P.L. 2023 Chapter 680 Report

All companies must complete Sections I through IV. All fields are required. Due Date: 9/1/2024

<u>Section I. Company Information</u>

Company Name:	Cigna Health and Life Insurance Company
NAIC:	67369

<u>Section II. Contact Information</u>

First Name:		Last Name:	
E-Mail:		Phone Number:	

<u>Section III. Prior Authorization History</u>

	2021	2022	2023	2021	2022	2023
Total Number of Prior Authorizations Requested	9007	10271	13835	**Percent of Total**		
B: Standard Requests Approved	6287	7468	10307	85.88%	87.26%	88.18%
C: Standard Requests Denied	1034	1090	1381	14.12%	12.74%	11.82%
H: Standard Request Average Approval Time (Days)	8.09	9.93	4.2			
H: Standard Request Median Approval Time (Days)	3.25	2.5	2.5			
D: Appealed Requests Approved	36	35	53			
E: Extended Reviews Approved	353	483	632			
F: Expedited Reviews Approved	1579	1593	1909	93.65%	92.99%	88.91%
G: Expedited Reviews Denied	107	120	238	6.35%	7.01%	11.09%
I: Expedited Review Average Approval Time (Days)	3	1.49	2.28			
I: Expedited Review Median Approval Time (Days)	1.5	0.25	0.75			
J: Concurrent Care Request Average Approval Time (Days)	2.33	2.03	2.7			
J: Concurrent Care Request Median Approval Time (Days)	0.5	1.5	1.5			

CPT Code	Description of Item or Service	2021	2022	2023
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	x
		x	x	
		x	x	x
		x	x	x
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		x	x	x