



American Society for  
Gastrointestinal Endoscopy

## RESTORE TIMELY ACCESS TO PATIENT CARE

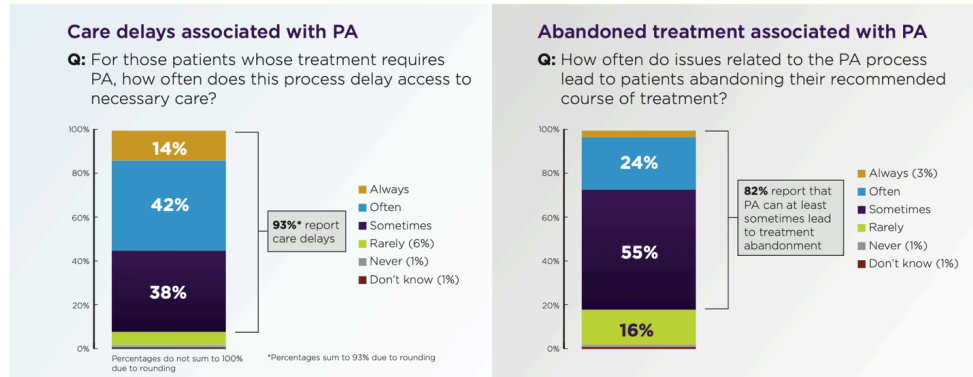
Among the greatest barriers to timely patient care is the prior authorization process. According to a 2021 survey of physicians conducted by the American Medical Association (AMA), 93 percent reported that prior authorization delays access to necessary care.

Moreover, 82 percent reported that prior authorization can lead to treatment abandonment.

Prior authorization requirements also divert time away from patients. The AMA survey found that practices complete 41 prior authorizations on average per physician, per week.

Physicians should be focused on patient care and not on navigating the prior authorization process to get patients their recommended tests, procedures and treatments.

### Patient impact



### Physician impact

On average, practices complete **41** PAs per physician, per week  
(See below, Survey question "B")

Physicians and their staff spend an average of **almost two business days (13 hours)** each week completing PAs  
(See below, Survey question "C")

**Two in five or 40%** of physicians have staff who work exclusively on PA  
(See below, Survey question "D")

**88%** of physicians describe the burden associated with PA as high or extremely high  
(See below, Survey question "E")

With nearly half the Medicare eligible population enrolled in a Medicare Advantage (MA) plan, legislation is urgently needed to reduce the burden of prior authorization on physician practices, as well as to improve patient outcomes by

preventing delays in care and minimizing the number of patients who forego treatment altogether when it is denied or subjected to a lengthy appeal.

Denials of prior authorization requests are raising concerns about beneficiary access to medically necessary care. A report from the Office of the Inspector General found, upon examination of a random sample of prior authorization denials by MA plans, 13 percent met Medicare coverage rules and likely would have been approved for these beneficiaries under original Medicare.

**ASGE endorses the *Improving Seniors' Timely Access to Care Act* (S. 3018 / H.R. 3173), which will increase transparency and streamline prior authorization in the MA program and protect timely access to care for Medicare patients, and calls upon Congress to pass the legislation this year.**