

United States Senate

WASHINGTON, DC 20510-0609

October 28, 2021

The Honorable Chiquita Brooks-LaSure
Administrator
U.S. Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, M.D. 21244

Dear Administrator Brooks-LaSure:

We write to thank you for your commitment to ensuring timely access to health care for all Americans, and to request an update on the U.S. Centers for Medicare and Medicaid Services' (CMS) efforts to streamline prior authorization protocols across programs. We encourage you to take additional steps to strengthen prior authorization policies and make them more efficient for all Americans, including Medicare Advantage (MA) beneficiaries.

We appreciate the recent actions CMS has taken related to prior authorization that attempt to strike a balance between program integrity and patient access to care. In December 2020, CMS issued a proposed rule to modernize processes related to prior authorization that would reduce significant burdens on health care providers and patients and improve patient outcomes.¹ This notice of proposed rulemaking (NPRM) would have made changes to streamline prior authorization processes across Medicaid, Children's Health Insurance Program (CHIP), and federally-facilitated exchange (FFE) plans. To our disappointment, CMS formally withdrew these proposed changes to the prior authorization process in March 2021.

More recently, CMS issued a memorandum to MA plans, strongly encouraging all MA plans to waive or relax prior authorization requirements and utilization management processes related to COVID-19.² While we agree that prior authorization, when used appropriately, is an important tool for payers to manage costs and ensure program integrity, we support CMS's efforts to protect beneficiaries, increase transparency around prior authorization requirements, and streamline prior authorization processes for patients, providers, and health plans. We request an update on CMS's plans to revisit and advance policies to modernize and improve prior authorization for patients and providers.

As you have stated to Members of Congress, "providers and beneficiaries should not have to jump through unnecessary hoops for access to medically appropriate care."³ The bipartisan, bicameral *Improving Seniors' Timely Access to Care Act* proposes a balanced approach to prior authorization in the MA program that would remove barriers to patients' timely access to care and allow providers to spend more time treating patients and less on paperwork hurdles.

¹ U.S. Centers for Medicare and Medicaid Services (CMS), Reducing Provider and Patient Burden, and Promoting Patients' Electronic Access to Health Information (CMS-9123-P), <https://www.regulations.gov/docket/CMS-2020-0157/unified-agenda>.

² CMS, Health Plan Management System Memo, COVID-19 Flexibilities, May 22, 2021, <https://www.cms.gov/files/document/covid-19-updated-guidance-ma-and-part-d-plan-sponsors-may-22-2020.pdf>.

³ U.S. Senate Finance Committee, Finance Committee Hearing for Chiquita Brooks-LaSure, Nominee for CMS Administrator, Questions for the Record from Senator Brown, April 15, 2021, <https://www.finance.senate.gov/imo/media/doc/CBL%20Answers%20for%20the%20Record%20-%20Senate%20Committee%20on%20Finance.pdf>.

We request an update on your recommended next steps for improving and streamlining prior authorization processes in a manner that benefits providers, health plans, and taxpayers, but especially beneficiaries – including MA enrollees. We urge you to build on CMS’s prior work and use your regulatory authority to improve the prior authorization process across health plans, in line with the *Improving Seniors’ Timely Access to Care Act*, by:

- establishing an electronic, “real-time” prior authorization process across federal programs, including MA plans;
- reducing administrative burden for both providers and health plans;
- minimizing the use of prior authorization for routinely approved items and services;
- increasing transparency around prior authorization requirements and clinical information needed to support decisions; and
- expanding beneficiary protections.

We look forward to learning more about CMS’s ongoing work to preserve timely access to medically necessary care, and we look forward to working together to streamline prior authorization protocols and implementing reforms that will improve the transparency and efficiency of prior authorization protocols in a manner that benefits beneficiaries.

Thank you again for your dedication to this matter.

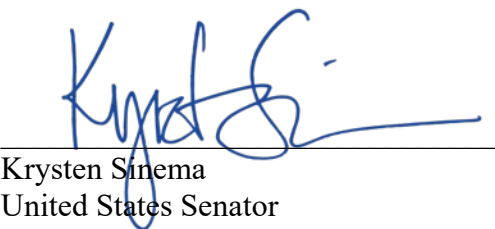
Sincerely,



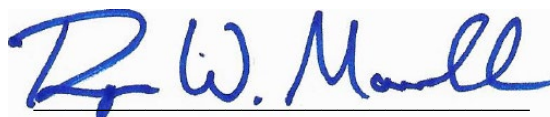
Sherrod Brown
United States Senator



John Thune
United States Senator



Krysten Sinema
United States Senator



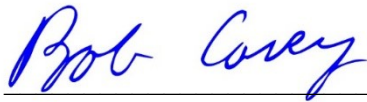
Roger Marshall, M.D.
United States Senator



Michael F. Bennet
United States Senator



John Barrasso, M.D.
United States Senator

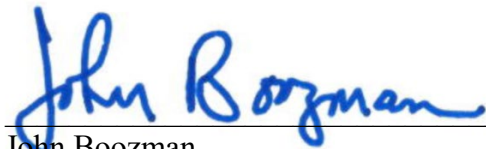


Robert P. Casey, Jr.
United States Senator



Marsha Blackburn
United States Senator

/s/ Thomas R. Carper
Thomas R. Carper
United States Senator



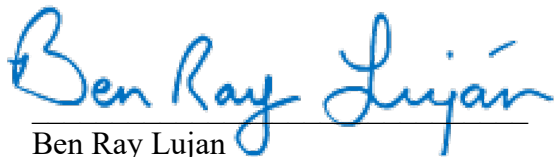
John Boozman
United States Senator



Catherine Cortez Masto
United States Senator



Mike Braun
United States Senator



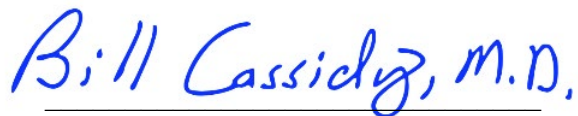
Ben Ray Lujan
United States Senator



Shelley Moore Capito
United States Senator



Jeffrey A. Merkley
United States Senator



Bill Cassidy, M.D.
United States Senator



Jacky Rosen
United States Senator



Susan Collins
United States Senator



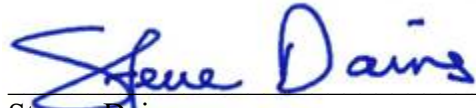
Debbie Stabenow
United States Senator



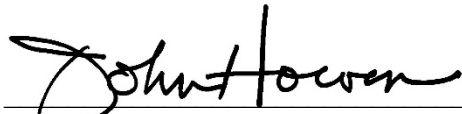
Kevin Cramer
United States Senator



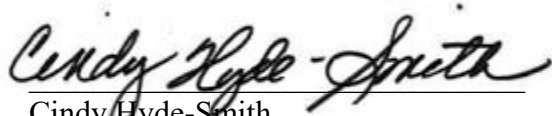
Chris Van Hollen
United States Senator



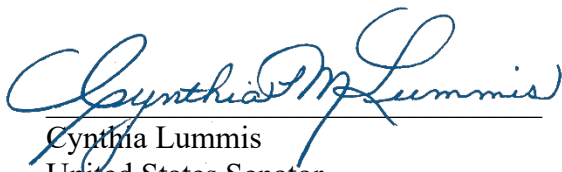
Steven Daines
United States Senator



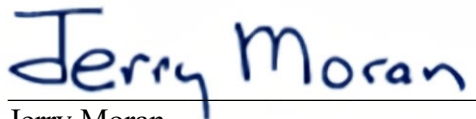
John Hoeven
United States Senator



Cindy Hyde-Smith
United States Senator



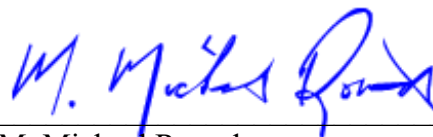
Cynthia Lummis
United States Senator



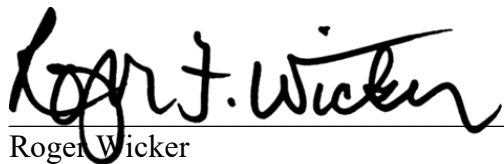
Jerry Moran
United States Senator



Lisa Murkowski
United States Senator



M. Michael Rounds
United States Senator



Roger Wicker
United States Senator



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Coalition Applauds Senate for Introduction of Prior Auth. Reform Legislation ***Coalition Calls for Congressional Action in 2021***

WASHINGTON, DC, October 20, 2021— The Regulatory Relief Coalition (RRC) is thrilled to support legislation introduced this week in the Senate, S. 3018, that mirrors H.R. 3173, the Improving Seniors' Timely Access to Care Act of 2021. Original sponsors of the Senate bill include Senators **Roger Marshall**, MD (R-KS), **Kyrsten Sinema** (D-AZ), and **John Thune** (R-SD).

S. 3018/H.R. 3173 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 Medicare beneficiaries. The legislation would require electronic prior authorization, improve transparency for beneficiaries and providers alike, and increase Centers for Medicare & Medicaid Services (CMS) oversight on how Medicare Advantage (MA) plans use prior authorization.

[Endorsed](#) by more than 300 national and state patient, physician, health care professional and other health care stakeholder organizations, the House companion legislation reached a significant milestone with over one-half of the U.S. House of Representatives co-sponsoring the legislation earlier this month. The House legislation is led by Reps. **Suzan DelBene** (D-WA), **Mike Kelly** (R-PA), **Ami Bera**, MD, (D-CA), and **Larry Bucshon**, MD, (R-IN).

"We are ready for action," said **John K. Ratliff**, MD, a practicing neurosurgeon at Stanford University. "With the Senate joining the House in this bipartisan, commonsense legislation, Congress is well positioned to act now to ensure that patients receive access to medically necessary services," he added.

"We enthusiastically applaud the Senators who are advancing this legislation," said ophthalmologist George A. Williams, MD, Senior Secretary for Advocacy of the **American Academy of Ophthalmology**. "On the heels of the House bill gaining 218 co-sponsors, the Senate's action is an excellent sign that Congress can act now to protect patients," he added.

Based on a consensus statement on prior authorization reform adopted by leading national organizations representing physicians, medical groups, hospitals, pharmacists, and health plans, the Improving Seniors' Timely Access to Care Act of 2021 would:

- Establish an electronic prior authorization (ePA) program and require MA plans to adopt ePA capabilities.
- Require the Secretary of Health and Human Services to establish a list of items and services eligible for real-time decisions under an MA ePA program.

- Standardize and streamline the prior authorization process for routinely approved items and services.
- Ensure prior authorization requests are reviewed by qualified medical personnel.
- Increase transparency around MA prior authorization requirements and their use.
- Protect beneficiaries from any disruptions in care due to prior authorization requirements as they transition between MA plans.

The Regulatory Relief Coalition (RRC) is a group of fifteen national physician specialty and two allied organizations advocating for a reduction in Medicare program regulatory burdens to protect patients' timely access to care, allowing physicians to spend more time with their patients.

RRC Members: American Academy of Family Physicians, the American Academy of Neurology, American Academy of Ophthalmology, American Academy of Orthopedic Surgeons, American Association of Neurological Surgeons, College of Cardiology, American College of Rheumatology, American College of Surgeons, American Gastroenterological Association, American Osteopathic Association, Association for Clinical Oncology, Congress of Neurological Surgeons, Medical Group Management Association, National Association of Spine Specialists, Society for Cardiovascular Angiography and Interventions.

RRC Allies: Premier, Inc. and American Medical Rehabilitation Providers Association

H.R. 3173, Improving Seniors' Timely Access to Care Act of 2021

Endorsements as of 5/18/2021

National Supporters

- ACCSES
- Accuray, Inc.
- Aimed Alliance
- Alliance for Aging Research
- Alliance for Patient Access
- Alliance of Specialty Medicine
- American Academy of Family Physicians
- American Academy of Neurology
- American Academy of Ophthalmology
- American Academy of PAs
- American Association of Clinical Urologists
- American Association of Neurological Surgeons
- American Association of Orthopaedic Surgeons(AAOS)
- American Association on Health and Disability
- American Clinical Laboratory Association
- American College of Cardiology
- American College of Gastroenterology
- American College of Mohs Surgery
- American College of Obstetricians and Gynecologists
- American College of Osteopathic Surgeons
- American College of Rheumatology
- American College of Surgeons
- American Gastroenterological Association
- American Medical Association
- American Medical Rehabilitation Providers Association
- American Nurses Association
- American Osteopathic Association
- American Physical Therapy Association
- American Society for Gastrointestinal Endoscopy
- American Society for Radiation Oncology
- American Society of Anesthesiologists
- American Society of Breast Surgeons
- American Society of Nuclear Cardiology
- American Society of Retina Specialists
- American Society of Transplant Surgeons (ASTS)
- American Urogynecologic Society
- Association for Clinical Oncology
- Association of Academic Physiatrists
- Association of Community Cancer Centers (ACCC)
- Association of Freestanding Radiation Oncology Centers
- Brain Injury Association of America
- Bridge the Gap - SYNGAP Education and Research Foundation
- California Medical Association
- Cancer Support Community
- Case Management Society of America
- Chris CJ Johnson Foundation Inc.
- Chronic Care Policy Alliance
- Coalition of Long-Term Acute-Care Hospitals
- Community Liver Alliance
- Community Oncology Alliance
- Congress of Clinical Rheumatology
- Congress of Neurological Surgeons
- Depression and Bipolar Support Alliance
- Diabetes Leadership Council
- Diabetes Patient Advocacy Coalition
- Driven To Cure
- Epilepsy Foundation
- Federation of American Hospitals

- Ferrell Foundation
- Global Liver Institute
- GO2 Foundation for Lung Cancer
- International Essential Tremor Foundation
- International Foundation for Autoimmune & Autoinflammatory Arthritis (AiArthritis)
- Judy Nicholson Kidney Cancer Foundation
- KCCure (Kidney Cancer Research Alliance)
- Kidney Cancer Association
- KidneyCAN
- Lakeshore Foundation
- LeadingAge
- Lupus and Allied Diseases Association, Inc.
- Medical Group Management Association
- Medical Oncology Association of Southern California (MOASC)
- Multiple Sclerosis Association of America
- National Alliance of Safety-Net Hospitals (NASH)
- National Association of Spine Specialists
- National Association of State Head Injury Administrators
- National Community Pharmacists Association
- National Comprehensive Cancer Network
- National Hispanic Medical Association
- National Kidney Foundation
- National Patient Advocate Foundation
- Patients Rising
- Patients Rising Now
- Physician Hospitals of America
- Premier
- Prostate Network
- Pulmonary Fibrosis Foundation
- R.M.C. Inc.
- Regulatory Relief Coalition (RRC)
- Remote Cardiac Services Providers Group (RCSPG)
- RetireSafe
- Society for Cardiovascular Angiography and Interventions
- Society for Vascular Surgery
- Society of Gynecologic Oncology
- Susan G. Komen
- The American Occupational Therapy Association
- The Headache and Migraine Policy Forum
- The Michael J. Fox Foundation for Parkinson's Research
- VHL Alliance
- ZERO - The End of Prostate Cancer

State Supporters

- Alabama Society for the Rheumatic Diseases (ASRD)
- Arkansas Orthopaedic Society
- Arkansas Rheumatology Association
- MidWest Rheumatology Association
- North Dakota Medical Association
- Pennsylvania Rheumatology Society
- Pennsylvania Society of Oncology & Hematology
- The Hospital and Healthsystem Association of Pennsylvania (HAP)
- Washington Rheumatology Alliance
- West Virginia Orthopaedic Society
- Neurosurgical Society of the Virginias
- Illinois State Neurosurgical Society
- New York State Neurosurgical Society
- Community Liver Alliance
- Community Care Network of Kansas
- Life Sciences Pennsylvania