



Improving Prior Authorization

Regulatory Relief Coalition Advocacy Toolkit

Outlined below are recommended messaging and resources for the Regulatory Relief Coalition's Virtual Prior Authorization Advocacy Day on **February 25, 2020**. This document is meant to serve as a guide to help amplify the RRC's messages on the need to pass [H.R. 3107](#), the *Improving Seniors' Timely Access to Care Act*.

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, the legislation 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. Specifically, this bill would:

- ❖ Establish an electronic prior authorization process;
- ❖ Minimize the use of prior authorization for routinely approved services;
- ❖ Ensure prior authorization requests are reviewed by qualified medical personnel;
- ❖ Require regular reports from Medicare Advantage plans on their use of prior authorization and rates of delay and denial; and
- ❖ Prohibit the use of prior authorization for medically-necessary services performed during pre-approved surgeries or other invasive procedures.

Survey Data

Patient Access to Care Has Been Impacted

- Eighty-two percent of respondents state that prior authorization either always (37%) or often (45%) **delays access** to necessary care.
- The **wait time** for prior authorization can be lengthy. For most physicians (74%) it takes between 2 to 14 days to obtain prior authorization, but for 15%, this process can take from 15 to more than 31 days.
- Prior authorization causes patients to **abandon treatment** altogether with 32% reporting that patients often abandon treatment and 50% reporting that patients sometimes abandon treatment.
- Overwhelmingly (87%), physicians report that prior authorization has a significant (40%) or somewhat (47%) **negative impact** on patient **clinical outcomes**.
- Three-quarters (74%) reported that during the past five years, stable patients had been asked to **switch medications** by the health plan even though there was no medical reason to do so.

Prior Authorization Burden Has Increased

- Eight-four percent of physicians report that the **burden** associated with prior authorization has **significantly increased** over the past five years.
- Insurers have increased the use of prior authorization over the past years for **procedures** (84%); for **diagnostic tools** (78%); and for **prescription medications** (80%).
- The burden associated with prior authorization for physicians and their staff is **high** or **extremely high** (92%).
- In any given week, most physicians (42%) must contend with between 11 and 40 prior authorizations. One-fifth of respondents face more than 40 per week.
- Many physicians must now engage in the so-called **peer-to-peer process** to obtain prior authorization, and nearly 20% of respondents experience this requirement for 26 to 75% or more of their services (including prescription drugs, diagnostic tests and medical services).
- Ultimately, the **majority of services are approved** (71%), with one-third of physicians getting approved 90% or more of the time.
- Unbelievably, despite gaining prior authorization, insurance companies **deny payment** after services are rendered, an outcome three-fifths of physicians have experienced more than once in the past year, and 16% have had this happen 20 or more times.
- Nearly three-fifths (59%) of physicians have staff members working **exclusively** on prior authorization, with most staff spending between 10-20 hours per week on prior authorization.
- **Most plans** employ prior authorization, although UnitedHealthcare (68%), Blue Cross Blue Shield (66%) and Aetna 61%) are the top utilizers.

RRC Website Pages

- ❖ **Regulatory Relief Coalition Homepage:** www.regrelief.org
- ❖ **H.R. 3107 Supporters:** www.regrelief.org/support
- ❖ **H.R. 3107 Information:** www.regrelief.org/legislation
- ❖ **Regulatory Relief Coalition Facebook:** <http://bit.ly/RegReliefFacebook>
- ❖ **Regulatory Relief Coalition Twitter:** <https://twitter.com/regrelief>

Twitter Resources

Hashtags

HASHTAGS	
<p>Prior Authorization</p> <ul style="list-style-type: none"> • #FixPriorAuth • #PriorAuthorization • #PriorAuth • #TimelyAccess • #HR3107 	<p>Other</p> <ul style="list-style-type: none"> • #RegReliefCoalition • #RegRelief • #Physicians • #Congress

Twitter Handles

Members of Congress	
H.R 3107 Lead Sponsors	
• Suzan Delbene (D-WA-01):	@RepDelBene
• Mike Kelly (R-PA-16):	@MikeKellyPA
• Roger Marshall, MD, (R-KS-01):	@RogerMarshallMD
• Ami Bera, MD, (D-CA-07):	@RepBera
Ways and Means Committee	
<u>Democrats</u>	
• Majority Handle:	@WaysMeansCmte
• Chairman, Richard Neal (D-MA-01):	@RepRichardNeal
• John Lewis (D-GA-05):	@repjohnlewis
• Lloyd Doggett (D-TX-35):	@RepLloydDoggett
• <i>Mike Thompson</i> (D-CA-05):	@RepThompson
• John Larson (D-CT-01):	@RepJohnLarson
• Earl Blumenauer (D-OR-03):	@repblumenauer
• <i>Ron Kind</i> (D-WI-03):	@RepRonKind
• <i>Bill Pascrell</i> (D-NJ-09):	@BillPascrell
• <i>Danny Davis</i> (D-IL-07):	@RepDannyDavis
• Linda Sanchez (D-CA-38):	@RepLindaSanchez
• Brian Higgins (D-NY-26):	@RepBrianHiggins
• <i>Terri Sewell</i> (D-AL-07):	@RepTerriSewell
• <i>Suzan Delbene</i> (D-WA-01):	@RepDelBene
• Judy Chu (D-CA-27):	@RepJudyChu
• <i>Gwen Moore</i> (D-WI-04):	@RepGwenMoore

**Italics* = H.R. 3107 cosponsor

Members of Congress

Ways and Means Committee (cont'd)

- Dan Kildee (D-MI-05): @RepDanKildee
- Brendan Boyle (D-PA-02): @RepBrendanBoyle
- Don Beyer (D-VA-08): @RepDonBeyer
- Dwight Evans (D-PA-03): @RepDwightEvans
- Brad Schneider (D-IL-10): @RepSchneider
- *Tom Suozzi* (D-NY-03): @RepTomSuozzi
- *Jimmy Panetta* (D-CA-20): @JimmyPanetta
- Stephanie Murphy (D-FL-07): @RepStephMurphy
- *Jimmy Gomez* (D-CA-34): @RepJimmyGomez
- *Steven Horsford* (D-NV-04): @RepHorsford

Republicans

- Minority Handle @WaysandMeansGOP
- Kevin Brady (R-TX-08): @RepKevinBrady
- Devin Nunes (R-CA-22): @RepDevinNunes
- Vern Buchanan (R-FL-16): @VernBuchanan
- *Adrian Smith* (R-NE-03): @RepAdrianSmith
- *Kenny Marchant* (R-TX-24) @RepKenMarchant
- Tom Reed (R-NY-23) @RepTomReed
- *Mike Kelly* (R-PA-16) @MikeKellyPA
- *George Holding* (R-NC-02) @RepHolding
- Jason Smith (R-MO-08) @RepJasonSmith
- Tom Rice (R-SC-07) @RepTomRice
- *David Schweikert* (R-AZ-06) @RepDavid
- *Jackie Walorski* (R-IN-02) @RepWalorski
- *Darin LaHood* (R-IL-18) @RepLaHood
- *Brad Wenstrup*, DPM, (R-OH-02) @RepBradWenstrup
- Jodey Arrington (R-TX-19) @RepArrington
- *Drew Ferguson*, DMD, (R-GA-03) @RepDrewFerguson
- *Ron Estes* (R-KS-04) @RepRonEstes

Doctors

Republicans

- *Phil Roe*, MD, (R-TN-01): @DrPhilRoe
- *Andy Harris*, MD, (R-MD-01): @RepAndyHarrisMD
- *Larry Bucshon*, MD, (R-IN-08): @RepLarryBucshon
- Ralph Abraham, MD, (R-LA-05): @RepAbraham
- *Brian Babin*, DDS, (R-TX-36): @RepBrianBabin
- Mike Burgess, MD, (R-TX-26): @michaelcburgess
- Buddy Carter (R-GA-01): @RepBuddyCarter
- Scott DesJarlais, MD, (R-TN-04): @DesJarlaisTN04

**Italics* = H.R. 3107 cosponsor

Members of Congress

Doctors (cont'd)

- *Neal Dunn*, MD, (R-FL-02): @DrNealDunnFL2
- *Drew Ferguson*, DMD, (R-GA-03): @RepDrewFerguson
- *Paul Gosar*, DDS, (R-AZ-04): @RepGosar
- *John Joyce*, MD, (R-PA-13): @RepJohnJoyce
- *Roger Marshall*, MD, (R-KS-01): @RogerMarshallMD
- *Greg Murphy*, MD, (R-NC-03): @RepGregMurphy
- *Mike Simpson*, DMD, (R-ID-02): @CongMikeSimpson
- *Brad Wenstrup*, DPM, (R-OH-02): @RepBradWenstrup

Democrats

- *Ami Bera*, MD, (D-CA-07): @RepBera
- *Raul Ruiz*, MD, (D-CA-36): @CongressmanRuiz
- *Kim Schrier*, MD, (D-WA-08): @RepKimSchrier

House Leadership

Democrats

- Nancy Pelosi (D-CA-12), Speaker: @SpeakerPelosi
- Steny Hoyer (D-MD-05), Majority Leader: @LeaderHoyer
- Jim Clyburn (D-SC-06), Majority Whip: @WhipClyburn

Republicans

- Kevin McCarthy (R-CA-23), Minority Leader: @GOPLeader
- Steve Scalise (R-LA-01): @SteveScalise

Others

Energy and Commerce Committee Leaders

- Frank Pallone (D-NJ-06): @FrankPallone
- Anna Eshoo (D-CA-18): @RepAnnaEshoo
- Greg Walden (R-OR-02): @repgregwalden
- Mike Burgess, MD, (R-TX-26): @michaelcburgess

Education and Labor Committee Leaders

- Bobby Scott (D-VA-03): @BobbyScott
- Frederica Wilson (D-FL-24): @RepWilson
- Virginia Foxx (R-NC-05): @virginiafoxx
- Tim Walberg (R-MI-07): @RepWalberg

**Italics* = H.R. 3107 cosponsor

Sample Tweets

#PriorAuthorization = cumbersome process that requires #physicians to obtain pre-approval for medical treatments or tests before rendering care to their patients. It's time for #Congress to #FixPriorAuth! Learn More at www.regrelief.org. #RegRelief #RegReliefCoalition

[268 characters]

Prior authorization can cause unnecessary, potentially life-threatening delays for patients. #Congress should pass #HR3107, the Improving Seniors Timely Access to Care Act. TY @RepDelBene @MikeKellyPA @RogerMarshallMD @RepBera for your efforts to #FixPriorAuth!

[261 characters]

We urge #Congress to bring common sense reform to prior authorization practices by adopting #HR3107. This bill will protect #Medicare Advantage patients from time consuming #PriorAuth practices and remove barriers to #timelyaccess of medically necessary care. #FixPriorAuth

[273 characters]

Prior authorization practices can cause time consuming delays for #Medicare Advantage patients. Urge #Congress to enact common sense reforms to protect vulnerable patients by passing #HR3107, the Improving Seniors Timely Access to Care Act. #FixPriorAuth

[254 characters]

Thank you **[MoC handle]** for cosponsoring #HR3107, the Improving Seniors Timely Access to Care Act, which would improve the time-consuming prior authorization processes that limit #Medicare Advantage patients' #timelyaccess to medically necessary care. #FixPriorAuth

[251 characters + MoC handle]

Prior authorization can be time consuming for #Medicare Advantage patients. Support common sense reforms and urge #Congress to pass #HR3107, the Improving Seniors Timely Access to Care Act. Thank you **[MoC handle]** for your efforts to #FixPriorAuth.

[234 characters + MoC handle]

Twitter Images

HR 3107 Image #1:



HR 3107 Image #2:

Help Protect Patients' Timely Access to Care

1. Appropriate application of prior authorization protocols
2. Regular review and volume adjustment
3. Transparency and communication regarding approvals, denials and delays
4. Maintaining the continuity of care for patients
5. Standardization of electronic transactions



#TimelyAccess #HR3107

HR 3107 Image #3:

More than **90%** of patients whose treatment requires prior authorization experience **delays in care.**



#TimelyAccess #HR3107

HR 3107 Image #4:

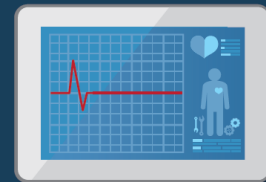
Physicians and their staff spend an average of **two days** each week **completing prior authorization.**



#TimelyAccess #HR3107

HR 3107 Image #5:

More than **85%** of clinicians report that prior authorization has a **negative impact on patient clinical outcomes.**



#TimelyAccess #HR3107

Nurse, Doctor, Patient HR 3101 Image:

Remove Regulatory Barriers to Timely Access to Care

Support **H.R. 3107** to reform prior authorization processes

#TimelyAccess #HR3107

www.regrelief.org



Nurse, Doctor, Patient HR 3101 Image #2:

More than **90%** of patients whose treatment requires prior authorization experience **delays in care.**



#TimelyAccess #HR3107

Doctor-Patient HR 3101 Image:

Remove Regulatory Barriers to Timely Access to Care

Support **H.R. 3107** to reform prior authorization processes

#TimelyAccess #HR3107

www.regrelief.org



Doctor-Patient HR 3101 Image:

More than **90%** of patients whose treatment requires prior authorization experience **delays in care.**



Prior Authorization Image:



HR 3107 Cosponsors Image:



116TH CONGRESS
1ST SESSION

H. R. 3107

To amend title XVIII of the Social Security Act to establish requirements with respect to the use of prior authorization under Medicare Advantage plans, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 5, 2019

Ms. DELBENE (for herself, Mr. KELLY of Pennsylvania, Mr. MARSHALL, and Mr. BERA) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

Rep. DelBene HR 3107 Image:

IN THE HOUSE OF REPRESENTATIVES

Ms. DELBENE (for herself, Mr. KELLY of Pennsylvania, Mr. MARSHALL, and Mr. BERA) introduced the following bill; which was referred to the Committee on _____

A BILL

To amend title XVIII of the Social Security Act to establish requirements with respect to the use of prior authorization under Medicare Advantage plans, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Improving Seniors’
5 Timely Access to Care Act of 2019”.



Rep. Kelly HR 3107 Image:

IN THE HOUSE OF REPRESENTATIVES

Ms. DELBENE (for herself, Mr. KELLY of Pennsylvania, Mr. MARSHALL, and Mr. BERA) introduced the following bill; which was referred to the Committee on _____

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Rep. Marshall HR 3107 Image:

IN THE HOUSE OF REPRESENTATIVES

Ms. DELBENE (for herself, Mr. KELLY of Pennsylvania, Mr. MARSHALL, and Mr. BERA) introduced the following bill; which was referred to the Committee on _____

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5 Timely Access to Care Act of 2019".



Rep. Bera HR 3107 Image:

IN THE HOUSE OF REPRESENTATIVES

Ms. DELBENE (for herself, Mr. KELLY of Pennsylvania, Mr. MARSHALL, and Mr. BERA) introduced the following bill; which was referred to the Committee on _____

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2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the "Improving Seniors'
5 Timely Access to Care Act of 2019".



Survey Data Image #1:

82%

**EIGHTY-TWO PERCENT OF
PHYSICIANS REPORT THAT
PRIOR AUTHORIZATION
ALWAYS (37%) OR OFTEN (45%)
DELAYS ACCESS TO CARE.**

#FIXPRIORAUTH

Survey Data Image #1:

50%

PRIOR AUTHORIZATION CAUSES PATIENTS TO ABANDON TREATMENT. 32% OF PHYSICIANS REPORT THAT PATIENTS OFTEN ABANDON TREATMENT AND 50% REPORT THAT PATIENTS SOMETIMES ABANDON TREATMENT.

#FIXPRIORAUTH

Grassroots Message

Physician Letter

Dear Rep. XXX,

As a practicing physician in your district, I am writing to ask you to cosponsor H.R. 3107, the Improving Seniors' Timely Access to Care Act. This bipartisan legislation would protect patients in Medicare Advantage from unnecessary prior authorization practices that limit their timely access to medically necessary care. Specifically, this legislation would:

- Establish an electronic prior authorization process;
- Minimize the use of prior authorization for routinely approved services;
- Require plans to report on the extent of their use of prior authorization and the rate of delays and denials;
- Prohibit additional prior authorization for medically-necessary services performed during pre-approved surgical procedures;
- Ensure prior authorization requests are reviewed by qualified medical personnel; and
- Ensure that plans adhere to evidence-based medicine guidelines.

Prior authorization is one of the biggest obstacles to patients getting timely care. Consider the following facts from a recent study:

- Eighty-two percent of physicians report that prior authorization delays access to necessary care.
- The wait time for prior authorization can be lengthy, and it typically takes two weeks to obtain necessary approvals.
- Prior authorization has a negative impact on patient clinical outcomes.

- Patients are often required to switch medications by health plans even when their conditions are stable and there is no medical reason to do so.
- Prior authorization causes patients to abandon treatment altogether.

Please help my patients get the care they need, when they need it, while also reducing the burdens that I face every day in my practice. Cosponsoring H.R. 3107 will be a tremendous step in the right direction to accomplish both of these goals.

Thank you so much for considering my request. In the meantime, if you have any questions or need additional information, please don't hesitate to contact me.

Sincerely,

Patient Letter

Dear Rep. XXX,

As a patient and constituent, I am writing to ask you to cosponsor H.R. 3107, the Improving Seniors' Timely Access to Care Act. This bipartisan legislation would protect patients in Medicare Advantage from unnecessary prior authorization practices that limit their timely access to medically necessary care. Specifically, this legislation would:

- Establish an electronic prior authorization process;
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- Prohibit additional prior authorization for medically-necessary services performed during pre-approved surgical procedures;
- Ensure prior authorization requests are reviewed by qualified medical personnel; and
- Ensure that plans adhere to evidence-based medicine guidelines.

Please help patients get the care they need, when they need it, by cosponsoring H.R. 3107.

Thank you so much for considering my request. In the meantime, if you have any questions or need additional information, please don't hesitate to contact me.

Sincerely,