The Regulatory Relief Coalition (RRC) calls on all health plans to suspend prior authorization and similar utilization review requirements for both COVID-19 and non-COVID-19-related services until normalcy in the health care delivery system is restored.

- Providers in many densely populated areas continue to provide only the most urgent and critical non-COVID services. Removing barriers to patients in need of vital medical, surgical and biopharmaceutical treatments — whether COVID-19-treatment related or not — is more important now than ever before.

- Throughout the country, practices continue to operate on significantly reduced staff. Dedicating precious resources to the task of seeking prior authorization of urgently needed or long-delayed services is not in the interests of the patients we serve.

- In areas where the healthcare system is beginning to recover from the crisis sufficiently to treat non-emergent cases, providers are faced with the challenge of providing long-delayed medically necessary services to patients whose health care needs were postponed during the crisis. Prior authorization burdens would only further delay this care.

- Medicaid plans have already eliminated many prior authorization requirements, and CMS has urged Medicare Advantage Plans to exercise flexibility regarding prior authorization “to facilitate access to services with less burden on beneficiaries, plans, and providers.”

- While some health plans have lessened barriers to care through suspension of some prior authorization, others are planning to increase prior authorization requirements. In many instances, major health plans’ responses to prior authorization requests have been significantly delayed throughout the country due to COVID-19.

- Examples of patients who are still being required to have prior authorization for necessary treatment include patients with Diabetic Retinopathy and Macular Degeneration who are at immediate risk of losing vision; patients who require immediate spinal surgery to prevent irreversible damage and who have failed conservative therapy; rheumatoid arthritis patients who require biologic therapy that is consistent with national guidelines and who cannot ambulate due to swollen joints; and existing cardiac patients with new chest pain who require prior authorization for stress tests provided in physicians’ offices, but not in hospitals.

During this time of national emergency and its immediate aftermath, we strongly encourage all health plans to waive all prior authorization requirements. By taking this action, health plans will play their part in ensuring that Americans’ access to critical health services is not delayed or denied during the current crisis and its immediate aftermath.
The Regulatory Relief Coalition (RRC) is a group of national physician specialty organizations advocating for regulatory burden reduction in Medicare so that physicians can spend more time treating patients. For further information on RRC, visit our [WEBSITE](#).

- American Academy of Neurology
- American Academy of Ophthalmology
- American Association of Neurological Surgeons
- American Association of Orthopaedic Surgeons
- American College of Cardiology
- American College of Rheumatology
- American College of Surgeons
- American Gastroenterological Association
- American Urological Association
- Association for Clinical Oncology
- Congress of Neurological Surgeons
- National Association of Spine Specialists
- Society for Cardiovascular Angiography and Interventions