May 18, 2022

The Honorable Nancy Pelosi
Speaker
United States House of Representatives
Washington, DC 20515

The Honorable Charles Schumer
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Kevin McCarthy
Minority Leader
United States House of Representatives
Washington, DC 20515

The Honorable Mitch McConnell
Minority Leader
United States Senate
Washington, DC 20510

Dear Speaker Pelosi, Leader McCarthy, Leader Schumer, and Leader McConnell,

The undersigned organizations, representing thousands of cancer care providers from around the country, are writing to urgently ask you and your colleagues to pass the Improving Seniors’ Timely Access to Care Act (H.R. 3173/S. 3018), which would streamline prior authorization practices within the Medicare Advantage (MA) program.

Prior authorization requires patients or their providers to secure pre-approval of a treatment as a condition of reimbursement or insurance coverage. While these practices can sometimes serve as a useful tool to help manage costs if used appropriately, it is critical that such policies are developed and implemented in a way that does not undermine or delay patient access to medically necessary care. Prior authorization practices can have a proportionately negative impact on cancer patients due to their need for timely access to care.

A recently released Department of Health and Human Services Office of the Inspector General (OIG) report found that MA organizations at times delay or deny beneficiaries’ access to services that meet Medicare coverage requirements. Plans also rejected payments to providers that met coverage and billing requirements.

After conducting the study, the OIG found that 13% of prior authorization denials fit within Medicare coverage requirements, as did 18% of denied payment requests. These stark statistics reflect the care delays the patient and provider communities are dealing with daily.

For patients with cancer, delays in care often lead to increased disease activity, loss of function, and potentially irreversible disease progression.

The time to pass the Improving Seniors’ Timely Access to Care Act is now. This critical legislation would require prior authorization to be completed electronically and would standardize and streamline the process under MA plans, reducing administrative burdens and delays in care. The bill would enhance transparency around the use of prior authorization to help us further understand how these practices can be improved to reduce these potentially devastating delays in care for patients. This bill has broad bipartisan support in both chambers, with 292 cosponsors in the House (169 Democrats and 123 Republicans) and 28 in the Senate (14 Democrats and 14 Republicans).
Pass the Improving Seniors’ Timely Access to Care Act (H.R. 3173/ S. 3018), helping to improve prior authorization practices to enhance patient access to timely healthcare, without delay.

Sincerely,

Alabama Cancer Congress
Association for Clinical Oncology
Association of Community Cancer Centers (ACCC)
Association of Northern California Oncologists (ANCO)
Connecticut Oncology Association (CTOA)
Delaware Society for Clinical Oncology (DSCO)
Denali Oncology Group
Empire State Hematology & Oncology Society (ESHOS)
Florida Society of Clinical Oncology (FLASCO)
Georgia Society of Clinical Oncology (GASCO)
Hawaii Society of Clinical Oncology (HSCO)
Illinois Medical Oncology Society (IMOS)
Indiana Oncology Society (IOS-IN)
Iowa Oncology Society (IOS-IA)
Kansas Society of Clinical Oncology (KaSCO)
Kentucky Society of Clinical Oncology (KYSCO)
Louisiana Oncology Society (LOS)
Maryland/D.C. Society of Clinical Oncology (MDSCO)
Massachusetts Society of Clinical Oncologists (MSCO)
Medical Oncology Association of Southern California, Inc. (MOASC)
Medical Oncology Society of New Jersey (MOSNJ)
Michigan Society of Hematology & Oncology (MSHO)
Minnesota Society of Clinical Oncology (MSCO)
Mississippi Oncology Society (MOS)
Missouri Oncology Society (MOS)
Montana State Oncology Society
Nebraska Oncology Society
New Mexico Society of Clinical Oncology (NMSCO)
Nevada Oncology Society (NOS)
North Carolina Oncology Association (NCOA)
Northern New England Clinical Oncology Society (NNECOS)
Ohio Hematology Oncology Society (OHOS)
Oklahoma Society of Clinical Oncology (OSCO)
Oregon Society of Medical Oncology (OSMO)
Pennsylvania Society of Oncology & Hematology (PSOH)
Puerto Rico Hematology and Medical Oncology Association
Rocky Mountain Oncology Society (RMOS)
Society of Utah Medical Oncologists (SUMO)
South Carolina Oncology Society (SCOS)
Tennessee Oncology Practice Society (TOPS)
Texas Society of Clinical Oncology (TxSCO)
The Arizona Clinical Oncology Society (TASCO)
Virginia Association of Hematologists and Oncologists (VAHO)
Washington State Medical Oncology Society (WSMOS)
West Virginia Oncology Society (WVOS)
Wisconsin Association of Hematology and Oncology (WAHO)
Wyoming State Oncology Society (WSOS)