

Stop Misuse of Prior Authorization Cosponsor and Advance the Improving Seniors' Timely Access to Care Act

REMOVING BARRIERS TO TIMELY ACCESS TO CARE

The [Regulatory Relief Coalition \(RRC\)](#) is a group of national physician specialty organizations advocating for regulatory burden reduction in Medicare so physicians can spend more time treating patients. We advocate for common-sense reform of Medicare Advantage (MA) organizations' use of prior authorization to ensure that prior authorization is not a barrier to timely access to care for the patients we serve.

STATUS

With more than 400 [endorsing organizations](#), similar legislation ([H.R. 3107](#)) introduced in 2019 garnered 280 co-sponsors — making it one of the most bipartisan bills in the 116th Congress. The *Improving Seniors' Timely Access to Care Act of 2021* is identical to legislation ([S. 5044](#)) introduced by the Senate in December 2020 and is a product of months of bipartisan, bicameral collaboration. Changes to the legislation, summarized [HERE](#), are modest, responsible and should pave the way to committee and floor action in the 117th Congress.

PRIOR AUTHORIZATION: COSTS AND CONSEQUENCES

Prior authorization is a cumbersome process that requires physicians to obtain pre-approval for medical treatments or tests before rendering care to their patients. The process for obtaining this approval is lengthy and typically requires physicians or their staff to spend the equivalent of 2 or more days each week negotiating with insurance companies — time that would be better spent taking care of patients.

Prior authorization is often imposed on services that are very unlikely to be over-utilized and are eventually approved 90-100% of the time. In these cases and others, prior authorization not only prevents seniors from receiving medically necessary, sometimes lifesaving, care in a timely manner but expends unnecessary time and money for plans, providers and caregivers.

REQUEST

The RRC urges Congress to bring needed transparency and oversight to the Medicare Advantage program by adopting the *Improving Seniors' Timely Access to Care Act* (H.R. 3173). Sponsored by Reps. Suzan DelBene (D-WA), Mike Kelly (R-PA), Ami Bera, MD (D-CA) and Larry Bucshon (R-IN), this legislation would:

- Establish an electronic prior authorization (ePA) program and require MA plans to adopt ePA capabilities;
- Require the Secretary of Health and Human Services to establish a list of items and services eligible for real-time decisions under an MA ePA program;
- Standardize and streamline the prior authorization process for routinely approved items and services;
- Ensure prior authorization requests are reviewed by qualified medical personnel;
- Increase transparency around MA prior authorization and its use; and
- Protect beneficiaries from any disruptions in care due to prior authorization requirements as they transition between MA plans.

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