From state legislatures to Capitol Hill, the AMA’s push to reduce prior authorization burdens on physicians and eradicate the dangers they pose to patient care continues.

It’s been more than three years since the AMA and organizations representing pharmacists, hospitals and medical groups joined with trade associations such as America’s Health Insurance Plans (AHIP) and the Blue Cross Blue Shield Association to release a consensus statement on improving the prior authorization process (PDF).

The consensus statement marked a significant turning point for the sides to come together and acknowledge that prior authorization was out of control and must be reformed, Heather McComas explained on a recent ReachMD podcast, “Prior Authorization and the AMA’s Push for Reform.” McComas is the AMA’s director of administrative simplification initiatives.

While there haven’t been significant changes yet, the consensus statement and the AMA’s Fix Prior Authorization campaign have been a catalyst for action at the federal level. Find AMA prior authorization resources to support reform, improve practice efficiency and provide data to highlight the need for change.

The Improving Seniors’ Timely Access to Care Act (HR 3173) has been introduced in the U.S. House of Representatives and in just a few months has garnered more than hundreds of co-sponsors from both sides of the aisle, Chris Sherin, the AMA’s assistant director of congressional affairs, told listeners. Two of the bill’s four lead sponsors are physicians. More than half of the House’s 435 members have signed on as co-sponsors.

The bill tries “to simplify, standardize and streamline prior authorization for items and services within the Medicare Advantage program. It doesn’t touch on pharmaceuticals, but it very much matches many of the things that are in the consensus statement,” Sherin said.

He believes the bill has a “solid” chance of becoming law, but still has some hurdles to overcome.
AHIP, while onboard with the consensus statement, likely has some reservations about the legislation that need to be overcome. A Senate companion bill still was introduced by Sens. Roger Marshall, MD, R-Kan., Krysten Sinema, D-Ariz., and John Thune, R-S.D.

“Having served as a physician in rural Kansas for decades, my top priority has always been to provide quality care to my patients,” said Dr. Marshall in a statement. “This legislation cuts the red tape hindering health care providers across the nation from providing our seniors with quality care in a timely manner. The commonsense solutions we are offering were formed in partnership with hundreds of national and state organizations over the last two years, and I am honored to lead this bipartisan, bicameral effort alongside Sens. Sinema and Thune.”

The AMA’s Sherin said that “overall, you’re seeing some strong bipartisan support and over a two-year Congress, hopefully good things can happen and we can get it over the finish line.”

Read more about how prior authorization’s burdens continued even as COVID-19 peaked last winter.

At the state level

The AMA also continues its push to work with state medical associations, national medical specialty societies and other stakeholders to reform prior authorization in state legislatures, said Emily Carroll, senior legislative attorney for the AMA. Illinois, Georgia and Texas saw their legislatures pass some major reforms this year.

The AMA has model legislation (PDF) and an issue brief (PDF) that medical societies can use to begin the state legislative process. The model legislation includes language to improve turnaround time on prior authorizations and appeals and addresses the qualifications of people that are doing the approvals and denials, among other reforms.

“The need to address prior authorization has become more pressing for physician practices that are getting crushed by administrative requirements left and right,” Carroll said. “Prior authorization is something that doesn’t have to be happening, especially in the volume that it is happening and, in fact, is essentially harmful to patients. So, I think state legislatures are really recognizing that things have to change here.”

“We’re not asking for prior authorization to go away, but we are asking for it to be reduced and streamlined to decrease these delays in care and all the harm that’s associated with those delays and denials,” Carroll added. “That’s where our reform efforts are focused, and we'll continue to work hard to push for that kind of change.”

Learn about a new physician “gold card” law that will cut prior authorization delays.