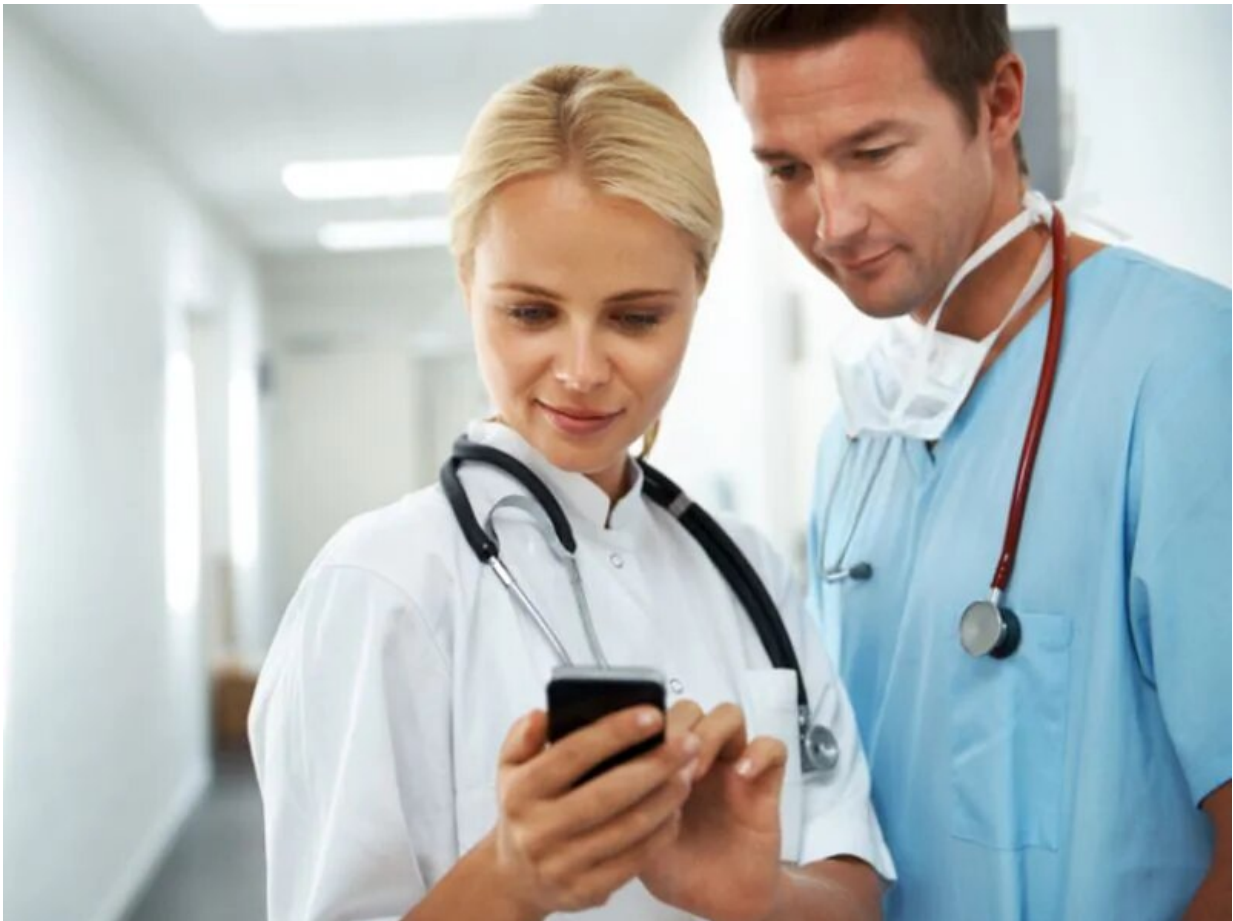


Health plans not implementing prior authorization reforms

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(HealthDay)—Physicians say prior authorization (PA) continues to

interfere with patient care and can lead to adverse clinical consequences, according to the results of a survey released by the American Medical Association.

In December 2019, the AMA surveyed 1,000 physicians (40 percent [primary care](#)) to assess progress in implementing each of the five areas of [prior authorization](#) reform outlined in the 2018 consensus statement, which was signed by two trade organizations representing payers.

According to the results of the survey, the vast majority of physicians (86 percent) reported a "high or extremely high" burden associated with PAs, and the same number reported an increasing burden during the past five years. On average, practices complete 33 PAs per physicians per week, with nearly one-third of physicians having staff who work exclusively on PA. Nearly two-thirds of physicians reported that their offices wait at least one business day for a PA decision. For patients whose treatment requires PA, 91 percent of doctors reported associated delays in care. One-quarter of physicians reported that PA led to a serious adverse event for a patient in their care, while three-quarters reported that PA can at least sometimes lead to treatment abandonment.

"Almost two and a half years after our [consensus statement](#), the sad fact is little progress has been made toward the reform goals," Susan R. Bailey, M.D., president of the AMA, said in a statement. "The health insurance industry's failure to achieve agreed-upon improvements illustrates a clear need for legislation."

More information: [Press Release](#)
[Physician Survey](#)

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