Healthplan Desc	Auth ID	Expedite Flag	Initial Datetime	Received Datetime	Letter Member Datetime	Auth Type Desc	Auth Type ID NUM	Initial Status Outcome	Member State	Healthplan State	Facility State	Physician State	Final Appeal Status Desc	Appeal Type Code
28050 Ambetter from Sunflower State - HMO FT	23108CKS0003	N	May 1, 2023 6:15:59 AM	Apr 18, 2023 5:27:34 AM	May 1, 2023 6:24:27 AM	Radiology	1	Disapproval	KS	KS	KS	TI	Unheld	m1