

2024

GEORGIA MEDICAID

Monthly Outpatient Drug Prior Authorizations by Status (Drugs under Medical and Pharmacy Benefit)

| | JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | OCT | NOV | DEC | YTD |
|-------------------------|--------------|--------------|--------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--------------|
| Georgia Medicaid | 2,594 | 2,469 | 2,494 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 7,557 |
| Approved | 1,519 | 1,423 | 1,494 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4,436 |
| Medical Benefit | 172 | 180 | 150 | | | | | | | | | | 502 |
| Pharmacy Benefit | 1,347 | 1,243 | 1,344 | | | | | | | | | | 3,934 |
| Denied | 1,075 | 1,046 | 1,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3,121 |
| Medical Benefit | 42 | 37 | 52 | | | | | | | | | | 131 |
| Pharmacy Benefit | 1,033 | 1,009 | 948 | | | | | | | | | | 2,990 |

Monthly Outpatient Drug Prior Authorizations by Denial Status and Denial Status Reason (Drugs under Medical and Pharmacy Benefit)

| | JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | OCT | NOV | DEC | YTD |
|-------------------------|--------------|--------------|--------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--------------|
| Denied | 1,075 | 1,046 | 1,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3,121 |
| Medical Benefit | 42 | 37 | 52 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 131 |
| Medical Necessity | 36 | 31 | 43 | | | | | | | | | | 110 |
| Non-Formulary | 0 | 0 | 0 | | | | | | | | | | 0 |
| Off Label | 5 | 4 | 2 | | | | | | | | | | 11 |
| Retro Untimely | 1 | 2 | 7 | | | | | | | | | | 10 |
| Pharmacy Benefit | 1,033 | 1,009 | 948 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2,990 |
| Excluded Benefit | 49 | 47 | 51 | | | | | | | | | | 147 |
| Medical Necessity | 244 | 222 | 215 | | | | | | | | | | 681 |
| Non-Formulary | 554 | 527 | 500 | | | | | | | | | | 1,581 |
| Off Label | 120 | 140 | 124 | | | | | | | | | | 384 |
| Quantity Limit | 23 | 26 | 24 | | | | | | | | | | 73 |
| Step-Therapy | 43 | 47 | 34 | | | | | | | | | | 124 |

Percentage of Outpatient Drug Prior Authorizations Met Turnaround Time by Benefit Type and Priority Type

| | JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | OCT | NOV | DEC | YTD |
|-------------------------|--------------|--------------|--------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|
| Georgia Medicaid | 99.7% | 99.4% | 99.8% | ---- | ---- | ---- | ---- | ---- | ---- | ---- | ---- | ---- | 99.6% |
| Medical Benefit | 96.3% | 94.5% | 97.5% | ---- | ---- | ---- | ---- | ---- | ---- | ---- | ---- | ---- | 96.1% |
| Pharmacy Benefit | 100.0% | 99.9% | 100.0% | ---- | ---- | ---- | ---- | ---- | ---- | ---- | ---- | ---- | 99.9% |