

Consumer Attitudes on Prior Authorization

Results from a Survey Of 1,000 Healthcare Consumers Nationwide

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March 2023





Lake Research Partners

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Survey Methodology

- This bipartisan poll was designed and administered by Lake Research Partners and The Tarrance Group.
- The survey was conducted online between November 1-6, 2022.
- The survey reached a total of 1,000 adults nationwide.
- Data were weighted slightly by gender, age, region, race, party identification, education level, and race by gender to reflect the demographic composition of likely voters nationwide.
- The margin of error for the base sample is +/-3.1% and larger for subgroups.



Executive Summary

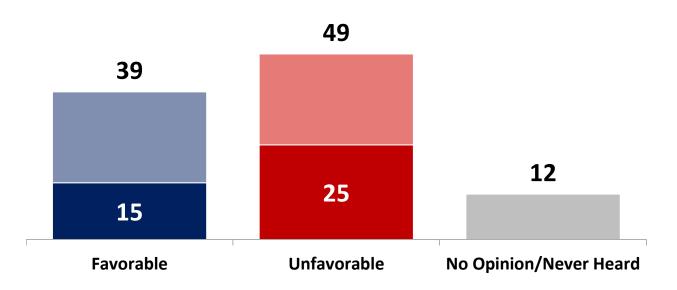
- Prior authorization is perceived negatively from the outset, as soon as people learn the basics about it.
 - A majority of people do not want patients or doctors to be subject to prior authorization, even with very little information about the issue. This attitude is consistent whether people are asked about patients or doctors.
- A slate of proposed requirements to regulate prior authorization and mitigate negative impacts on patients and doctors are very popular, even before messaging.
 - People feel most strongly that insurance companies should be required to cover all FDA approved medication and to handle prior authorization requests in a timely manner.
- People are most concerned about prior authorization causing delays in treatment that interfere with patient care and causing unnecessary suffering.
- The greatest predictors of attitudes towards prior authorization are age and gender.
 - Older adults, particularly older women, are the most likely to oppose prior authorization. Younger adults, particularly younger men, are more likely to support it.



After people read a short description of prior authorization, their impression is net unfavorable by -10 points. Prior authorization is seen more favorably by younger men, as well as people of color, while it is more unfavorable among older consumers, particularly women.

Prior Authorization Favorability

Prior authorization is a health insurance company process that requires patients and doctors to wait for written approval from the insurance company before being able to access doctor-prescribed treatments or care.



Demographics	Favorable	Unfavorable	NO/NH
Total	39	49	12
Men <45	55	33	12
Women <45	42	42	16
Men 45+	34	59	7
Women 45+	29	61	11
White	33	57	10
Black	51	34	15
Latinx	49	36	14
Democrat	41	50	8
Independent/DK	31	40	29
Republican	42	53	5
Northeast	35	51	14
Midwest	36	52	13
South	43	47	10
West	39	50	11
Non-College	39	48	13
College	41	52	8





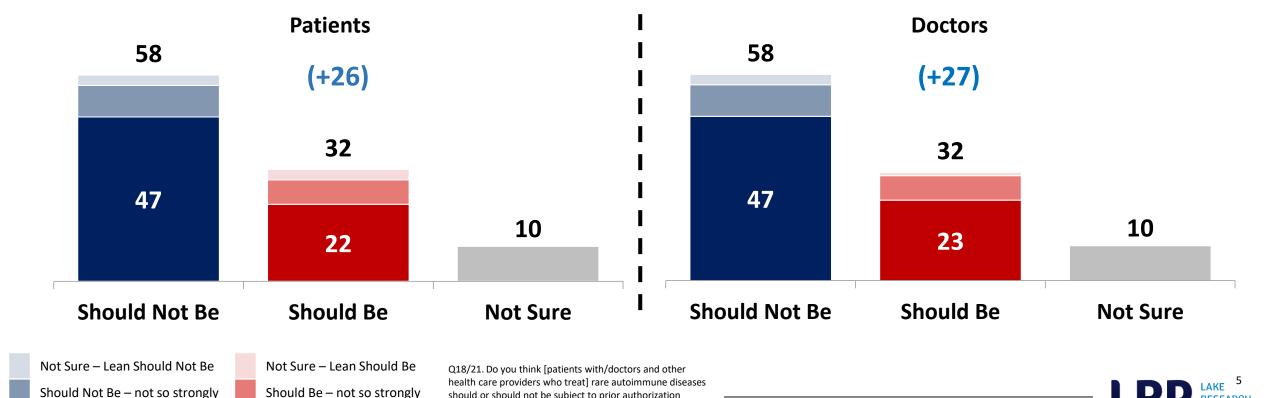


After they hear a brief description of autoimmune diseases, three in five (58%) consumers say that both patients with rare autoimmune diseases and doctors who treat them should not be subject to prior authorization requirements, with high intensity.

Prior Authorization Initial Ballot

An autoimmune disease occurs when the body's immune system mistakenly attacks the body's own cells, rather than the harmful germs it was designed to attack, such as bacteria and viruses.

There are more than 100 types of autoimmune diseases, such as lupus, multiple sclerosis (MS), and rheumatoid arthritis, and many others that are considered "rare" (affecting fewer than 200,000 patients), which have limited treatment options available.



should or should not be subject to prior authorization requirements [to access treatments prescribed by their

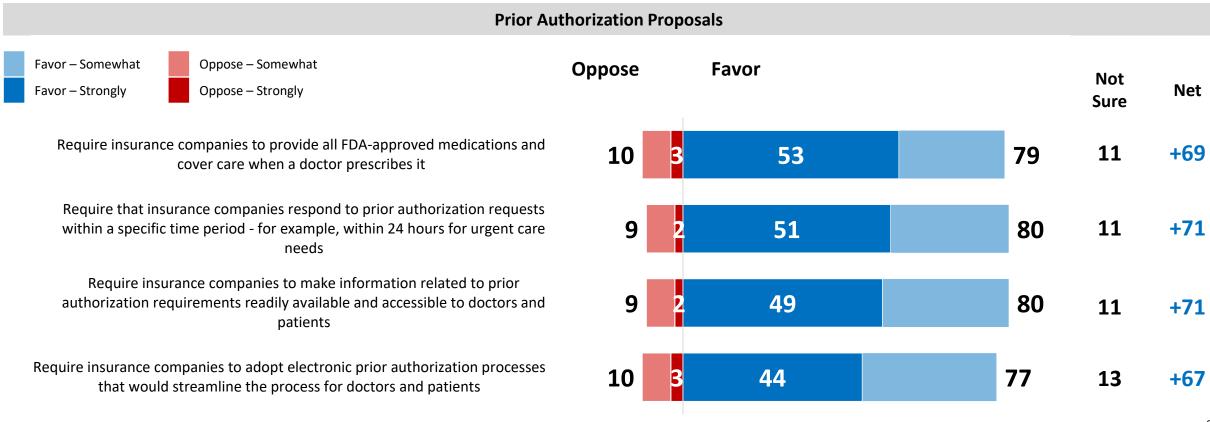
doctors/ prescribe treatments to their patients]?

Should Be – not so strongly

Should Be – strongly

Should Not Be - strongly

All of the proposals tested to regulate prior authorization practices are extremely popular, with over three quarters of consumers in favor and with high intensity. The most popular is requiring insurance companies to provide all FDA-approved medications, followed by requiring that they respond quickly to prior authorization requests. Consumers also support making information more accessible and adopting an electronic prior authorization system.





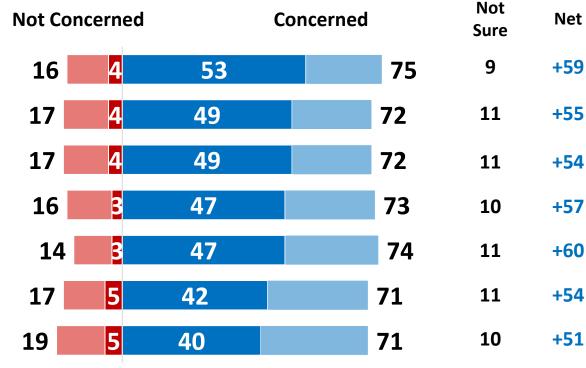


Consumers are highly concerned about a range of negative impacts that prior authorization can have on patients and doctors. More than seven-in-ten are concerned about all of the possible impacts, with close to half very concerned. The most concerning is that prior authorization can delay or block patients' access to treatment – three quarters of adults are concerned about this and a majority are very concerned.

Negative Impacts of Prior Authorization

	Somewhat Concerned	A Little Concerned	
	Very Concerned	Not At All Concerned	
<u> </u>			
Prior authorization can delay or block patients' access to treatment			
Prior authorization can override doctors' care recommendations by allowing insurance companies to control treatment decisions			
Prior authorization can cause disease progression through ineffective treatment substitutes			
Prior authorization delays relief from treatment by requiring patients to try less effective treatments			
Prior authorization can require patients to substitute less effective or ineffective treatments for what their doctor prescribed			
Prior authorization can indirectly increase patients' costs			
Filing and following up on prior authorizations takes doctor and staff time away			

from taking care of patients

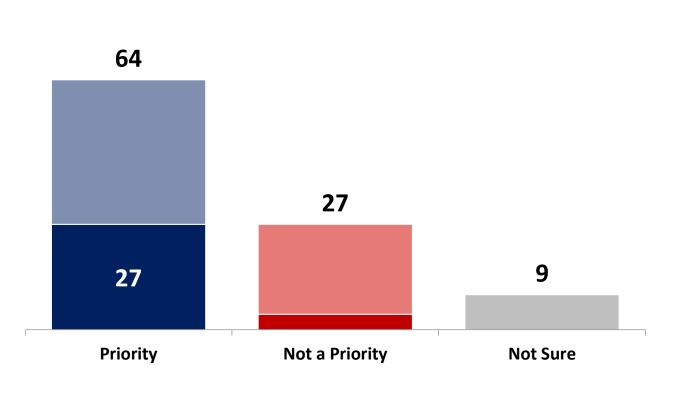






Nearly two thirds of consumers say reforming prior authorization should be a priority for elected officials, including over a quarter who say it should be a top priority. This is a priority across demographic groups, though patterns are slightly different than for other questions. Those most likely to say reform is a high priority include African Americans, older women, and Democrats.

Priority of Reforming the Prior Authorization Process



Demographics	Priority	Not a Priority	Not Sure
Total	64	27	9
Men <45	65	27	8
Women <45	59	27	14
Men 45+	65	31	4
Women 45+	69	23	7
White	64	29	7
Black	72	16	12
Latinx	61	28	11
Democrat	69	24	7
Independent/DK	52	29	20
Republican	67	29	4
Northeast	63	25	12
Midwest	58	30	12
South	65	28	7
West	68	26	6
Non-College	65	25	10
College	64	30	6



Q34. When you think about priorities for Congress and your state legislature, how high of a priority do you think reforming the prior authorization process should be?







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Demographics of Healthcare Consumers Nationwide

GENDER

Man — 48%
Woman — 51%
Other — 1%



AGE

Under 30 — 21% 30-39 — 17% 40-49 — 16% 50-64 — 25% 65+ — 20%

EDUCATION

High School or Less — 27%

Post-H.S. / Some College — 38%

College Graduate — 23% — 35%

Post-Graduate — 12% — College Grad or Post Grad

PARTY IDENTIFICATION





Republican

38%

RACE

White/Caucasian	62%
Black/African American	12%
Hispanic/Latinx	16%
AAPI	6%
Native/Indigenous	2%
Middle Eastern	1%
None/Other	2%

INSURANCE PROVIDER

Medicare	29%
Own Employer	26%
Medicaid	21%
Parent/Spouse's Employer	11%
Private	5%
ACA Marketplace	4%
Veteran's Affairs	2%
Other	1%

REGION

West	 23%
Midwest	 20%
Northeast	 18%
South	 38%

EMPLOYMENT STATUS

All Employed —	56%
Not Employed —	42%

19%

Other

