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TO: The Honorable Shane E. Pendergrass, Chair Members, House Health and Government Operations Committee The Honorable C. William Frick

- FROM: Danna L. Kauffman J. Steven Wise Pamela Metz Kasemeyer
- DATE: March 13, 2017
- *RE:* **SUPPORT** House Bill 1212 *Health Insurance Prior Authorization for Opioid Antagonists Prohibition*

The Maryland State Medical Society, the Maryland Chapter of the American Academy of Pediatrics, and the Mid-Atlantic Association of Community Health Centers submit this letter of **support** for House Bill 1127, which prohibits insurers, nonprofit health service plans, and health maintenance organizations as well as pharmacy benefit managers from applying a prior authorization requirement for an "opioid antagonist" on its formulary.

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 86 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).

House Bill 1212 is a practical approach that will save lives and ensure that individuals have timely access to medication assisted therapies. A recent American Medical Association 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 opioid antagonists 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 the above reasons, we urge a favorable report on House Bill 1212.

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