Medicare Advantage Prior Authorization

This document highlights one of the many impacts of HHS-OIG’s oversight work.

The Issue: Denials and Delays in Care for Medicare Advantage Enrollees

A 76-year-old man with post-polio syndrome was denied a prior authorization request for a medically necessary walker (estimated cost $112) because he received a cane within the past 5 years.

A physician ordered an MRI to assess why a 69-year-old’s pain and weakness continued five months after a fall. The MRI request was denied by the patient’s insurance company because the patient had not had an x-ray first.

HHS-OIG Calls Out Risks of Prior Authorization Use by MAOs

HHS-OIG found that Medicare Advantage organizations (MAOs) sometimes delayed or denied Medicare Advantage enrollee access to needed services through their use of prior authorization.

MAOs issue more than 1 million denials each year, and in 2019, an estimated 13 percent were for services that were medically necessary for the patient. In the case of the 76-year-old man, the walker was medically necessary given his risk of falling.

The Impact: Increased Access to Care

HHS-OIG’s work on this issue drew national attention to the problem spurring the Centers for Medicare & Medicaid Services (CMS), the Industry, and Congress to action.

CMS

CMS issued regulatory changes in January 2024 and April 2023 that:

• Decrease delays in care
• Prevent inappropriate denials of care

INDUSTRY

United, Cigna, and Aetna reduced the number of services that require prior authorization by up to 20 percent in the fall of 2023, which:

• Reduces administrative burden
• Increases access to care for enrollees

CONGRESS

Congress held hearings on prior authorizations in May 2023 and May 2022 that:

• Highlighted risks to enrollees of denials and delays in care

The U.S. House of Representatives passed legislation in September 2022 that would:

• Reduce delays by creating an electronic process for handling prior authorizations

Read the Report

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