

# Help healthcare providers deliver timely patient care

Support common sense prior authorization reform

AMERICAN  
PSYCHIATRIC  
ASSOCIATION



## What is prior authorization?

Prior authorization is when a medical provider is required to spend extra time (sometimes hours for each patient) proving why a recommended treatment is necessary before a patient's insurance company or pharmaceutical benefits manager (PBM) will approve coverage.



## Why is prior authorization harmful to patients?



Prior authorization often leads to patients experiencing arbitrary limits on medications.



Insurers promote it as a cost savings mechanism, but it often results in extensive paperwork and long wait times for both prescribers and patients.



Sometimes patients go days or weeks without needed medication or treatment.

## How does prior authorization impact access to mental health care?

Nearly 1 in 5 Americans report having a mental illness, and it's gotten worse during the COVID-19 pandemic. For psychiatric patients, gaps in treatment due to prior authorization can lead to relapse, with increased health care costs and devastating effects for individuals and their families.



**We must eliminate prior authorization to ensure patients have access to comprehensive mental health care, including medications.**

## Support legislation that:

- eliminates prior authorization for:
  - generic medications that are not controlled substances.
  - dosage changes of the same medication.
  - generic and brand drugs after six months of adherence.
- requires that insurers and PBMs adhere to a 48-hour appeal process.
- prohibits plans from denying medication on the grounds of therapeutic duplication.
- requires denials and denial reviews be conducted by physicians in the same or similar specialty.

