



## **Hundreds of Patient and Provider Groups Endorse Legislation to Improve Prior Authorization in Medicare Advantage**

### **Regulatory Relief Coalition is Key Leader in Effort**

WASHINGTON, DC, Sept. 9, 2019—More than 370 national and state patient, physician, health care professional, and other health care stakeholder organizations endorsed *H.R. 3107, the Improving Seniors' Timely Access to Care Act of 2019* in a [letter](#) sent to Congress.

Introduced by Reps. Suzan DelBene (D-WA), Mike Kelly (R-PA), Roger Marshall, MD (R-KS), and Ami Bera, MD (D-CA), this bipartisan legislation would help protect patients from unnecessary delays in care by streamlining and standardizing prior authorization under the Medicare Advantage program, providing much-needed oversight and transparency of health insurance for America's seniors.

Based on a [consensus statement](#) on prior authorization reform adopted by leading national organizations representing physicians, medical groups, hospitals, pharmacists, and health plans, H.R. 3107 would facilitate electronic prior authorization, improve transparency for beneficiaries and providers alike, and increase Centers for Medicare & Medicaid Services (CMS) oversight on how Medicare Advantage plans use prior authorization. According to the bill sponsors, the bill would:

- Create an electronic prior authorization program including the electronic transmission of prior authorization requests and responses and a real-time process for items and services that are routinely approved;
- Improve transparency by requiring plans to report to CMS on the extent of their use of prior authorization and the rate of approvals or denials;
- Require plans to adopt transparent prior authorization programs that are reviewed annually, adhere to evidence-based medical guidelines, and include continuity of care for individuals transitioning between coverage policies to minimize any disruption in care;
- Hold plans accountable for making timely prior authorization determinations and to provide rationales for denials; and
- Prohibit additional prior authorization for medically-necessary services performed during a surgical or invasive procedure that already received, or did not initially require, prior authorization.

### **About the Regulatory Relief Coalition**

The Regulatory Relief Coalition is a group of ten national physician specialty organizations advocating for a reduction in Medicare program regulatory burdens to protect patients' timely access to care and allow physicians to spend more time with their patients.

American Academy of Neurology • American Academy of Ophthalmology • American Association of Neurological Surgeons • American College of Cardiology • American College of Rheumatology • American College of Surgeons • American Gastroenterological Association • American Society of Clinical Oncology • American Urological Association • Congress of Neurological Surgeons