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The MetroHealth System
HB 130 -Proponent Testimony
House Insurance Committee
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Chairman Lampton, Vice Chairman Barhorst, Ranking Member Miranda and members of the House Insurance Committee, thank you for the opportunity to testify in support of House Bill 130 (“HB 130”), legislation that would require payers to implement “gold card” programs. Gold carding is a process that exempts providers with a record of consistent adherence to prior authorization submission requirements.

My name is Ryan Mezinger and I am the Vice President over pharmacy services at MetroHealth in Cleveland. We are the safety-net health system for Cuyahoga County, caring for the most under-resourced members of our community. MetroHealth’s more than 8,200 employees provide care at four hospitals, four emergency departments, plus a network of 23 community-based health centers and more than 40 additional sites throughout Northeast Ohio. Last year, MetroHealth served more than 300,000 patients during almost 1.5 million visits in its hospitals and health centers, 75 percent of whom are uninsured or covered by Medicare or Medicaid. So far this year, MetroHealth has submitted almost 40,000 prior authorization requests for outpatient services and over 31,000 requests for prescription drugs. Across most service lines, our approval rate is over 90 percent.

HB 130 would improve efficiency and reduce the administrative burden across the Ohio healthcare system. Administrative costs are estimated to consume a quarter to a third of total US healthcare spending, with an estimated 80 percent of these costs attributed to billing and insurance-related tasks¹. HB 130 won’t eliminate these costs altogether but it’s a step toward aligning healthcare administrative costs with those of other industries.

The health insurance industry has already experimented with these programs and the program results are promising. The percentage of health insurance plans using gold carding increased from 32 percent in 2019 to 58 percent in 2022². In a recent survey by AHIP, 69 percent of the health insurance plans using these programs showed positive outcomes, such as reduced administrative burden and improved provider satisfaction³. As more providers and health insurance plans implement these programs, the cost of implementing such programs will be reduced and the outcomes will improve. Additionally, as more providers and health insurance plans implement both gold carding programs, there is a stronger incentive to improve clinical workflows for patients, resulting in more timely and appropriate initiation of treatment. HB 130 will not only reduce healthcare costs in Ohio, but also improve clinical outcomes for patients and health outcomes for our communities.

Mr. Chairman, members of the Committee, thank you for the opportunity to speak in support of HB 130.

¹ [Billing And Insurance-Related Administrative Costs: A Cross-National Analysis | Health Affairs](#)

² [202207-AHIP_1P_Gold_Carding_Survey_Results.pdf \(securerserver.net\)](#)

³ [Legislation Exempts Doctors from Prior Authorizations | NantHealth](#)