

Effective Gold Carding Programs are Based on Evidence and Value for Patients

As part of health insurance providers' long-standing commitment to the [2018 Consensus Statement on Improving the Prior Authorization Process](#), AHIP surveyed health insurance providers on the use and impact of Gold Carding programs with a focus on how these programs impact patient care. New research conducted by AHIP finds that the use of gold carding has increased since 2020 – and gold carding programs are most effective when they are used selectively and are continually reevaluated to ensure patients are receiving the high-quality care they deserve.

- **Health insurance providers are using gold carding programs more frequently to improve efficiency and speed.** The percentage of plans using gold carding for medical services increased from 32% in 2019 to 58% in 2022.
- **Gold carding programs work better for some services than others.** 73% of plans reported that gold carding works better for services where there are clear and consistent clinical standards of care. Examples include high-tech imaging, cardiology services, elective inpatient medical services, and orthopedic services.
- **Gold carding programs include providers with sufficient prior authorization volume and low denial rates.** The majority of plans (59%) look at low prior authorization denial rates and high prior authorization approval rates for acceptance into gold carding programs. Many plans require a provider to have a sufficient volume of prior authorization requests.
- **Frequent reviews of provider performance are vital.** The vast majority of plans (80%) conduct periodic reviews of providers participating in their gold carding program to ensure that providers are continuing to meet the “gold standard,” and most of them do so at least annually. These reviews are similar to plans' annual reviews of their prior authorization requirements and criteria to ensure that patients are receiving the highest quality care.
- **Gold carding programs have mixed reviews.** While 69% of plans with gold carding programs observed some positive outcomes for their programs – such as reduced administrative burden and improved provider satisfaction – 73% reported some negative outcomes, such as administratively difficult implementation, higher costs, and reduced quality of care for patients.
- **Concerns about care quality for patients and challenges with implementation are top reasons for discontinuing gold carding programs.** About half of the plans that do not currently use gold carding had a gold carding program in the past. For plans that discontinued their gold carding programs, the most common reasons for doing so were higher costs incurred with gold carding without improvement in quality of care/patient safety (25%), reduction in care quality/patient safety of providers in gold carding (50%), and administratively difficult implementation (75%).



Health Insurance Providers are Undertaking Additional Steps to Improve the Prior Authorization Process

Health insurance providers report that, in addition to gold carding programs, there are other ways to streamline the prior authorization process. AHIP and our members have undertaken significant steps to build on our consensus statement and simplify prior authorization, including:

- Encouraging electronic prior authorization, which yields faster and more streamlined prior authorization requests and responses while ensuring patient quality and affordability of care. In fact, electronic prior authorization offers providers the administrative relief they seek while protecting patients from unsafe, low quality, and high-cost care. Building on our 2018 Consensus Statement, AHIP launched a new initiative in January 2020 called the Fast Prior Authorization Technology Highway ([Fast PATH](#)) better understand the impact of electronic prior authorization (ePA) on the prior authorization process. The initiative found that electronic prior authorization led to faster time to patient care, faster time to a decision, lower burden from phone calls and faxes, and improved information for providers.
- Waiving or reducing prior authorization for providers that take on financial risk through risk-based contracts or other alternative payment models (APM).

Gold carding can work when it is carefully implemented with the patient at the heart of decision making. But the results are clear: Blanket mandates to implement sweeping and indiscriminate gold carding programs will increase health care costs, put patients at risk, and decrease patient and provider satisfaction.

AHIP conducted a survey on Gold Carding and Prior Authorization in February–April 2022. All AHIP member health plans with commercial enrollment were invited to participate in the survey via the Qualtrics online survey tool. AHIP received responses from 26 plans, with total commercial enrollment of 122 million lives.