

March 15, 2021

Honorable Representative Eddie Lumsden
Chair, House Insurance Committee
Georgia State Capitol
Atlanta, GA

RE: Senate Bill 80 – Support

Dear Chair Eddie Lumsden,

The Arthritis Foundation urges your support of Senate Bill 80. This bill would reform the prior authorization process to ensure that it works better for patients and health care professionals. Specifically, this bill would ensure that a timelier response to prior authorization requests including seven calendar days for a request and 72 hours urgent circumstances. In addition, this bill keeps intact prior authorizations for 45 days and for treatment of a chronic or long-term care condition, such as arthritis, the prior authorization will remain valid for six months.

This bill also ensures that for adverse determination and for appeals that decisions by insurers should be made by a health care provider who either: 1) practices in the same specialty as the physician or other healthcare provider who typically manages the condition or disease or regularly provides the healthcare service involved in the request; or (2) Have practical experience treating patients with the condition or disease for which the healthcare service is being requested. For the appeal, it also ensures that it is not the same health care provider that made the initial adverse reaction.

Typically, physicians must fill out a prior authorization form whenever they prescribe a specialty medication or treatment that is restricted or not covered under an insurance carrier's formulary. Many patients seeking medication vital to their arthritis treatment are held up by prior authorization, a process in which a physician must submit tedious paper work before writing a prescription. As a result, prior authorization typically causes lengthy delays in treatment, thereby restricting a person's access to vital care. Patients surveyed by the Arthritis Foundation in 2017 indicated that prior authorization was one of the top two most burdensome insurance issues.

According to a 2018 American Medical Association survey, which examined the experiences of 1,000 patient care physicians, more than nine in 10 physicians (92%) said that the prior authorization process delays patient access to necessary care; and nearly four in five physicians (78%) report that prior authorization can sometimes, often or always lead to patients abandoning a recommended course of treatment. Lastly, the survey revealed that a vast majority of physicians (86%) believe burdens associated with prior authorization have increased during the past five years.

As a result, prior authorization protocols can lead to delays in access to care that offer the greatest potential medical benefit to people with arthritis. Arthritis is a chronic, degenerative disease, and delays in treatment can worsen disease progression and even cause permanent damage and

disability. In some cases, patients may have no alternate therapy for an extended period of time if the therapy that was initially prescribed was rejected. Accordingly, the standard time frames for a determination created by SB 80 will ensure timely access to the vital health care services patients need.

On behalf of the more than 1.9 million people in Georgia with arthritis, the Arthritis Foundation strongly urges the House Insurance Committee to support SB 80.

Sincerely,



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CC: Members, House Insurance Committee

