Dear Secretary Azar and Administrator Verma:

The Part B Access for Seniors and Physicians (ASP) Coalition represents patient and provider groups dedicated to preserving patient access to Medicare Part B covered services. We urge the Department of Health and Human Services (HHS) and Centers for Medicare & Medicaid Services (CMS) to restore unfettered access to Medicare Part B covered drugs for beneficiaries enrolled in Medicare Advantage (MA) plans. MA plans have been using prior authorization restrictions as a barrier to timely delivery of essential Medicare Part B covered drugs to beneficiaries, putting the health of these patients at risk. MA plans are required by law to cover the same services as fee-for-service (FFS) Medicare – plans should not be permitted to use prior authorization to circumvent this requirement.

We appreciate the Administrator’s comments in February emphasizing that “tackling prior authorization,” is “particularly important,” as CMS expands burden reduction efforts across all programs. Clear direction to MA plans that they cannot use prior authorization for Medicare Part B covered services would go a long way to tackling prior authorization and removing burdens that harm patients and providers.

Over 59 million seniors and disabled persons rely on Medicare Part B for critical outpatient services. Through the program, beneficiaries and physicians treat a wide variety of illnesses and chronic conditions that demand careful monitoring and management, including cancer, rheumatoid arthritis, Crohn’s and other autoimmune conditions, mental illness, eye diseases, and other serious medical conditions. The patients served under Part B are some of the sickest and most vulnerable of Medicare beneficiaries, requiring personalized care.

The complexities of these conditions and how they interact with patients’ existing health concerns requires a level of flexibility in how physicians approach treatment. This flexibility is being denied to over one-third of Medicare beneficiaries enrolled in MA plans. According to the Kaiser Family Foundation, 98% of MA plans impose prior authorization on Medicare Part B covered drugs. Prior authorization barriers create obstacles in the ability of vulnerable seniors and disabled beneficiaries to access medicines, resulting in treatment delays that can have deadly consequences. Providers face additional administrative burdens, complicating their ability to precisely tailor and adjust treatments to provide clinically appropriate medical care.

Delays or inappropriate changes in treatment from burdensome utilization management requirements could have serious, negative consequences for patients who rely on the access and coverage provided by the Medicare Part B program. Disruptions in care could also lead to higher overall health care costs in the future, as once managed or treatable conditions accelerate without proper treatment.
An HHS Office of Inspector General (OIG) 2018 study validates our concerns. The OIG found that MA plans overturned 75 percent of their own denials from 2014-2016, while independent reviewers subsequently overturned additional denials in favor of beneficiaries and providers. The OIG cautioned that “the high number of overturned denials raises concerns that some Medicare Advantage beneficiaries and providers were initially denied services and payments that should have been provided.” Further, the OIG warned that MA plans “that inappropriately deny the authorization of services for beneficiaries, or payments to healthcare providers who care for beneficiaries, may not only contribute to physical or financial harm, but they also misuse Medicare Program dollars that CMS pays for beneficiary healthcare.” Moreover, MA plans have waived prior authorization requirements for COVID-19-related services – the need to waive these requirements demonstrates that prior authorization clearly serves to limit patient access to medically necessary treatment.

HHS and CMS action is needed to ensure MA enrollees have the same access to Medicare Part B-covered drugs as beneficiaries in FFS Medicare. We look forward to working with you to rein in MA plans that are inappropriately using prior authorization to deny care to beneficiaries.

Sincerely,

1in9: The Long Island Breast Cancer Action Coalition (Hewlett House)
Aimed Alliance
Alabama Cancer Congress
Alabama Society for the Rheumatic Diseases
Alaska Rheumatology Alliance
Alliance for Patient Access (AfPA)
Alliance of Specialty Medicine
ALS Association Greater Philadelphia Chapter
American Academy of Dermatology Association
American Academy of Neurology
American Academy of Ophthalmology
American Association for Pediatric Ophthalmology and Strabismus (AAPOS)
American Association of Neurological Surgeons
American Autoimmune Related Diseases Association (AARDA)
American Behcet’s Disease Association (ABDA)
American College of Rheumatology
American Gastroenterological Association
American Glaucoma Society
American Osteopathic Colleges of Ophthalmology and Otolaryngology – Head and Neck Surgery (AOCOOG-HNS)
American Society for Gastrointestinal Endoscopy
American Society for Radiation Oncology
American Society of Cataract and Refractive Surgery
American Society of Hematology
American Society of Ophthalmic Plastic and Reconstructive Surgery
American Urological Association
APS Foundation of America, Inc. (APSFA)
Arizona Bioindustry Association, Inc. (AZBio)
Arizona Ophthalmological Society
Arkansas Ophthalmological Society
Global Healthy Living Foundation  
GO2 Foundation for Lung Cancer  
Hawaii Ophthalmological Society  
Heart Rhythm Society  
ICAN - International Cancer Advocacy Network  
Idaho Society of Ophthalmology  
IFAA - International Foundation for Autoimmune & Autoinflammatory Arthritis (AiArthritis)  
IJCAHPO  
Illinois Society of Eye Physicians & Surgeons (ISEPS)  
Indiana Academy of Ophthalmology (IAO)  
Indiana Health Industry Forum (IHIF)  
International Association of Hepatitis Task Forces (IAHTF)  
International Pemphigus and Pemphigoid Foundation  
ION Solutions  
Iowa Academy of Ophthalmology  
Kansas Society of Eye Physicians & Surgeons (KSEPS)  
Kentuckiana Stroke Association  
Kentucky Academy of Eye Physicians & Surgeons  
Large Urology Group Practice Association (LUGPA)  
Louisiana Academy of Eye Physicians and Surgeons  
Lupus and Allied Diseases Association, Inc.  
Lupus Foundation of America  
Lupus Foundation of Arkansas, Inc.  
Maryland Society for the Rheumatic Diseases (MSRD)  
Maryland Society of Eye Physicians and Surgeons  
Massachusetts Society of Eye Physicians and Surgeons (MSEPS)  
Massachusetts, Maine & New Hampshire Rheumatology Association  
Medical Oncology Association of Southern California, Inc. (MOASC)  
Michigan Society of Eye Physicians and Surgeons (MiSEPS)  
Michigan Society of Hematology and Oncology (MSHO)  
MidWest Rheumatology Association  
Minnesota Academy of Ophthalmology  
Mississippi Academy of Eye Physicians and Surgeons  
Mississippi Arthritis and Rheumatism Society (MSARS)  
Mississippi Oncology Society  
Missouri Society of Eye Physicians & Surgeons (MoSEPS)  
MLD Foundation  
Montana Academy of Ophthalmology  
Montana Bioscience Association  
Multiple Sclerosis Foundation  
National Alliance on Mental Illness (NAMI) Rockland  
National Infusion Center Association (NICA)  
National Medical Association - Ophthalmology Section  
National Organization of Rheumatology Managers (NORM)  
Nebraska Academy of Eye Physicians and Surgeons  
Nebraska Rheumatology Society  
Nevada Academy of Ophthalmology  
New Jersey Mayors Committee on Life Sciences
New Jersey Rheumatology Association (NJRA)
New Mexico Academy of Ophthalmology
New Mexico Osteopathic Medical Association
New York State Ophthalmological Society
New York State Rheumatology Society
North Carolina Rheumatology Association (NCRA)
North Carolina Society of Eye Physicians and Surgeons (NCSEPS)
North Dakota Society of Eye Physicians and Surgeons
Ohio Association of Rheumatology
Ohio Hematology Oncology Society
Ohio Ophthalmological Society (OOS)
Oklahoma Academy of Ophthalmology
Oncology Managers of Florida
Outpatient Ophthalmic Surgery Society
Patients Rising Now
Pennsylvania Academy of Ophthalmology
Physicians Advocacy Institute
Prevent Blindness
Prevent Blindness, Ohio Affiliate
Puerto Rico Society of Ophthalmology
Regarding Cancer
Rheumatology Alliance of Louisiana (RAL)
Rheumatology Association of Minnesota and the Dakotas
Rheumatology Association of Nevada
Rhode Island Society of Eye Physicians and Surgeons
Sickle Cell Disease Association of Florida
South Carolina Rheumatism Society
South Dakota Academy of Ophthalmology
South Florida Cancer Association
State of Texas Association of Rheumatologists (STAR)
Support For People With Oral And Head And Neck Cancer, Inc. (SPOHNC)
Survivors Cancer Action Network
Tennessee Academy of Ophthalmology
Tennessee Rheumatology Society
Texas Ophthalmological Association
The Macula Society
The Retina Society
The US Oncology Network
U.S. Pain Foundation
United Ostomy Associations of America (UOAA)
Utah Ophthalmology Society
Vermont Ophthalmological Society
Vets Place Northwest - Welcome Home
Virginia Society of Eye Physicians and Surgeons
Virginia Society of Rheumatologists
Washington (State) Rheumatology Alliance
Washington Academy of Eye Physicians and Surgeons
Washington DC Metropolitan Ophthalmological Society
West Virginia Academy of Eye Physicians & Surgeons
Women in Ophthalmology
Wyoming Epilepsy Association
Wyoming Ophthalmological Society

Cc: Honorable Mitch McConnell, Senate Majority Leader
    Honorable Charles Schumer, Senate Minority Leader
    Honorable Nancy Pelosi, Speaker of the House of Representatives
    Honorable Kevin McCarthy, House Minority Leader
    Honorable Chuck Grassley, Chairman, Senate Finance Committee
    Honorable Ron Wyden, Ranking Member, Senate Finance Committee
    Honorable Richard Neal, Chairman, House Committee on Ways and Means
    Honorable Kevin Brady, Ranking Member, House Committee on Ways and Means
    Honorable Frank Pallone, Jr., Chairman, House Committee on Energy and Commerce
    Honorable Greg Walden, Ranking Member, House Committee on Energy and Commerce