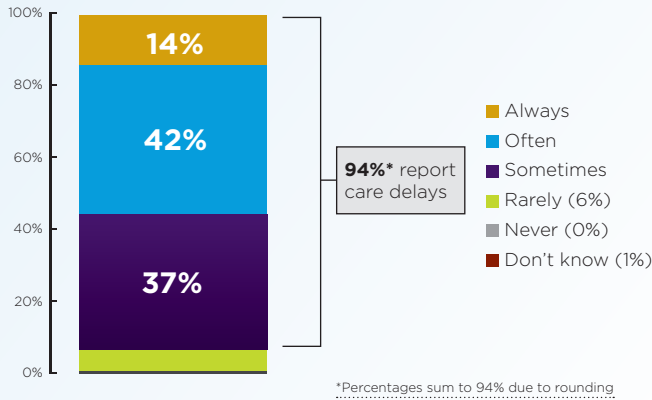


Patient impact

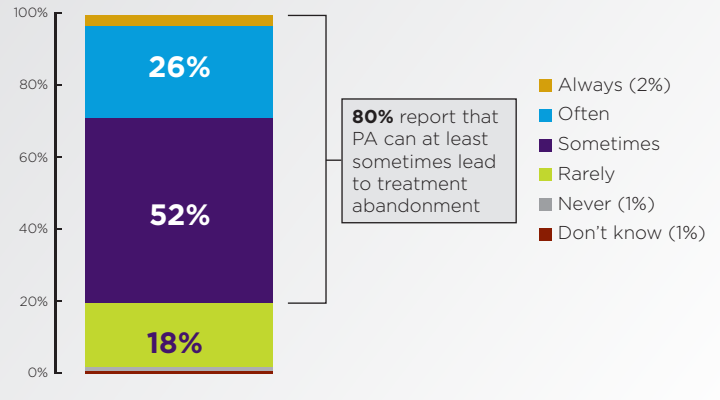
Care delays associated with PA

Q: For those patients whose treatment requires PA, how often does this process delay access to necessary care?



Abandoned treatment associated with PA

Q: How often do issues related to the PA process lead to patients abandoning their recommended course of treatment?



PA and patient harm



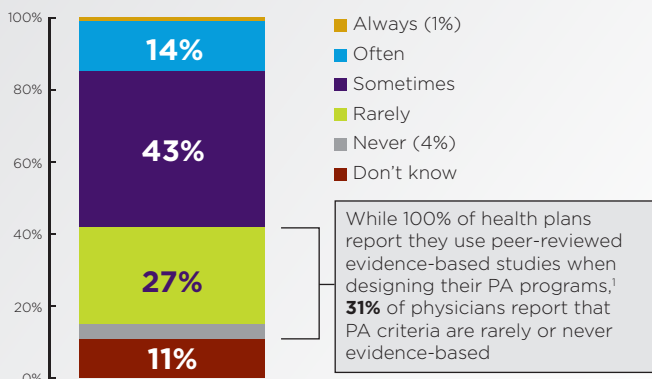
33% of physicians report that PA has led to a **serious adverse event** for a patient in their care.

(See below, Survey question "A.")

- 25%** of physicians report that PA has led to a patient's hospitalization.
- 19%** of physicians report that PA has led to a life-threatening event or required intervention to prevent permanent impairment or damage.
- 9%** of physicians report that PA has led to a patient's disability/permanent bodily damage, congenital anomaly/birth defect or death.

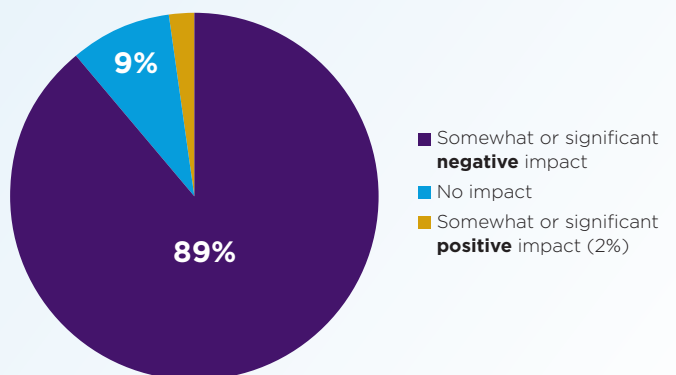
Clinical validity of PA programs

Q: How often are health plans' PA criteria based on evidence-based medicine and/or guidelines from national medical specialty societies?



Impact of PA on clinical outcomes

Q: For those patients whose treatment requires PA, what is your perception of the overall impact of this process on patient clinical outcomes?



Physician impact

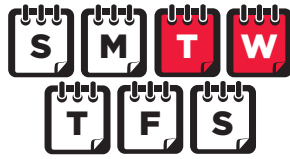
On average, practices complete

45

PAs per physician, per week

(See below, Survey question "B.")

Physicians and their staff spend an average of



almost two business days (14 hours) each week completing PAs

(See below, Survey question "C.")



Nearly **Two in five** or **35%** of physicians have staff who work exclusively on PA

(See below, Survey question "D.")

88%

of physicians describe the burden associated with PA as high or extremely high

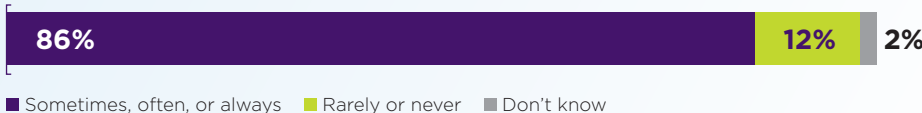
(See below, Survey question "E.")

Is PA really a bargain?

Health plans insist that PA is needed to eliminate unnecessary treatment and keep health care affordable. However, physicians report that PA can lead to overall increased health care resource utilization and can negatively impact patients' productivity at work. Which begs the question: is PA really a "bargain"?

PA and resource utilization

Q: In your experience, how often does the PA process lead to higher overall utilization of health care resources (e.g., additional office visits, initial use of less effective therapy due to step therapy requirements, emergency room visits, hospitalization)?



64% of physicians report that PA has led to **ineffective initial treatments** (i.e., step therapy)

62% of physicians report that PA has led to **additional office visits**

46% of physicians report that PA has led to **immediate care and/or ER visits**

Employer impact



58% of physicians with patients in the workforce report that PA has impacted patient job performance

(See below, Survey question "F.")

Survey questions

- Serious adverse event:** In your experience, has the PA process ever affected care delivery and led to a serious adverse event (e.g., death, hospitalization, disability/permanent bodily damage, or other life-threatening event) for a patient in your care?
- Number of PAs:** Please provide your best estimate of the number of prescription and medical services PAs completed by *you yourself and/or your staff* for your patients in the *last week*. Do not include PAs that practice staff completed for the patients of other physicians in your practice.
- Time to complete PAs:** Thinking about all of the PAs you and your staff completed in the last week, please provide your best estimate of the number of hours spent on processing these PAs. Do not include PAs that practice staff completed for the patients of other physicians in your practice.
- Practice resources for PA workload:** Do you have staff members in your practice who work exclusively on PA?
- Practice burden:** How would you describe the burden associated with PA in your practice?
- Employer impact:** Consider your patients in the workforce. Has the PA process ever interfered with a patient's ability to perform his/her job responsibilities?

Survey methodology

- Thirty-nine question, web-based survey administered in December 2022
- Sample of 1,001 practicing physicians drawn from M3 panel
- Forty percent primary care physicians/60% specialists
- Sample screened to ensure that all participating physicians:
 - Are currently practicing in the United States
 - Provide 20+ hours of patient care per week
 - Complete PAs during a typical week of practice

Reference

1. AHIP 2022 Survey on Prior Authorization Practices and Gold Carding Experiences available at <https://ahiporg-production.s3.amazonaws.com/documents/2022-Prior-Auth-Survey-Results-FINAL.pdf>

For information on the AMA's PA advocacy efforts, visit ama-assn.org/prior-auth.