

Testimony to the Senate Insurance Committee

Regarding: SB 129

Presented by Tim Smith

Chair Hottinger, Vice Chair Bacon, Ranking Member Brown and members of the Senate Insurance Committee my name is Tim Smith and I am the Executive Director of Orthopedic ONE, Ohio's largest physician owned orthopedic practice. Thank you for the opportunity to testify today in support of Senate Bill 129, a bill that will make necessary reforms to the Prior Authorization (PA) system in Ohio.

At Orthopedic ONE, patients have access to the most diverse range of orthopedic specialties within any single practice in the Columbus area. Patients receive expert care from some of the most highly skilled orthopedic surgeons and fellowship-trained physicians in central Ohio. Each day, our physicians see more than 150 new patients and each year, our physicians perform on average: 365 ACL surgeries, 1460 hip replacement surgeries, 3650 knee replacement surgeries, among several other procedures. At Orthopedic ONE we have numerous priorities but our number one priority is our patients.

We are supporting SB 129 because we believe it is going to positively impact the more than 50,000 patients we see a year. At Orthopedic ONE we have several staff members who process dozens of PAs a day. The amount of time and resources we spend on PAs is significant. We understand the importance of the PA process but would ask the committee to favorably consider the changes SB 129 would make to the system.

There is a significant amount of uncertainty that comes with prior authorizations. Daily my staff struggles with knowing what drugs and procedures require authorization, how long it will take to get approvals, and once we receive an approval will we actually get properly reimbursed for the service? We are not asking to get rid of the PA process, but are asking for the proper information to be able to successfully navigate the system. I can hire staff to fulfill the mandates the insurers place on prior authorizations, but am unable to set them up for success if I do not know the rules and regulations that go along with a specific request.

SB 129 will make changes to how quickly an insurer needs to respond to a PA request. Right now it can take anywhere from 7-30 days for a request to be approved. It also will require the use of a web-based system to submit PAs through. In this age of technology and innovation why are PA requests still processed over the phone, via fax or snail mail? SB 129 will also ensure retroactive take-backs will not occur. Meaning once an insurer says they will cover the cost of a drug or procedure, they will honor that approval. It will also ensure insurers will give proper

notification of what drugs and procedures require PA and will require advance notification to changes in the PA system.

All of these mentioned changes will have a significantly positive impact on my practice and the patients of central Ohio we serve. I have countless patients who struggle with understanding why we cannot begin their treatment or why we are not sure if the cost of their treatment is going to be covered.

SB 129 will help the thousands of patients my physicians serve. I ask that you support this legislation and thank you for the opportunity to testify here today. I am happy to answer any questions you may have.