

Minnesota

Prior authorization data: Commercial medical, specialty pharmacy, and pharmacy

2025

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Prior authorization report
Allina Health|Aetna
2025

Category	Number of requests received	Number of requests submitted electronically (excluding fax/email)	Number of requests approved
Medical	164	95	137
Specialty Rx	84	41	73
Pharmacy	395	313	229
Total	643	449	439

List of prior authorization adverse determinations/denials

Service denied	Total denials	Total appealed (Y/N)	Total denials upheld (Y/N)	Total denials overturned (Y/N)
Ace	1	0	0	0
Adalimumab-adaz	1	0	0	0
Adderall	1	0	0	0
Amphetamine-dextroamphetamine	1	0	0	0
Atrovent	1	1	0	1
Betamethasone	1	0	0	0
Calcipotriene	1	0	0	0
Cequa	1	0	0	0
Clindamycin	1	0	0	0
Compact	1	0	0	0
Continuous	1	0	0	0
Drysol	1	0	0	0
Entyvio	1	0	0	0
Estazolam	1	0	0	0
Finacea	1	0	0	0
Fluticasone-salmeterol	1	0	0	0
Humira	1	0	0	0
Hyrimoz	1	0	0	0
Icosapent	1	0	0	0
Insulin	1	0	0	0
Isotretinoin	1	0	0	0
Ivermectin	1	0	0	0
Ketoconazole	1	0	0	0
Ketorolac	1	0	0	0
Lidoderm	1	0	0	0
Liraglutide	1	0	0	0
Lokelma	1	0	0	0
Mydayis	1	0	0	0
Omeprazole	1	0	0	0
Ondansetron	1	0	0	0
Oxycodone	1	0	0	0
Phentermine	1	0	0	0
Pimecrolimus	1	0	0	0
Premarin	1	0	0	0

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Service denied	Total denials	Total appealed (Y/N)	Total denials upheld (Y/N)	Total denials overturned (Y/N)
Prempro	1	0	0	0
Qulipta	1	0	0	0
Repatha	1	2	1	1
Rinvoq	1	0	0	0
Semaglutide	1	0	0	0
Tadalafil	1	0	0	0
Temazepam	1	0	0	0
Testosterone	1	0	0	0
Tradjenta	1	0	0	0
Vevye	1	0	0	0
Vilazodone	1	0	0	0
Voquezna	1	1	0	1
Xolair	1	0	0	0
Zituvio	1	0	0	0
Zolpidem	1	0	0	0
Dysport	1	1	1	0
Entyvio	1	1	1	0
Euflexxa	1	0	0	0
Eylea	1	0	0	0
Feraheme	1	0	0	0
Gammagard	1	0	0	0
Monovisc	1	0	0	0
Pavblu	1	0	0	0
Synvisc	1	0	0	0
Albuterol	2	0	0	0
Anucort - HC	2	0	0	0
Dulera	2	0	0	0
Jardiance	2	0	0	0
Litfulo	2	0	0	0
Nurtec	2	1	0	1
Rizatriptan	2	0	0	0
Saxenda	2	0	0	0
Semaglutide	2	0	0	0
Sildenafil	2	0	0	0
Tremfya	2	0	0	0
Ventolin	2	0	0	0
Vyzulta	2	0	0	0
Neulasta	2	0	0	0
Ciclopirox	3	0	0	0
Hydrocortisone	3	0	0	0
Miebo	3	0	0	0
Neffy	3	2	0	2
Oxycontin	3	2	2	0
Tacrolimus	3	1	1	0
Fluticasone	4	0	0	0
Lidocaine	4	0	0	0
Mounjaro	6	0	0	0

List of prior authorization adverse determinations/denials

Service Denied	Total denials	Total appealed (Y/N)	Total denials upheld (Y/N)	Total denials overturned (Y/N)
Ozempic	7	0	0	0
Wegovy	19	0	0	0
Zepbound	33	1	1	0
Laminotomy (hemilaminectomy)	1	1	1	0
Custom-shaped prosthetic	1	1	1	1
Nasal/sinus endoscopy - surgical	1	1	0	1
Guidance for loclzj Target vol for radj tx	1	1	1	0
Reinsertion of spinal fixation device	1	1	1	0
Whole mitochondrial genome	1	0	0	0
Socket insert w/ lock mech	1	0	0	0
Lower extremity prosthesis nos	1	0	0	0
Repet tms tx subseq motr threshld w/deliv & mn	1	0	0	0
Repet tms tx initial w/map/motr threshld/del&m	1	0	0	0
Therap repetitive tms tx subseq delivery & mng	1	0	0	0
Lamot prtl ffd exc disc Reexpl 1 ntrspc lumbar	1	0	0	0
Nasal/sinus ndsc total with sphenoidotomy	1	0	0	0
Nasal/sinus endoscopy w/ maxillary antrostomy	1	0	0	0
Tot disc arthrp art disc ant Appro 1 ntrspc crv	1	0	0	0
Tot disc arthrp ant appr disc 2nd level cervical	1	0	0	0
Proton tx delivery Intermediate	1	0	0	0
Ntsty modul radthx pln dose - vol histos	1	0	0	0
Guidance for loclzj target vol for radj tx dlvr	1	0	0	0
Arthroplasty glenohumeral joint total shoulder	1	0	0	0
Room and board ward general classification	2	0	0	0
Insj biomchn dev intervertebral dsc spc w/arthrd	1	0	0	0
Arthrodesis anterior interbody lumbar	1	0	0	0
Stereotactic computer assisted px spinal	1	0	0	0

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Service denied	Total denials	Total appealed (Y/N)	Total denials upheld (Y/N)	Total denials overturned (Y/N)
Reinsertion spinal fixation Device	1	0	0	0
Vcrpec thoracolmbr dcmprn lwr thrc/lmbr 1 seg	1	0	0	0

Prior authorization denial reasons	Total	Percentage
Did not meet medical necessity criteria	31	14%
Drug is not covered under plan formulary	24	11%
Drug requires step therapy	10	5%
Drug subject to quantity limits	33	15%
Not a covered benefit under member plan	68	31%
Investigational/experimental	6	3%
Not medically necessary	34	15%
Whole mitochondrial genome sequence panel	1	0%
TMS not meeting diagnostic criteria	3	1%
Lumbar laminectomy for herniated disc - (C)	1	1%
Endoscopic sinus surgery and balloon sinuplasty	2	1%
Shoulder - total replacement surgery - no PT	1	1%
MCG - SNF ADM denial (stay in hosp - too acute)	1	0%
Precertification denial of requested post-surgical admission	1	0%
Spinal fusion	4	2%
Corpectomy	1	0%