



Testimony for the Insurance and Real Estate Committee

March 9, 2023

on

S.B. No. 6 (COMM) AN ACT CONCERNING UTILIZATION REVIEW AND HEALTH CARE CONTRACTS, HEALTH INSURANCE COVERAGE FOR NEWBORNS AND STEP THERAPY.

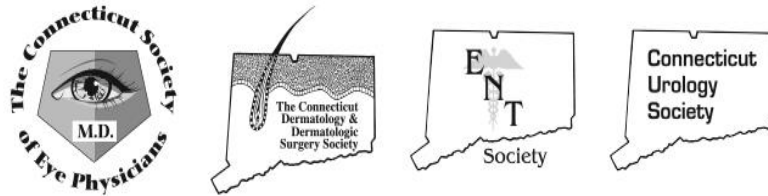
Good afternoon, Senator Cabrera, Representative Wood and other distinguished members of the Insurance and Real Estate Committee. My name is Mahesh Bhaya, MD and I am an otolaryngologist practicing in Waterbury, CT, I am also the Legislative Chair for the CT ENT Society. I am here on Behalf of the medical specialty societies representing Dermatology, Ophthalmology, Otolaryngology and Urology in support of SB 6. First and foremost, we would like to thank this committee for raising such a comprehensive bill and for addressing prior authorization and step therapy particular. Prior Authorization (PA) and Step Therapy are the leading causes of physician burn out, according to a recent survey by the Connecticut Urology Society.

Prior authorization is a burdensome process that requires physicians to obtain pre-approval for medical treatments or tests before rendering care to their patients. The process for obtaining this approval is lengthy and typically requires physicians or their staff to spend the equivalent of 2 or more days each week negotiating with insurance companies — time that would be much better spent taking care of patients. The forms can be lengthy and a thorough review of the medical record is required. Phone calls are sometimes required, and often the reviewer is frustratingly someone with lesser training than the physician making the call. This process certainly conveys the sense of an unnecessary roadblock that delays the start of care, especially since the majority of these PAs ultimately get 100% approval.

Health insurers frequently require PA for pharmaceuticals, durable medical equipment, and medical services. This added step, has not only created an enormous administrative burden on physicians, but has contributed exponentially to physicians' early retirements and to many leaving the healthcare delivery system. Most importantly, these delays in treatment adversely contribute to the pain and suffering of our patients and commonly impacts the final patient outcome.

To put things in perspective on a national scale, in 2020 the American Medical Association (AMA) surveyed more than 1,000 practicing physicians about Prior Authorizations. The survey results confirmed the magnitude of the burden they create:

- 85% of physicians describe the burden associated with prior authorization as high or extremely high.
- **30% said prior authorizations have led to a serious adverse event for a patient in their care.**
- **90% said prior authorizations have a negative effect on patients' clinical outcomes.**
- 40% said they have staff who work exclusively on prior authorizations.



This burden has taken its toll and has contributed to the alarming physician burnout the state – and the nation -- is experiencing in every specialty of medicine. In addition to the excessive time and employee manpower wasted on PAs, patients are placed at risk for delayed procedures and surgeries due to the surgeon's inability to secure a PA in a timely manner. SB 6 goes a long way in addressing some of the many egregious delay tactics insurers are imposing, including step therapies.

Everyone in this forum should be familiar with the toll that required step therapies take on medical care as we have testified on it more than 9 times in this committee alone. It is frustrating for physicians to fight for their patients year after year and to gain no ground in their patient advocacy efforts.

In closing, physicians hope that it is finally time that Connecticut leads the way in taking back some of the insurers' profits earned through these road blocks and delay tactics and give patients the prompt medical care that these premiums were meant to cover.

We hope that this committee will support SB 6 AN ACT CONCERNING UTILIZATION REVIEW AND HEALTH CARE CONTRACTS, HEALTH INSURANCE COVERAGE FOR NEWBORNS AND STEP THERAPY and allow physicians to make the medical decisions necessary for their patients. Predatory interference in the Doctor – Patient relationship can be harmful in other ways as it frequently undermines the trust and confidence of the patient as it delays treatment and can lead to worse, and at times, avoidable adverse outcomes.

Time is money for the insurers, but time delays can be life changing and life threatening for our patients.

Thank you for your consideration.