January 28, 2022

The Honorable Ron Wyden  
Senate Finance Committee  
219 Dirksen Senate Office Building  
Washington, DC 20515

The Honorable Mike Crapo  
Senate Finance Committee  
219 Dirksen Senate Office Building  
Washington, DC 20515

Subject: Advancing Prior Authorization Legislation

Dear Chairman Wyden and Ranking Member Crapo,

The Regulatory Relief Coalition, a group of national physician specialty organizations advocating for reduced regulatory burdens in Medicare so physicians can spend more time treating patients, writes today to encourage you to advance, this year, bipartisan, bicameral legislation to improve prior authorization. Championed by Senators Roger Marshall, MD (R-KS), Kyrsten Sinema (D-AZ), John Thune (R-SD), and Sherrod Brown (D-OH), S.3018, the Improving Seniors’ Timely Access to Care Act of 2021, would help protect patients from unnecessary delays in care by streamlining and standardizing prior authorization in the Medicare Advantage (MA) program.

With more than 250 co-sponsors, this legislation is endorsed by over 450 organizations representing patients, health care providers, and the medical technology and biopharmaceutical industry, and others. The legislation enjoys broad support among Senate Finance Committee members, with four members of the Committee cosponsoring the bill. Further, since the introduction of the original version in the 116th Congress, the bill has been revised to incorporate detailed input from the Department of Health and Human Services and dozens of stakeholder groups, including the insurance industry. It is, therefore, poised to move.

Over the past 10 years, MA plans and other insurers have substantially increased the use of prior authorization, resulting in significant barriers to medically necessary care that negatively impact patients and providers. For example, according to a recent survey we conducted, prior authorization approvals typically take between 2 to 14 days, but for some they can take from 15 to more than 31 days — sometimes forcing patients to abandon treatment altogether. Our survey also indicates that prior authorization requirements impose significant administrative burdens on providers, and in any given week, most physicians must contend with between 11 and 40 prior authorization requests.
S. 3018 is based on a 2019 consensus statement adopted by leading organizations representing physicians, medical groups, hospitals, pharmacists and health plans. It would improve prior authorization by:

- Establishing an electronic prior authorization (ePA) program and require MA plans to adopt ePA capabilities;
- Requiring 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;
- Standardizing and streamline the prior authorization process for routinely approved items and services;
- Ensuring prior authorization requests are reviewed by qualified medical personnel;
- Increasing transparency around MA prior authorization requirements and their use; and
- Protect beneficiaries from any disruptions in care due to prior authorization requirements as they transition between MA plans.

This legislation would allow providers to spend more time treating patients and less on bureaucratic hurdles. Most importantly, it would remove barriers to ensure that patients have timely access to care.

As you consider your committee’s upcoming priorities, and given the widespread support for this bill, we respectfully request that the committee advance S. 3018 in the next appropriate legislative package.

Thank you for considering our request. If you have any questions, please contact Peggy Tighe at Peggy.Tighe@PowersLaw.com.

Sincerely,

American Academy of Family Physicians
American Academy of Neurology
American Academy of Ophthalmology
American Academy of Orthopedic Surgeons
American Association of Neurological Surgeons
American College of Cardiology
American College of Rheumatology
American College of Surgeons
American Gastroenterological Association
American Osteopathic Association
Association For Clinical Oncology
Congress of Neurological Surgeons
Medical Group Management Association
National Association of Spine Specialists
Society for Cardiovascular Angiography & Interventions

Regulatory Relief Coalition Allies
American Medical Rehabilitation Providers Association
Premier Inc.
Sincerely,

The Regulatory Relief Coalition

Cc: Members of the Committee on Finance
Leads sponsors of S.3018