



## OptumRx\* Prior Authorization Summary

10/01/2021 TO 12/31/2021

PA Type	Approved
Medications	3114

\*The information contained within the document covers OptumRx commercial business where applicable, including UnitedHealthcare

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10/01/2021 TO 12/31/2021

PA Type	Denied		
	Quantity Limit	Medical Neccesity/ PA Denial	Non FDA
Medications	84	1269	85

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