AAOS
American Association of Orthopaedic Surgeons

Protecting Approved Care

Medicare Advantage Plans often require prior authorization before physicians can provide procedures or services to patients. Over the past several years, insurers have been increasingly reviewing and **reopening prior authorization determinations after** care has been delivered, **retroactively denying** pre-authorized claims based on "medical necessity," changing codes on approved claims to reduce payment to physicians for services (**downcoding**), and refusing payment for **services that did not require prior authorization**.

These recent practices have had significant impacts on patient care.

- **Increasing Administrative Burden for Physicians**
- **Leaving Patients with Unexpected Bills**
- **Reducing Access to Medically Necessary and Urgent Care**

In response to this issue, Rep. Greg Landsman (D-OH) and Rep. Bob Onder (R-MO) introduced **the Protecting Approved Care Act** H.R. 10394, which reduces burdens on physicians and improves patient access to care by prohibiting Medicare Advantage Plans from:

01

Denying coverage based on the insurer's determination of medical necessity after care is provided when prior authorization was required and obtained.

02

Reversing approved prior authorization decisions after services have been delivered, except in limited cases involving fraud or material misrepresentation.

03

Reducing physician payment through downcoding after care is provided when prior authorization was required and obtained.

The bill also extends these protections to medically necessary services that do not require prior authorization.

Streamlining the prior authorization process and protecting orthopaedic care delivery is a vital priority for AAOS. The ***Protecting Approved Care Act*** would strengthen access to care and provide certainty for patients and physicians by ensuring that approved care is covered and reimbursed as authorized.

What Congress should do

AAOS urges you to **cosponsor** the Protecting Approved Care Act (H.R. 10394) to ensure that physicians can continue to provide high-quality orthopaedic care by guaranteeing prior authorization approvals are honored after patients receive medically necessary care.