INSURANCE DELAYS AND DENIALS

Create Barriers to Advanced Cancer Treatment



Proton therapy, a proven and life-saving cancer treatment, remains inaccessible to many patients whose physicians have recommended it for certain types of cancer. **Restrictive insurance guidelines and a burdensome prior authorization process create** barriers for cancer patients and often lead to negative patient outcomes. The lack of insurance coverage limits the number of patients participating in clinical trials, hindering the ability to generate further evidence supporting the value of proton therapy.

Heathcare providers are unified on the impacts of the prior authorization process:

Prior Authorization Limits Access to **Life Saving Proton Therapy**



Burdensome processes

Negatively Impact

Patient Outcomes



63.3% reported that at least one-fourth of claims require prior authorization [‡]



33.8% of prior authorization requests in 2022 were initially denied[†]



55.9% reported committing **60+ FTE hours per week** to the prior authorization process[‡]



Medicare Advantage Organizations (MAOs) **denied 27% of claims** that met Medicare coverage rules[‡]

2X the rate of denials¹ reported by the OIG (13%)

94% reported delays to life-saving cancer treatment²

33% reported **serious adverse events** in patient care³

62%

say **most denials are overturned on appeal,**causing avoidable wait
times and stress²

82%

reported patients that **abandoned treatment** due to struggles with payers⁴











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‡ NAPT annual member survey

1 https://oig.hhs.gov/oei/reports/oei-09-18-00260.asp

2 ASTRO Prior Authorization and Cancer Patient Care, April 2019

3 https://www.ama-assn.org/system/files/prior-authorization-survey.pdf

4 https://www.ama-assn.org/practice-management/prior-authorization/why-prior-authorization-bad-patients-and-bad-business

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