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WHA-Backed Federal Prior Auth Legislation Reintroduced as New GAO Report Exposes Further Prior Auth Abuse

On June 12, a [group of bipartisan legislators reintroduced](#) a revamped version of the Improving Seniors' Timely Access to Care Act, legislation meant to curb prior authorization (PA) abuse in Medicare Advantage.

The legislation had passed the U.S. House unanimously in 2022 but stalled in the U.S. Senate after the Congressional Budget Office (CBO) estimated its cost at \$16 billion. The [2024 version of this legislation](#) scores as cost neutral from CBO due to CMS having finalized rulemaking effectuating certain aspects of the previous legislation to reduce the score by \$4 billion. Additionally, the authors decided to remove real-time decision requirements and expedited determinations that had been in the previous iteration of the legislation.

To address these concerns in a cost-neutral manner, the new legislation will require a public report on establishing real-time decisions and will clarify CMS' authority to set expedited determinations and establish timelines for certain aspects of the PA process. Lead Senate author Roger Marshall (R-KS) said he was hopeful legislators had taken care of the major concerns from last session that would allow Congress to quickly pass this legislation. "As a physician, I understand the frustration this arbitrary process is causing health care practices across the country and the headaches it creates for our nurses," said Marshall in his press release announcing the legislation. "With the improvements we've made there is no reason we should not quickly get this bill signed into law," he added.

WHA joined [a group of more than 370 national and state organizations](#), including the American Hospital Association, that have already endorsed the new legislation. "This legislation will help drive health plan accountability by both streamlining the PA process and requiring health insurers to publicly reveal what services are subject to PA, as well as the volumes of denials, appeals, and other unnecessary costs and bureaucracy prior authorization adds to the health care system under Medicare Advantage," said WHA President and CEO Eric Borgerding.

A [section-by-section summary of the new legislation may be found here](#). Contact WHA Vice President of Federal and State Relations [Jon Hoelter](#) with questions.

Other Articles in this Issue

- [WHA Spotlights Scope of Insurer and Middlemen Consolidation in Letter to HHS, FTC](#)
- [GAO Recommends CMS Enhance Prior Authorization Oversight in Medicaid Managed Care](#)
- [WHA-Backed Federal Prior Auth Legislation Reintroduced as New GAO Report Exposes Further Prior Auth Abuse](#)
- [WHA Expresses Concerns with Continued Inadequate Payment Updates in 2025 Proposed Inpatient Rule](#)
- [Health Care Emergency Readiness Planning: Innovations in Health Care Surge Capacity Management](#)
- [WHA Information Center Welcomes New Employee, Phyo Aung](#)
- [Another Successful Year for the WHA Health Care Leadership Academy as it Graduates Latest Cohort](#)