

**Statement of the Ohio State Medical Association  
to the House Insurance Committee  
Proponent Testimony  
HB 130 – Prior Authorization Gold Card  
Presented by Monica Hueckel, VP, Advocacy**

**June 7, 2023**

Thank you, Chair Lampton, Vice Chair Barhorst, Ranking Member Miranda and members of the House Insurance Committee for the opportunity to testify today regarding House Bill 130. My name is Monica Hueckel and I am here to testify in strong support of this legislation on behalf of the Ohio State Medical Association (OSMA), the state's oldest and largest professional organization representing Ohio physicians, medical residents, and medical students.

As you have heard previously from the sponsor, prior authorization is a process currently used by insurance companies that requires providers to obtain insurer approval before prescribing a treatment, test, or other medical service. Unfortunately, the process of prior authorization is frequently cited by physicians, their medical staff, and patients as a major contributor to delays in care, which can be detrimental to health outcomes. In fact, according to a survey done by the American Medical Association (AMA) in 2021, 93% of physicians reported care delays resulting from prior authorization, and one-third of providers indicated that prior authorization had caused a delay in care that led to a serious adverse health event for one of their patients.<sup>1</sup> At the state level, OSMA consistently hears from our members with concerns about how prior authorization currently works and the negative impact it has upon their ability to provide efficient, high-quality, day-to-day care to their patients.

Prior authorization can also create considerable administrative hassle and burden, and exacerbate health care provider burnout. Many practices and institutions in Ohio and nationwide find themselves having to hire full time staff members solely to work on prior authorizations in order to have any hope of staying afloat and keeping up with the amount of work the process requires. As also reported in the AMA's Prior Authorization Physician Survey, physicians and their staff spend more than 13 hours per week, which is the equivalent of over two business days of work on prior authorizations.

House Bill 130 offers a solution to ease the burden of prior authorization. This legislation will create a prior authorization "gold card," where providers who consistently adhere to evidence-based medicine will be exempted from certain prior authorization requirements. Providers who receive approval for prior authorization for a given service at an 80% rate would earn gold card status for the select service for 12 months.

Creating a process to reward high performing health care providers who are consistently adhering to evidence-based medicine in this way is a common sense proposal that will streamline health care, reduce barriers to care, and significantly reduce the excessive red tape and overregulation faced daily by our health care providers. Similar legislation went into effect in Texas this past fall, and currently, about 30 states have introduced some form of prior authorization reform legislation.

To date, more than 30 Ohio healthcare associations, organizations, patient advocacy groups, and dozens of medical practices have signed on and indicated their support of this legislation.

Once again, OSMA is thankful to members of the committee for your attention to our comments on this legislation, and appreciates the opportunity to be a meaningful contributor to the legislative process. Please feel free to reach out to us if you have any questions.

---

<sup>i</sup> American Medical Association, 2022 AMA prior authorization (PA) physician survey, <https://www.ama-assn.org/system/files/prior-authorization-survey.pdf>