

UPDATE



# neurosurgery

**FOR IMMEDIATE RELEASE**

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## **Neurosurgeons Join Congress in Calling on CMS to Swiftly Finalize Prior Authorization Rules**

*Nearly 300 bipartisan members of Congress urge the agency to align final rules with federal legislation.*

Washington, DC—Today, the American Association of Neurological Surgeons (AANS) and Congress of Neurological Surgeons (CNS) joined 61 bipartisan [senators](#) and 233 members of the [House of Representatives](#) in urging the U.S. Department of Health and Human Services and Centers for Medicare & Medicaid Services (CMS) to swiftly finalize [rules](#) to increase transparency, streamline and standardize prior authorization (PA), including modifying the final rules to more closely align with the *Improving Seniors' Timely Access to Care Act* ([S. 3018/H.R. 3173](#)) by:

- Establishing a mechanism for real-time PA decisions for routinely approved services;
- Requiring Medicare Advantage plans to respond to PA requests for urgently needed care within 24 hours; and
- Requiring Medicare Advantage plans to report detailed transparency metrics related to delays, denials, appeals, etc.

The letters were spearheaded by Senators **Sherrod Brown** (D-Ohio), **John Thune** (R-S.D.), **Kyrsten Sinema** (I-Ariz.) and **Roger Marshall**, MD (R-Kan.) in the Senate and Reps. **Suzan DelBene** (D-Wash.), **Mike Kelly** (R-Pa.), **Ami Bera**, MD, (D-Calif.) and **Larry Bucshon**, MD, (R-Ind.) in the House.

Aligning the regulations with this legislation would protect patients in Medicare Advantage from unnecessary prior authorization practices that limit their timely access to medically necessary care. Last year, the *Improving Seniors' Timely Access to Care Act* — endorsed by more than 500 state and national organizations representing patients, health care providers, and the medical technology and biopharmaceutical industry — garnered 380 combined co-sponsors and unanimously [passed](#) the House of Representatives.

“Our message to policymakers is simple: our patients cannot afford to wait or jump through unnecessary hoops to get care for painful, debilitating and life-threatening neurologic conditions. When finalized, these rules would remove barriers to patients’ timely access to care and allow physicians to spend more time treating patients and less time on paperwork,” said **Russell R. Lonser** MD, FAANS, chair of the department of neurosurgery at The Ohio State University and chair of the AANS/CNS Washington Committee.

On April 5, CMS released another [final rule](#) — which goes into effect on Jan. 1, 2024 — to improve prior authorization in the Medicare Advantage program by ensuring:

- Prior authorizations remain valid through the entire course of treatment and for a 90-day transition if a patient changes plans;
- Medicare Advantage plans follow national and local Medicare coverage policies; and
- Plans do not deny coverage of pre-authorized services.

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*The American Association of Neurological Surgeons (AANS), founded in 1931, and the Congress of Neurological Surgeons (CNS), founded in 1951, are the two largest scientific and educational associations for neurosurgical professionals in the world. These groups represent over 10,000 neurosurgeons worldwide. Neurological surgery is the medical specialty concerned with the prevention, diagnosis, treatment and rehabilitation of disorders that affect the entire nervous system, including the spinal column, spinal cord, brain and peripheral nerves. For more information, please visit [www.aans.org](http://www.aans.org), [www.cns.org](http://www.cns.org) and [www.neurosurgery.org](http://www.neurosurgery.org).*