

UPDATE

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Neurosurgeons Applaud Lawmakers for Asking CMS to Review Prior Authorization Practices *Bipartisan letter requests that CMS assess the use of prior authorization in Medicare Advantage*

Washington, DC—The American Association of Neurological Surgeons (AANS) and Congress of Neurological Surgeons (CNS) applaud and thank the 103 bipartisan members of the U.S. House of Representatives who signed a [letter](#) today to Centers for Medicare & Medicaid Services (CMS) Administrator, Seema Verma. The letter, spearheaded by Reps. **Phil Roe**, MD (R-Tenn.) and **Ami Bera**, MD (D-Calif.), requests that CMS improve how prior authorization works under Medicare Advantage (MA). Recognizing “that patients may be encountering barriers to timely access to care that are caused by onerous and often unnecessary prior authorization requirements,” the letter urges CMS do the following:

- Issue guidance to Medicare Advantage plans to dissuade the widespread use of prior authorization and to provide direction to the health plans to increase transparency, streamline prior authorization, and minimize the impact on patients;
- Ensure that these requirements do not create inappropriate barriers to care for Medicare patients; and
- Collect data on the scope of prior authorization practices — including denial, delay and approval rates.

“Prior authorization — a tool insurance companies use to limit the medical services they cover — is a cumbersome process that we believe is being inappropriately used by Medicare Advantage plans,” said **Ann R. Stroink**, MD, FAANS, a practicing neurosurgeon from Bloomington, Illinois, and chair of the AANS/CNS Washington Committee.

Neurosurgeons across the country report that once they and their patients decide on a treatment plan, usually the insurance company must pre-approve the treatment or test, or it will not pay for it. The process for obtaining this approval is lengthy and typically requires physician office staff to send multiple faxes and make numerous phone calls to get the health plan to approve the recommended tests or treatments. Additionally, after many attempts, these requests are often rejected, and the neurosurgeons are forced to engage in a process called “peer to peer” review, where they must speak to another physician — which may or may not be a neurosurgeon — to discuss the treatment plan. What is worse is that after weeks of effort, the health plan often ultimately approves the test or procedure, demonstrating that this time-consuming process was completely unnecessary.

Dr. Stroink concluded, “Neurosurgeons take care of very sick patients who suffer from painful and life-threatening neurologic conditions such as brain tumors, debilitating degenerative spine disorders, stroke and Parkinson’s disease. Our patients need timely medical care, or they face permanent neurologic damage, and sometimes death. The Roe-Bera letter is a good first step in addressing unnecessary prior authorization.”

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The American Association of Neurological Surgeons (AANS), founded in 1931, and the Congress of Neurological Surgeons (CNS), founded in 1951, are the two largest scientific and educational associations for neurosurgical professionals in the world. These groups represent over 8,000 neurosurgeons worldwide. Neurological surgery is the medical specialty concerned with the prevention, diagnosis, treatment and rehabilitation of disorders that affect the entire nervous system, including the spinal column, spinal cord, brain and peripheral nerves. For more information, please visit www.aans.org or www.cns.org, read our blog www.neurosurgeryblog.org, follow us on [Twitter](#) or connect with us on [Facebook](#).