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Maryland Chapter



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TO: The Honorable Shane E. Pendergrass, Chair
Members, House Health and Government Operations Committee
The Honorable Joseline A. Pena-Melnyk

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman

DATE: March 2, 2017

RE: **SUPPORT** – House Bill 887 – *Health Insurance – Preauthorization for Drug Products to Treat Substance Use Disorders – Prohibition*

The Maryland State Medical Society (MedChi), the Maryland Chapter of the American Academy of Pediatrics (MDAAP), and the Mid-Atlantic Association of Community Health Centers (MACHC) submit this letter of **support** for House Bill 887. House Bill 887 prohibits insurers, nonprofit health service plans, and health maintenance organizations that provide coverage for prescription drugs, including coverage through a pharmacy benefits manager, from applying a preauthorization requirement for methadone, buprenorphine, or injectable naltrexone.

Last year, the Department of Health and Mental Hygiene released the 2015 Drug- and Alcohol-Related Intoxication Deaths in Maryland report. The report found that in 2015 there was a total of 1,259 overdose deaths in Maryland, with eighty-six percent of all overdose deaths involving an opioid – which include heroin, fentanyl, and such prescription drugs as oxycodone and methadone. Between 2014 and 2015, the number of heroin-related deaths increased by 29 percent (from 578 to 748), the number of fentanyl-related deaths nearly doubled (from 186 to 340), and the number of prescription-opioid related deaths increased by 6 percent (from 330 to 351).

Unfortunately, these numbers continue to increase. MedChi, MDAAP, and MACHC are committed to working with the State to reverse this trend. For the last two years, MedChi has joined forces with the Chesapeake Regional Information System for our Patients to visit physician offices and enroll physicians in the Prescription Drug Monitoring Program and has been working with the Maryland Board of Physicians to ensure that physicians are receiving education under the Safe Opioid Prescribing and Risk Evaluation and Mitigation Strategies.

House Bill 887 is a practical approach that will save lives and ensure that individuals have timely access to medication assisted therapies. As noted in the letter from the American Medical Association (AMA), submitted in support of House Bill 887, a recent AMA survey found that ninety percent of

physicians reported that prior authorization delays access to necessary patient care and nearly 60 percent reported that patient care was delayed by at least a day because of prior authorization. It is well-founded that methadone, buprenorphine and naltrexone reduce problem addiction behavior. While many carriers do not require preauthorization for use of these medications, we believe that it is essential that carriers be prohibited from applying a prior authorization requirement, given that carriers can change utilization management methods.

For these reasons, we request a favorable vote.

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