The National Committee applauds the House Committee on Ways and Means Chairman, Richard Neal, for marking up the Improving Seniors' Timely Access to Care Act. Recently, the Inspector General for the U.S. Department of Health and Human Services (HHS) found that 13 percent of denials made by Medicare Advantage (MA) plan for prior authorizations were improper. That's reason enough for why this legislation is so desperately needed to help MA beneficiaries receive the same service and treatments available under traditional Medicare.

In particular, we thank Chairman Neal for improving on prior versions of the bill to better protect beneficiaries, including strengthening the transparency provisions and providing enrollees access to prior authorization criteria.

Specifically, the bill streamlines prior authorization review for items and services that are routinely approved by requiring "real time" decisions for prior authorization requests as defined by the HHS Secretary, shortens Medicare Advantage plan timeframes for all prior authorization decisions and requires plans to provide the criteria for prior authorization to both providers and enrollees. Further, the bill creates important transparency around the use of prior authorization requiring health plans to provide detailed information about the nature and frequency of requests, denials and appeals, and directs HHS, MedPAC and the Government Accountability Office to report on the status of implementation.

The National Committee stands ready to help Chairman Neal make improvements to the Improving Seniors' Timely Access to Care Act that ensure seniors have better access to essential health care and we will continue to work with the committee to enact this needed legislation.

Max Richtman
President and CEO
National Committee to Preserve Social Security and Medicare