



AMERICAN ACADEMY
OF OPHTHALMOLOGY



July 29, 2021

Dear Representative/Senator:

On behalf of the American Academy of Ophthalmology and the American Society of Cataract and Refractive Surgery, representing 20,000 medical doctors in the United States, we are writing to express our ongoing concerns about excessive prior authorization (PA) requirements imposed by insurers. The most recent and egregious example of this problem is a new policy implemented by Aetna that requires prior authorization approval for all cataract surgery starting July 1, 2021. This policy applies to all of Aetna's lines of business, including Medicare Advantage plans, and all sites of service. We have been hearing from ophthalmologists across the country about how this truly outlier policy is negatively impacting patients by delaying medically necessary care and placing significant new administrative burdens on their practices. **The Academy and ASCRS request that you support our efforts to ensure patients have timely access to sight-restoring care by urging Aetna to rescind their problematic policy. We also urge you to cosponsor H.R. 3173, the Improving Seniors' Timely Access to Care Act, which seeks to improve the prior authorization process in Medicare Advantage.**

Cataract surgery is vital to restoring patients' vision and independence. It allows them to perform daily activities without fear of injuring themselves or having to rely on family members for assistance. Delaying care, as Aetna has done, can lead to adverse outcomes for patients. Cataracts reduce patients' quality of life, interfere with their work, and puts them at increased risk for falls and car accidents. Moreover, following a pandemic year in which cataract surgeries are already backlogged, Aetna's new requirement will cause a large barrier in access to care for patients who may have already been waiting a substantial amount of time to receive care.

Sadly, we have already received reports from ophthalmologists about how Aetna's new prior authorization policy is harming patients. For example, on the day the policy became effective, an ophthalmologist had a patient come into his practice with a retinal condition that required urgent surgery. Because the patient's cataract was blocking the view to the retina, in the back of the eye, the surgeon needed to perform cataract surgery before the emergency retina issue could be treated. However, the surgeon could not perform the necessary cataract surgery immediately because he had to wait for Aetna to agree with his diagnosis, putting the patient at risk for vision loss. Had this patient come into his practice on June 30 instead of July 1, the surgeon would have been able to treat the patient immediately.

To date, Aetna has failed to provide the Academy and ASCRS with a concrete rationale or evidence to support its decision to delay care for an overwhelming majority of beneficiaries for this common and well-established procedure. Moreover, by the date of implementation of this policy, Aetna had not released any verifiable data or objective criteria that it uses to deem what cataract procedures constitute as medically unnecessary. The policy runs counter to the [long-standing, evidence-based guidelines developed by the Academy](#) to help physicians determine when cataract surgery is clinically appropriate. In addition to the lack of evidence to justify its decision, Aetna's new policy is also an outlier amongst insurers: no other public or private payer has imposed such a prior authorization requirement for cataract surgery.

This prior authorization policy has been implemented in such an inefficient manner that we estimate that 10,000 to 20,000 Aetna patients will have their cataract surgery unnecessarily delayed in the month of July alone.

Ophthalmologists have reported that phone calls to Aetna for additional information have been met with mixed messages. Some were told approval will be instantaneous, while others were told it could take up to 14 days. Some were told to cancel all surgeries for the first two weeks of July, while others were told there was no new policy. Ophthalmologists throughout the country have reported the following issues trying to get their patients' surgeries approved:

- When approval can't be obtained through the Aetna website, a common occurrence, practices are spending between 45 minutes to 1.5 hours on the phone with Aetna representatives for each patient precertification request.
- Practices are being asked to submit a separate prior authorization request for each eye — doubling the amount of paperwork and time spent on precertification. Some practices are seeing a denial for the second eye as a duplication error.
- One practice had to cancel an entire week — July 12 to 18 — of cataract surgeries after spending the weekend on the phone and online with Aetna representatives in a failed attempt to urgently obtain prior authorization approval.

We strongly urge you to contact Aetna's Vice President of Clinical Strategic Operations and Policy Delivery, Scott Spradlin, and Aetna's Medical Director, Anil Goyal, MD, to express your concerns about how their new policy mandating prior authorization approval for cataract surgery is disrupting and delaying medically necessary, sight-restoring care for patients across the country. Please urge them to rescind this disruptive new policy. Your office can contact them at sspradlin@aetna.com and goyala2@aetna.com.

We also encourage you to support H.R. 3173, the Improving Seniors' Timely Access to Care Act. This bipartisan legislation seeks to improve the prior authorization process in the Medicare Advantage Program by increasing transparency, streamlining processes, and minimizing the use of prior authorization for services that are routinely approved.

Thank you for your consideration of our requests. If you or your staff have any questions about Aetna's prior authorization policy for cataract surgery or H.R. 3173, please feel free to contact the Academy's Director of Federal Affairs, Rebecca Hyder, at rhyder@aao.org. She will be happy to assist you.

Sincerely,



Michael X. Repka, MD, MBA
Medical Director for Governmental Affairs
American Academy of Ophthalmology



Parag Parekh, MD, MPA
Chair of ASCRS Government Relations Committee
American Society of Cataract and Refractive Surgery