TO: The Honorable Delores G. Kelley, Chair
Members, Senate Finance Committee
The Honorable Terri L. Hill

FROM: Danna L. Kauffman
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The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, supports House Bill 751 as amended by the House of Delegates.

Insurance carriers are increasingly adopting utilization management programs, such as prior authorization, to address health care costs. While Maryland has implemented an electronic prior authorization system, providers and patients often still encounter significant barriers in receiving approval for care, which can delay patient treatment. In addition, providers and their staff have reported increased time spent on navigating systems, diverting valuable resources away from direct patient care. As amended by the House of Delegates, MedChi strongly believes that House Bill 751 protects Marylanders from harmful disruptions in health care services and promotes reasonable continuity of health care for Marylanders.

House Bill 751:

- Provides continuity of care for patients who are transitioning from one carrier to another carrier by allowing a prior authorization to follow them for 30 days.
- Requires a carrier to honor a prior authorization when:
  - An individual changes health plans within the same carrier; or
  - A prescriber has changed the dosage of a prescription drug (except for an opioid).
- Requires a carrier that implements a new prior authorization to provide the insured who is taking the prescription drug with at least 30 days written notice of the change and requires the insurer to provide all contracted health care providers with at least 30 days notice either written or electronically.
- Allows a prior authorization for a chronic condition to be for the lesser of one year or the standard course of treatment.

For the reasons articulated above, MedChi respectfully requests that the Committee support House Bill 751.