IMPROVING SENIORS’ TIMELY ACCESS TO CARE ACT OF 2019 (H.R. 3107)

POSITION

The American Physical Therapy Association (APTA) strongly urges Congress to pass the Improving Seniors’ Timely Access to Care Act of 2019 (H.R. 3107). This legislation would reduce health care providers’ administrative burden by addressing unnecessary preauthorization requirements, ultimately increasing efficiencies in patient care and improving clinical outcomes. H.R. 3107 was introduced by Reps Suzan DelBene (D-WA), Mike Kelly (R-PA), Roger Marshall (R-KS), and Ami Bera (D-CA).

Private insurers, including those that offer Medicare Advantage (MA) products, require health care providers, including physical therapists, to submit an authorization request and receive approval prior to delivering care to their patients. These “prior authorization” requirements increasingly are creating barriers to accessing needed care for patients nationwide. While they may be appropriate in limited circumstances to ensure that patients are receiving appropriate, medically necessary care, the use of such requirements has become increasingly routine, particularly in the MA program. Since plans often routinely approve certain services for which they require prior authorization, the purpose of such utilization control is questionable. APTA believes that when prior authorization is universally imposed on a given service, it merely acts as a barrier to care and adds no value to the health care system.

BACKGROUND

One third of Medicare patients are enrolled in a Medicare Advantage plan, and the Congressional Budget Office projects that approximately 41% of Medicare beneficiaries will be enrolled in Medicare Advantage in 2028.1 MA plans employ prior authorization as a cost-control mechanism, resulting in delays to medically necessary care. Medicare Advantage plans can require enrollees to receive prior authorization before a service will be covered, and nearly 4 out of 5 Medicare Advantage enrollees (79%) are in plans that require prior authorization for some services in 2019.2 Currently, MA enrollees must undergo a prolonged, burdensome process to obtain treatment authorizations. A delay in authorization may severely hinder a patient’s recovery, requiring physical therapists and other providers to decide between furnishing a noncovered service at their own expense, abiding by their ethical obligations, or risking the patient’s health and well-being by waiting for a plan to authorize medically necessary care.

In a recent nationwide survey, physical therapists reported many MA health plans’ use of prior authorization is excessive, creating needless treatment delays and denials which, in turn, are likely to have a negative impact on patients’ health. APTA believes that the Improving Seniors’ Access to Care Act of 2019 (H.R. 3107) would take important steps to address the concerns and challenges reported by survey respondents by improving outcomes, improving the current prior authorization process, and increasing transparency.

IMPROVE PATIENT OUTCOMES

The Improving Seniors’ Timely Access to Care Act would reduce unnecessary burden and increase efficiencies, allowing health care providers to spend more time focusing on their patients instead of time-consuming administrative tasks that do nothing to further the delivery of care.

EXPEDITE ACCESS TO CARE

H.R. 3107 would advance and streamline the current system by establishing an electronic prior authorization process that will help ensure timely processing for items and services that need to be approved. Additionally, this bill would require the Secretary of the US Department of Health and Human Services (HHS) to establish a process for “real-time decisions” for items and services that are routinely approved. With these changes, health care providers will have more time to do what they were trained to do—attend to their patients and provide them with the care that they deserve.

The Improving Seniors’ Timely Access to Care Act also would prevent plans from requiring prior authorization on any additional surgical or other invasive procedure if this procedure is furnished during the perioperative period of an already-approved procedure.

ENSURE ACCOUNTABILITY & TRANSPARENCY

Congress must act to remove the unnecessary burdens that have been impacting patients and providers alike. H.R. 3107 would require MA plans to report to the Centers for Medicare and Medicaid Services (CMS) on the extent of their use of prior authorization and the rate of approvals or denials. Increasing the transparency associated with delays in accessing care caused by prior authorization would ensure accountability and help to inform potential next steps to improving patient access.

As Medicare Advantage continues to grow, careful oversight by policymakers is needed to ensure patient access for the 59 million Medicare beneficiaries.

WHO WE ARE
Physical therapists (PTs) are health care professionals who diagnose and treat individuals of all ages, from newborns to the very old, who have medical problems or other health related conditions that limit their ability to move and perform functional activities in their daily lives. PTs also work with individuals to prevent the loss of mobility before it occurs by developing fitness- and wellness-oriented programs for healthier and more active lifestyles.

Physical therapist assistants (PTAs) provide selective physical therapist interventions under the direction and supervision of physical therapists.

WHAT WE DO
PTs examine each individual and develop a plan of care using treatment techniques to promote the ability to move, reduce pain, restore function, and prevent disability. Under the direction and supervision of the PT, PTAs provide selective physical therapist interventions based on the developed plan of care.

WHERE WE PRACTICE
PTs and PTAs provide care for people in a variety of settings, including outpatient clinics or offices; inpatient rehabilitation facilities; skilled nursing, extended care, or subacute facilities; education or research centers; schools; hospices; industrial, workplace, or other occupational environments; and fitness centers and sports training facilities.

EDUCATION AND LICENSURE
All PTs must receive a degree from an accredited physical therapist program before taking and passing a national licensure exam that permits them to practice. Since 2015, all accredited programs award the doctor of physical therapy degree. State licensure is required in each state in which a PT practices. PTAs must complete a 2-year associate’s degree and are licensed, certified, or registered in most states.

AMERICAN PHYSICAL THERAPY ASSOCIATION
The American Physical Therapy Association is a national organization representing more than 100,000 physical therapists, physical therapist assistants, and students nationwide. Its goal is to foster advancements in physical therapist education, practice, and research.

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