

August 20, 2021

CMS Strongly Encourages Medicare Advantage Plans to Relax Prior Authorization Requirements during Ongoing COVID-19 Surges

The Centers for Medicare & Medicaid Services (CMS) today issued a Health Plan Management System [memo](#) to all Medicare Advantage Organizations (MAO) and Medicare-Medicaid Plans to strongly encourage them to waive or relax plan prior authorization requirements and utilization management processes to facilitate the movement of patients from general acute-care hospitals to post-acute care and other clinically-appropriate settings, including skilled nursing facilities, long-term care hospitals, inpatient rehabilitation facilities, and home health agencies.

CMS in the memo highlights the recent surge of the COVID-19 delta variant and increased hospitalizations across the country and notes that “the ability of hospitals to transfer patients to appropriate levels of care without unnecessary delays or administrative burdens is critical to ensuring that hospitals have open acute-care beds to treat patients requiring emergent care.”

The AHA continues to work with both CMS and MAOs to encourage adoption of these waivers.

FURTHER QUESTIONS

If you have questions, please contact AHA at 800-424-4301.