



Karen Saylor, MD, President | Jeffrey S. Barkin, MD, President-Elect | Erik N. Steele, DO, FAAFP, Chair, Board of Directors
Andrew B. MacLean, JD, CEO | Dan Morin, Director of Communications & Government Affairs

TO: The Honorable Heather Sanborn, Chair
The Honorable Denise Tepler, Chair
Members, Joint Standing Health Coverage, Insurance and Financial Services

FM: Dan Morin, Director of Communications and Government Affairs

DATE: March 9, 2021

RE: **Support**
LD 523—An Act Regarding Prior Authorizations for Prescription Drugs
LD 617—An Act Concerning Prior Authorizations for Prescription Drugs

The Maine Medical Association is the state's largest professional physician organization representing more than 4300 physicians, residents, and medical students in Maine whose mission is to support Maine physicians, advance the quality of medicine in Maine and promote the health of all Maine residents.

The Maine Medical Association supports both bills (LD 523 and LD 617) before you today related to prior authorization for prescription drugs. Put simply, prior authorization is when a medical provider must get permission from an insurer before prescribing a drug, seeking a diagnostic test, or performing a certain procedure.

Expanding the use of electronic prior authorization can go a long way toward addressing an issue most physicians say is the most burdensome they face. More importantly, the bills would allow for easier communication, faster approvals, and quicker delivery of quality care for all patients. The bills.

The [Medical Group Management Association](#) (MGMA), a national professional association comprised of medical practice managers, administrators, and executives found there are approximately 182 million prior authorization transactions per year in the medical commercial market

alone as providers request approval from health plans for specific procedures, medications, services or medical devices. In a separate MGMA poll from 2019, 90% of practice leaders said payer prior authorization requirements have increased in 2019. Only 1% said those requirements have decreased, and 9% said they have stayed the same.

Prior authorization is a pain point for doctors across the health system, who argue it delays care and piles additional administrative burden on their workloads. A survey from the American Medical Association released earlier this year found that 28% of docs believe prior authorization causes adverse events for patients.

We would urge the committee to ensure the participation by providers be voluntary and/or there be no cost to participating physicians from the carriers, full well knowing it is possible that practices could incur a cost from their electronic health record companies to access the functionality of prior authorization. Ideally, there should be a process a scalable and voluntary approach, on the provider side, that can seamlessly integrated with existing electronic health records systems.

Thank you for the opportunity to provide comments in support of both, LD 523 and LD 617. We would be happy to provide additional information to the committee prior to the work session.