WASHINGTON, DC, June 11, 2020— H.R. 3107, the Improving Seniors’ Timely Access to Care Act of 2019, reached a significant milestone with one-half of the U.S. House of Representatives co-sponsoring this bipartisan legislation.

Introduced by Reps. Suzan DelBene (D-Wash.), Mike Kelly (R-Pa.), Roger Marshall, MD, (R-Kan.) and Ami Bera, MD, (D-Calif.), this legislation would help protect America’s seniors 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.

The burden of prior authorization has amplified health risks for patients and overwhelmed struggling practices during the COVID-19 crisis. Even in areas where the healthcare system is beginning to recover sufficiently to treat non-emergent cases, providers are faced with the challenge of delivering long-delayed, medically necessary services to patients whose health care needs were postponed during the crisis. Prior authorization burdens will only further delay this care.

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.

“When their vision is at risk, our patients can’t wait for their treatments,” said ophthalmologist George A. Williams, MD, immediate past president of the American Academy of Ophthalmology. “We are thrilled that the Improving Seniors’ Timely Access to Care Act has received such strong bipartisan support. We applaud Representatives Suzan DelBene, Mike Kelly, Roger Marshall, and Ami Bera for taking bold steps that will protect America’s seniors from unnecessary barriers that deny them of timely access to medically necessary care.”

“It is especially critical coming out of the COVID-19 crisis, that patients not face additional obstacles to getting the care they need,” said Ann R. Stroink, MD, a practicing neurosurgeon from Bloomington, Ill. “My patients have faced delays in their surgery for several months, so relieving prior authorization burdens will help,” Dr. Stroink added.

The Improving Seniors’ Timely Access to Care Act of 2019 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.

More than 400 national and state patient, physician, health care professional, and other health care stakeholder organizations have endorsed this legislation.

The Regulatory Relief Coalition is a group of thirteen 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.