

# Reforming Prior Authorization in Urology: A Roadmap for Implementing Real-Time Electronic Prior Authorization (ePA)



Pitt  
Medicine



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American  
Urological  
Association

## Problem Overview

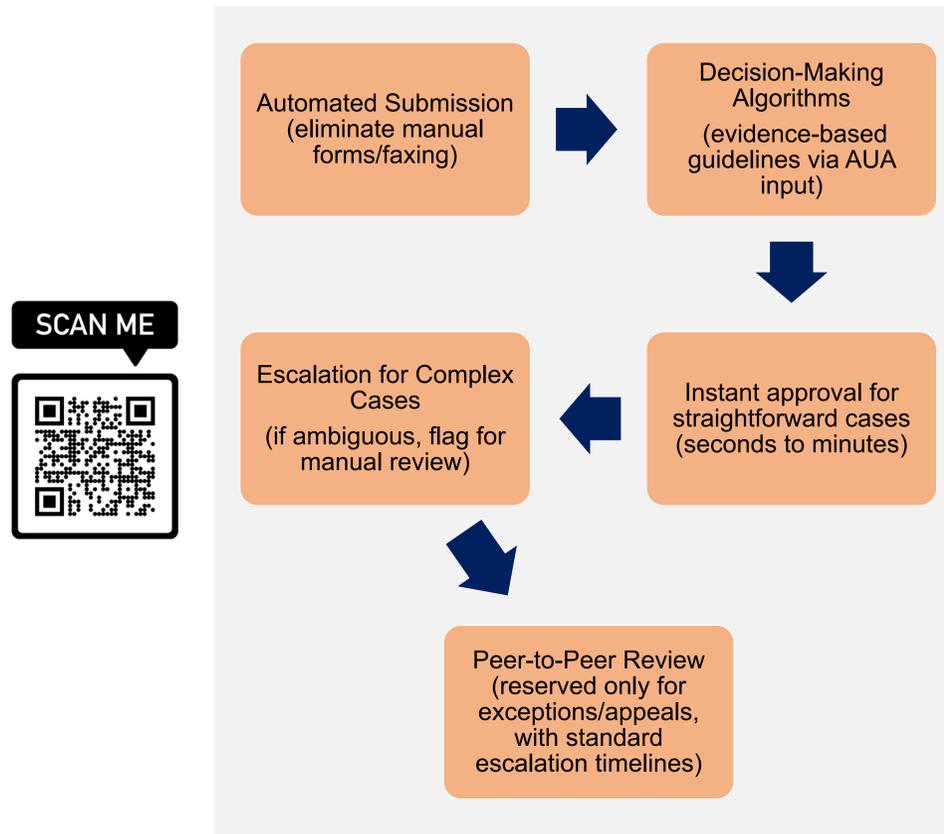
The current prior authorization (PA) system significantly hampers urologic care delivery.

Manual, paper-based processes lead to:

- Treatment Delays:** Patients requiring urgent therapies, e.g. bladder cancer immunotherapy or overactive bladder medications, face weeks of waiting for approval.<sup>1</sup>
- Administrative Overload:** Providers spend 14+ hours weekly on PA tasks, reducing time spent with patients.<sup>2</sup>

This proposal advocates for real-time electronic prior authorization (ePA) systems to ensure timely care and reduce inefficiencies, and for codification into AUA legislative priorities, like the AMA.

## How ePA Works



## Advocacy & Implementation Strategy



<b>Phase 1: Evidence and Data-Gathering (6-12 mo)</b>	Transitioning fully to ePAs could save the industry \$437M (2022 CAQH Index).
<b>Phase 2: Coalition-Building (12-18 mo)</b>	Partner with larger physician groups (AMA, ASCO) that already support EPAs. Engage health IT companies to advocate for federal funding of ePAs.
<b>Phase 3: Federal Legislative Advocacy (18-36 mo)</b>	Form multi-stakeholder alliance with bipartisan Congressional coalition; e.g. HELP Committee to draft legislation.
<b>Phase 4: Public and Professional Engagement, Education (ongoing)</b>	Launch educational campaigns and patient-facing materials to ensure broad support.

## Proposal Aim

Given the appetite in today's political environment for health insurance reform, there is a **window of opportunity** in the next legislative cycle to advocate for establishing real-time ePA systems as the national standard to: reduce wait times for patients, lower administrative burdens on providers, and enhance transparency/fairness in approval decisions.

## Key Proposal Components

**Mandate real-time ePA systems via the following mechanisms:**

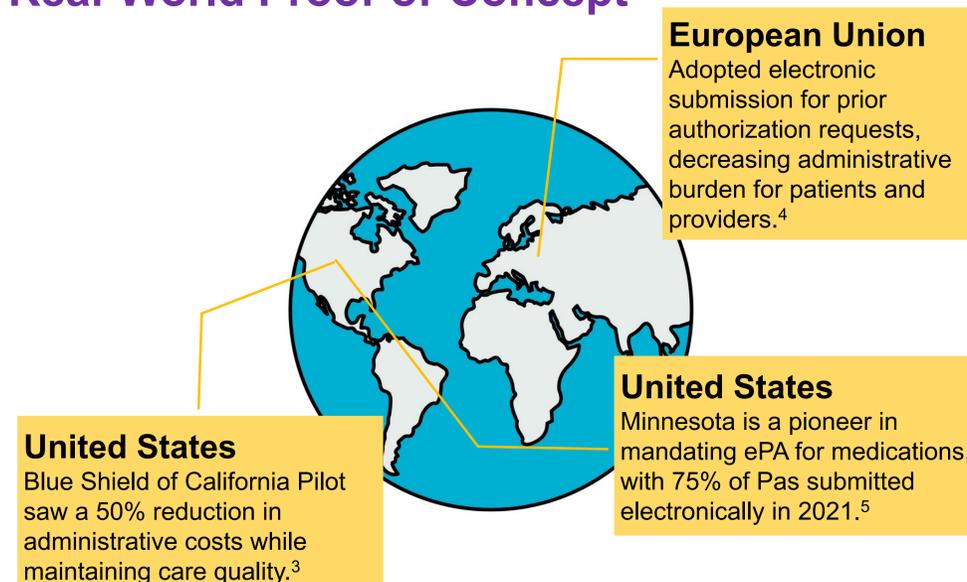
- Require all insurers (Medicare Advantage and private payers) to implement real-time ePA systems integrated into EHR platforms.
- Mandate that ePA systems provide immediate approvals or denials for common urologic procedures/conditions, with max response time 24h for complex cases.
- Include financial penalties for insurers failing to meet these response deadlines.
- Ensure interoperability between ePA systems and EHRs to reduce work duplication for urologists.



### Oversight & Enforcement:

- Establish a federal task force to monitor compliance with ePA reforms
- Require annual reporting by payers on prior authorization metrics (average response times, approval rates, appeals outcomes)
- Provide seed grants to small/rural urology practices for adopting ePA-compatible tech.

## Real-World Proof-of-Concept



## References

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