April 16, 2020

Dear Governor,

As medical professional associations representing thousands of physicians in various specialties throughout the country and members of the Regulatory Relief Coalition, we are writing to ask that you require all health plans licensed in the state to waive prior authorization (PA) requirements for all health services for the duration of the national emergency declared by the President. The RRC is a group of national physician specialty organizations advocating for the reduction in administrative burdens that prevent physicians from spending more time treating patients.

The Institute for Health Metrics and Evaluation (IHME) has projected that, by mid-August, the coronavirus pandemic will result in nearly 100,000 American deaths, and that, at its peak, the crisis will result in a national bed shortage of almost 87,674 hospital beds. The pandemic also has completely disrupted the provision of non-hospital services as the entire system scrambles to meet the pressing demands resulting from surges of COVID-19 patients while continuing to care for those with other critical health care needs.

In light of the extraordinary stress that the pandemic is placing on the healthcare system, the Nation’s providers have responded to national calls to limit services to the most urgent and critical services. Only triaged, unavoidable surgeries are being performed in the inpatient setting, and medical admissions are limited to the most critical cases. Removing barriers to patients in need of vital medical, surgical and biopharmaceutical treatments — whether COVID-related or not — is more important now than ever before.

We recognize that many of the Nation’s health care plans have responded to this unprecedented crisis by removing prior authorization (PA) requirements for diagnostic testing and services related to COVID-19, and we appreciate this accommodation. Unfortunately, extensive PA requirements nevertheless remain in effect for the other emergency and urgent care that remains critical even in these troubled times.

Complying with PA requirements consumes considerable resources and complicates scheduling for non-coronavirus related cases that are, by definition, urgent. In addition, many practices are operating on significantly reduced staff. Under these circumstances, we believe that dedicating precious physician, nursing and other clinical and administrative staff to the task of seeking PA
of urgently needed services is not in the public interest. In fact, a number of states have recognized that Medicaid PA requirements should be waived for both COVID-19 and non-COVID care during this national emergency and have requested and received waivers from CMS to suspend PA requirements and extend pre-existing PAs.

During this time of national emergency, we strongly encourage you to instruct those health plans licensed by the state to waive PA requirements for COVID-19 and non-COVID services alike, to facilitate deployment of physicians, nurses and other clinical staff to more urgent tasks.

Sincerely yours,

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
April 16, 2020

Dear Insurance Commissioner,

As medical professional associations representing thousands of physicians in various specialties throughout the country and members of the Regulatory Relief Coalition, we are writing to ask that you require all health plans licensed in the state to waive prior authorization (PA) requirements for all health services for the duration of the national emergency declared by the President. The RRC is a group of national physician specialty organizations advocating for the reduction in administrative burdens that prevent physicians from spending more time treating patients.

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