



July 27, 2022

The Honorable Richard Neal
Chairman
Ways & Means Committee
House of Representatives
Washington, DC 20515

The Honorable Kevin Brady
Ranking Member
Ways & Means Committee
House of Representatives
Washington, DC 20515

Dear Chairman Neal and Ranking Member Brady:

AARP, on behalf of our nearly 38 million members and all older Americans nationwide, writes in support of H.R. 8487, the *Improving Seniors' Timely Access to Care Act of 2022*, introduced by Representatives DelBene, Kelly, Bera and Bucshon. This bipartisan bill provides the necessary framework for the Center for Medicare and Medicaid Services (CMS) to address findings from the Department of Health and Human Services' Office of Inspector General (HHS OIG) that Medicare Advantage (MA) enrollees are denied prior authorization and payment requests for care more often than traditional Medicare enrollees.

The April 2022 HHS OIG report was troubling. Millions of older Americans rely on MA for their health coverage and based on consumer surveys, are generally satisfied with the quality and affordability of their coverage. However, the report demonstrated the need for key improvements to ensure that beneficiaries can get the timely care that they need. The report found that 13 percent of prior authorization request denials for MA beneficiaries would have been approved under traditional Medicare, leading to delays for medically necessary services. As enrollment in MA continues to increase, appropriate safeguards are needed to ensure that those enrollees maintain access to needed health care services without unnecessary delay.

We are pleased that the Committee is marking up legislation that will better protect MA enrollees from inappropriate denials of prior authorization requests and take an important first step in implementing the OIG's recommendations to approve oversight of prior authorization requests submitted to MA providers.

The legislation's language requiring MA providers to submit annually to HHS a range of data points around the frequency and types of prior authorization denials will provide a clearer picture of the scope of the OIG's findings and inform ways to better eliminate potentially inappropriate prior authorization requests. This data may also provide insights on how to address payment request denials, which the OIG report found also disproportionately impacted MA beneficiaries. Additionally, we are supportive of language around enrollee protection standards that will establish a collaborative process between beneficiaries, providers, and CMS to ensure that denials of prior authorization requests no longer produce obstacles to needed care.

We thank you for marking up this legislation. It is critical that all Medicare beneficiaries – whether enrolled in MA or traditional Medicare – are treated equitably and have timely access to all necessary health care services. If you have any questions, please do not hesitate to contact me or have your staff contact Brendan Rose on our Government Affairs team at 202-434-3770 or brose@aarpp.org.

Sincerely,

A handwritten signature in purple ink that reads "Bill Sweeney". The signature is fluid and cursive, with the first name "Bill" and last name "Sweeney" clearly distinguishable.

Bill Sweeney
Senior Vice President
Government Affairs