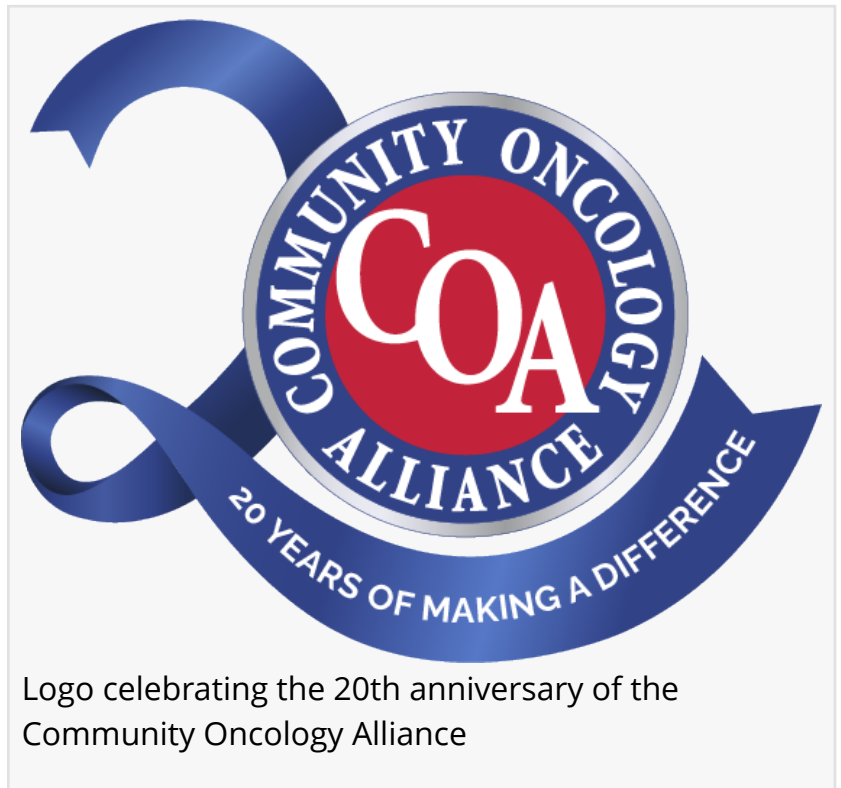


Oncologists Say Prior Authorization is Out of Control and Harming Patients With Cancer

Community Oncology Alliance Submits Formal Comments to CMS on Streamlining the Prior Authorization Process

WASHINGTON, DISTRICT OF COLUMBIA, UNITED STATES, March 10, 2023 /EINPresswire.com/ -- The Community Oncology Alliance (COA) has submitted formal comments to the Centers for Medicare & Medicaid Services (CMS) on a proposed rule for streamlining the prior authorization process. In the comments, COA notes that prior authorizations by insurers in Medicare Advantage and commercial plans are out of control. As a result, patients with cancer and the providers that treat them are forced to suffer inhumane and inane barriers to optimal care.



Rather than being used by insurers to ensure proper treatment and control waste, prior authorizations – along with “fail first” step therapy and other “utilization management” tactics – are being used to control costs. The result is that prior authorizations end up being bureaucratic roadblocks that simply delay or deny Americans with cancer from getting the treatment their providers prescribe. Furthermore, community oncology care teams are forced to waste valuable resources with ridiculous and time-consuming prior authorizations, oftentimes for routine and evidence-based care, and engage in discussions with insurer medical staff that have no background in cancer treatment, let alone in the latest treatments and therapies.

• [Click here to read COA's full comment letter to CMS on prior authorization.](#)

In the comment letter COA notes its appreciation for CMS' goal of reducing the prior authorization burden and support for the proposed rule but is extremely concerned that it excludes drugs. Any effective, comprehensive regulatory initiative to streamline the current onerous prior authorization process must include drugs which are a critical aspect of cancer



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Community Oncology Alliance

treatments.

As a more comprehensive solution to the broken prior authorization system, COA suggests that CMS implement a “gold card” program for prior authorizations, which should include drugs, in Medicare Advantage. “Gold card” programs allow physicians that have a high amount of prior authorization approvals to bypass these requirements for a certain period. This simple solution has been recently adopted in states and could represent a straightforward way to address overutilization and abusive prior authorization requirements.

Read COA’s full letter to CMS on Streamlining the Prior Authorization Process at <https://communityoncology.org/research-and-publications/comment-letters/coa-comments-to-cms-on-streamlining-the-prior-authorization-process/>

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About the Community Oncology Alliance: The Community Oncology Alliance (COA) is a non-profit organization dedicated to advocating for community oncology practices and, most importantly, the patients they serve. For more than 20 years, COA has been the only organization dedicated solely to community oncology where the majority of Americans with cancer are treated. The mission of COA is to ensure that patients with cancer receive quality, affordable, and accessible cancer care in their own communities. More than 5,000 people in the United States are diagnosed with cancer every day and, deaths from the disease have been steadily declining due to earlier detection, diagnosis, and treatment. Learn more at www.CommunityOncology.org. Follow COA on Twitter at www.twitter.com/oncologyCOA or on Facebook at www.facebook.com/CommunityOncologyAlliance.

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