

The Harm of Prior Authorization

A Call to Protect Patients



VISION HEALTH
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What is Prior Authorization?

While deciding how to best treat a vision condition, patients and providers may encounter prior authorization. Insurers will require providers to submit a prior authorization request before the insurer covers a prescribed treatment.

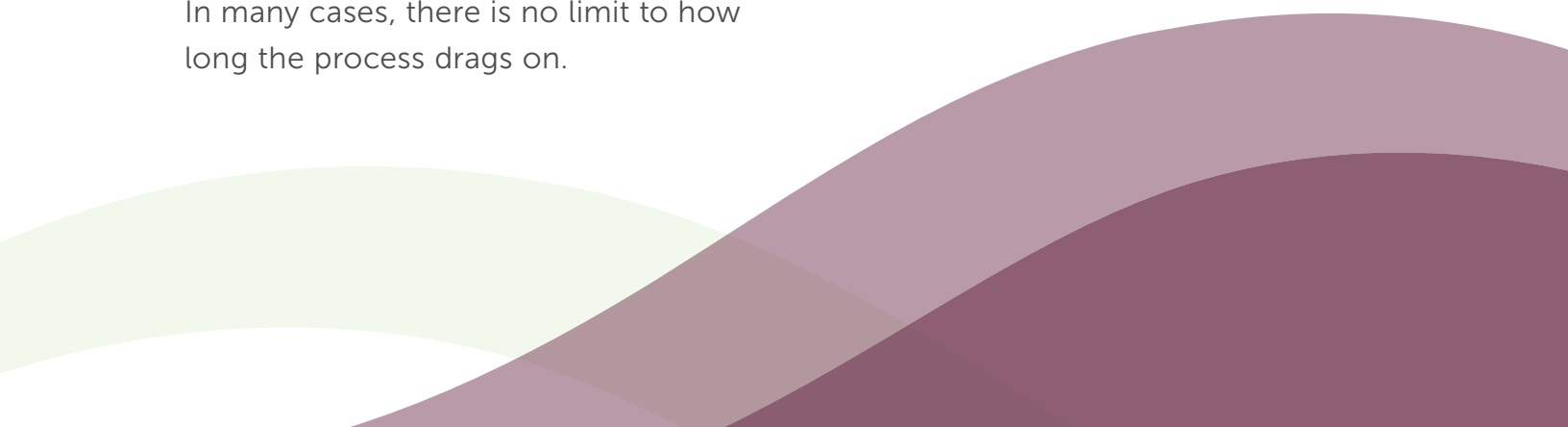
The process of filing prior authorization can be taxing for both patients and providers. Providers may have to fill out extensive paperwork, which takes their attention away from seeing other patients. Meanwhile patients must go without the treatment that they need for their vision condition as they wait for a response.

Prior Authorization Places Profits Before Patients

Prior authorization was originally intended to help health plans control the use of expensive medications. But insurers have now normalized the approach and begun using it for an ever-expanding list of medications – even affordable generics and procedures.

With prior authorization, insurers don't have to cover what is prescribed unless they first approve the treatment. This can require health care providers to complete form after form – and even potentially spend time on the phone with an insurer.

In many cases, there is no limit to how long the process drags on.



Policies to Protect Patient Access

Policies must put patients first, rather than allow insurers to take advantage of this tactic for financial gain.

Two prominent policy solutions are:



Requiring a Straightforward Appeals Process.

Instituting a straightforward appeal process that outlines requirements and timelines will help physicians and patients know what to expect. This is especially important for patients with vision issues who are at risk of irreversible vision damage.



Implementing a Required Response Window.

One way to address the harm of prior authorization is requiring a 48-hour window in which insurers must respond to a submission. Without any required response window, prior authorization requests can cost patients valuable time. While waiting, patients' conditions go untreated.

Vision patients should be able to access treatments based on their condition and personal needs. By limiting the burden of by prior authorization, policies can protect patients and ensure they receive the treatment they need.



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