TEXAS ORTHOPAEDIC ASSOCIATION
Established 1936

Gold Card Prior Authorization

Texas Created the Nation's Model Prior Authorization Law

Unnecessary Hurdles for Patients

Research shows that the majority of prior authorization requests are ultimately approved. However, the prior authorizations **delay treatment, create mountains of red tape and burden physicians with unnecessary paperwork**.

For patients, **these delays can mean days, weeks or even months before receiving critical, sometimes life-saving, care**.

Texas Sets the Standard: Gold Card Laws Remove Roadblocks to Care

In 2021, the Texas Legislature made history by passing House Bill 3459, one of the **first prior authorization gold card laws in the country**. This groundbreaking law set the national standard for reducing unnecessary red tape in health care, ensuring that physicians with a proven track record of approvals could **bypass repetitive prior authorization requirements**.

By cutting through bureaucratic delays, HB 3459 empowers patients to receive timely care, allows physicians to focus on treatment rather than paperwork and improves outcomes across the state. The success of Texas' gold card law has inspired other states to follow suit.

In 2025, HB 3812 refined and expanded the program, closing loopholes and ensuring more physicians and patients benefit from the promise of the gold card: faster access to needed care.

Texas Proves Health Policy Can Work for Patients

Together, these laws keep Texas at the forefront of patient-focused health policy, showing the rest of the nation what real reform looks like.

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PRIOR AUTHORIZATION: LEGISLATIVE REFORMS ARE NECESSARY

For nearly 1 in 5 patients who sought an orthopaedic procedure or surgery through TSAOG Orthopaedics in 2020, insurance requests for additional clinical data routinely delayed a healthcare decision by one week or more.*

ACTUAL DENIALS

1%

TSAOG Orthopaedics' prior authorization data from the 2020 calendar year – which included 30,000 order sets related to orthopaedic surgery, imaging and procedures – resulted in a 97-percent approval rate of services that were never denied at any point in the authorization process.

TSAOG Orthopaedics' team determined that an additional 2 percent were ultimately approved after re-examining the denials. As a result, less than 1 percent of the 30,000 services were completely denied.

PRIOR AUTHORIZATION:

Ensure that unnecessary prior authorization hurdles do not stand in between patients and their physicians.

THE BURDEN

5 INTERACTIONS

Despite the relatively low peer-to-peer and denial rates across these order sets, TSAOG Orthopaedics' team still has to create the infrastructure to document and track all of the order sets, on the off chance that only between one to three out of 100 will ever escalate in a significant manner.

It's not just the cost of fighting denials, which requires an average of five interactions for each order, it's the required data provenance that contributes to the overall waste of the vast majority of prior authorizations.

Source: Seventeen percent of procedure and surgical authorizations at TSAOG Orthopaedics in 2020 received requests for additional clinical data. The median time to authorization decision was 0.8 days for authorizations without clinical requests, vs. 7.8 days for authorizations where clinical data was requested.

The data are based on TSAOG Orthopaedics' 30,003 prior authorization requests in the San Antonio area during the 2020 calendar year.

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