

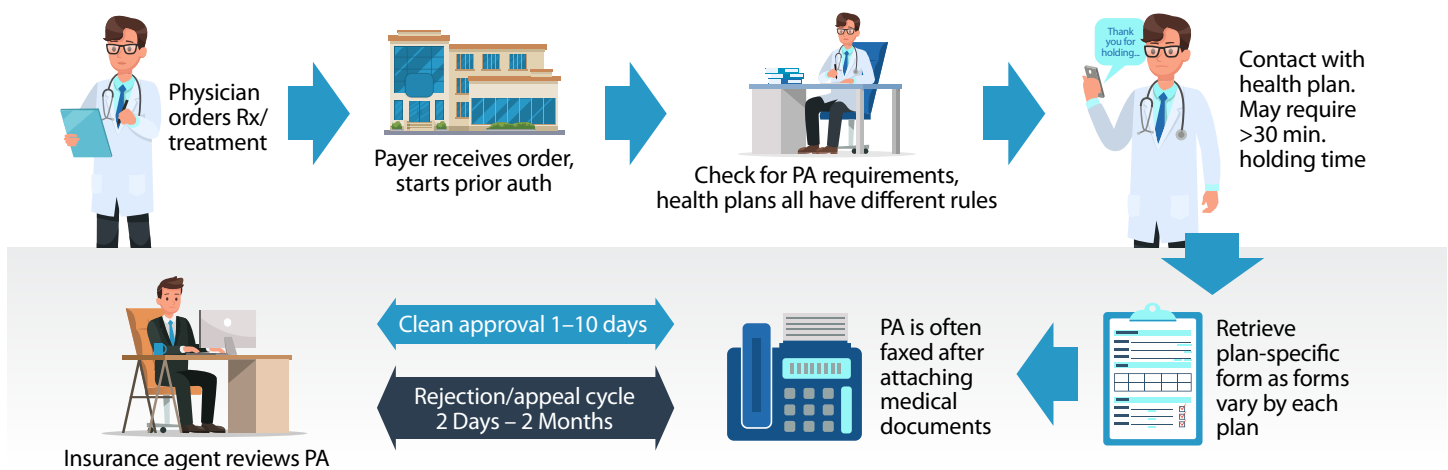
Modernize Prior Authorization to Ensure Access to Care

Congress: Support legislation reforming prior authorization

- ✓ **Would improve the transparency and efficiency of prior authorization processes**, ensuring patients can access care without health jeopardizing delays.
- ✓ **Bipartisan legislation in discussion** with support from Reps. Kelly (R-PA), DelBene (D-WA), Marshall (R-KS), and Bera (D-CA) to address serious issues with prior authorization.

Prior authorization is a process whereby a prescriber must obtain approval from an insurance plan before a patient's prescribed treatment can start. This is a time-consuming process that often involves a patient going to the pharmacy only to be turned away because the prior authorization has not been attained. The vast majority of requests are eventually approved—nearly 100% of some treatments—yet prior authorization can delay treatment for weeks or even months. When treatment is delayed or the patient does return for the prescription, the consequences can be devastating. According to a 2017 AMA survey, 92% of physicians reported that prior authorization caused delays in their patients' care, and 78% reported that prior authorizations sometimes led to treatment abandonment. Additionally, prior authorization burdens physicians who spend time away from patient care, or need to hire staff dedicated to seeking approval from insurers for medications they determined their patients need.

Current Prior Authorization Process



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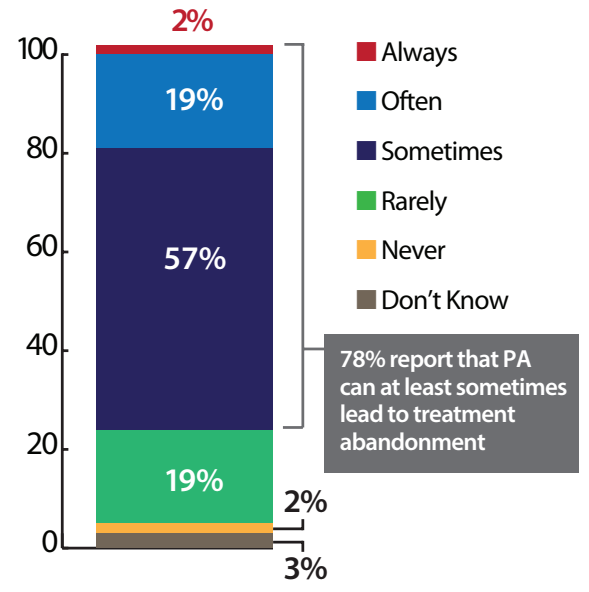
A consensus statement on PA was released in 2018 by the American Medical Association, American Hospital Association, America’s Health Insurance Plans, and others. The statement called for reducing the number of providers subject to PA requirements based on their performance, adherence to evidence-based practices, or participation in a value-based agreement with the payer. It also called for eliminating PA requirements for some therapies, and improving transparency of formulary information and coverage restrictions at the point of care.

Congress Should:
 Protect patients’ ability to obtain in a timely fashion medications, testing, and services that doctors recommend by:

- Requiring PA to be standardized, and allowing for electronic options
- Requiring insurance to be transparent regarding coverage restrictions made at point of care
- Eliminating PA for therapies that are most often approved

Abandoned Treatment Associated with PA

For those patients whose treatment requires PA, how often do issues related to this process lead to patients abandoning their recommended course of treatment?



Total does not equal 100% due to rounding.

Source: 2017 AMA Survey

The American College of Rheumatology supports prior authorization reform legislation to help Medicare patients access needed medications more quickly by modernizing prior authorization requirements and improving communication.