Hematology         |                    | 1                |                 | 1                                      |                          |                        |                      |                 |
| XOLAIR                                  | ASTHMA  | Pulmonology        |                    |                  |                 |  |                          | 1                      |                      |                 |
| XOLAIR                                  | Idiopathic urticaria  | Other              |                    |                  |                 |  |                          | 1                      |                      |                 |
| XOLAIR 150 MG/ML SYRINGE                |   | Allergy/Immunology | 3                  |                  |                 |  |                          |                        |                      |                 |
| XOLAIR 150 MG/ML SYRINGE                |   | Other              | 7                  | 1                | 1               |  |                          |                        |                      |                 |
| XOSPATA 40 MG TABLET                    |   | Hematology         | 1                  |                  |                 |  |                          |                        |                      |                 |
| X-RAY BILE DUCT ENDOSCOPY               | CALCULUS OF BILE DUCT W/O CHOLANGITIS OR CHOLECYST W/O OBST | Gastroenterology   | 1                  | 1                | 1               |  |                          |                        |                      |                 |
| X-RAY EXAM ENTIRE SPI 2/3 VW            | ADOLESCENT IDIOPATHIC SCOLIOSIS, THORACIC REGION            | Chiropractic       |                    | 1                | 1               |  |                          |                        |                      |                 |
| XTAMPZA ER 27 MG CAP SPR 12             |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| XTAMPZA ER 9 MG CAP SPR 12              |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| XTANDI 40 MG CAPSULE                    |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| XTANDI 40 MG CAPSULE                    |   | Urology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| XTANDI 40 MG TABLET                     |   | Urology            | 1                  |                  |                 |  |                          |                        |                      |                 |
| XTANDI 80 MG TABLET                     |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| XYOSTED 100 MG/0.5 AUTO INJCT           |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| XYOSTED 50MG/0.5ML AUTO INJCT           |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| XYOSTED 75MG/0.5ML AUTO INJCT           |   | Other              |                    | 2                | 2               |  |                          |                        |                      |                 |
| XYREM 500 MG/ML SOLUTION                |   | PCP/Pediatrician   |                    | 1                | 1               |  |                          |                        |                      |                 |
| XYWAV                                   | DAYTIME SLEEPINESS  | Sleep Medicine     |                    |                  |                 |  |                          |                        | 1                    |                 |
| XYWAV 0.5G/ML SOLUTION                  |   | PCP/Pediatrician   |                    | 1                | 1               |  |                          |                        |                      |                 |
| ZEJULA 100 MG CAPSULE                   |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| ZELNORM 6 MG TABLET                     |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| ZEMBRACE SYMTOUCH 3 MG/0.5ML PEN INJCTR |   | Neurology          |                    | 2                | 2               |  |                          |                        |                      |                 |
| ZEMBRACE SYMTOUCH 3 MG/0.5ML PEN INJCTR |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| ZENPEP 25-79-105K CAPSULE DR            |   | Other              | 2                  | 2                | 2               |  |                          |                        |                      |                 |
| ZENPEP 40-126-168 CAPSULE DR            |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| ZEPOSIA 0.23-0.92 CAP DS PK             |   | Other              | 1                  |                  |                 |  |                          |                        |                      |                 |
| ZIEXTENZO 6 MG/0.6ML SYRINGE            |   | Oncology/Radiation | 1                  |                  |                 |  |                          |                        |                      |                 |
| ZILRETTA                                | Bilateral primary osteoarthritis of knee                    | Orthopedic Surgery |                    |                  |                 |  |                          |                        | 1                    |                 |
| ZILXI 1.5 % FOAM                        |   | Dermatology        |                    | 1                | 1               |  |                          |                        |                      |                 |
| ZOLMITRIPTAN 5 MG TABLET                |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |
| ZOLMITRIPTAN ODT 5 MG TAB RAPDIS        |   | Other              | 1                  | 4                | 4               |  |                          |                        |                      |                 |
| ZYTIGA 500 MG TABLET                    |   | Other              |                    | 1                | 1               |  |                          |                        |                      |                 |