

American Cancer Society (ACS)
American College of Obstetricians and Gynecologists (ACOG) District II
Medical Society of the State of New York (MSSNY)
National Multiple Sclerosis (MS) Society
New York Chapter American College of Surgeons, Inc.
New York State Academy of Family Physicians (NYSAFP)
New York State American Academy of Pediatrics (NYS AAP – Chapters 1, 2 & 3)
New York State Bleeding Disorders Coalition (NYSBDC)
New York Chapter American College of Physicians
New York State Neurological Society
NYS Ophthalmological Society
NYS Society of Anesthesiologists
NYS Society of Orthopaedic Surgeons, Inc.
NYS Society of Otolaryngology-Head and Neck Surgery
New York State Radiological Society (NYSRS)
NYS Society of Plastic Surgeons, Inc.
NYS Psychiatric Association (NYSPA)

MEMORANDUM IN SUPPORT
A.7129 (Gottfried) / S.6435-A (Breslin)

PATIENTS DESERVE THE RIGHT TO TIMELY AND CONSISTENT CARE

Ensuring continuity of care and access to affordable healthcare for patients is critical.

The above-signed groups urge you to support, and help pass into law, A.7129 (Gottfried)/S.6435-A (Breslin). This measure would help to streamline the prior authorization process and reduce barriers experienced by patients, and their physicians, that delay access to treatment. Additionally, this legislation will protect patients' access to needed prescription medications and tests to facilitate accurate diagnosis.

Prior authorizations frequently impose overwhelming burdens that can cause unnecessary delays in needed care for patients. Delay in authorization of prescriptions, tests or procedures can cause needless anxiety for patients already stressed by uncertainty regarding their condition. A recent *Annals of Internal Medicine* study concluded that for every hour a physician spends on delivering care to a patient, two more are spent on administrative tasks. Moreover, a just-released American Medical Association (AMA) survey reported that 94% of responding physicians said that the prior authorization process delayed patient access to necessary care and 90% of the respondents indicated that prior authorization led to somewhat, or significant, negative outcomes.¹

Patients with chronic conditions have complex medical needs, and their health depends on following strict treatment regimens. Timely access to treatment and medications is critical to maintaining these regimens. Prior Authorization requirements may increase their risk of lapsing treatment or exacerbating progression of their disease as a result of these delays and can have a negative effect on their lives and health outcomes. Additionally, all patients need to know they'll receive treatment in a timely manner and that their care and treatment will continue to be covered by their insurance plan.

This legislation makes significant progress toward remedying the harm caused by prior authorization by requiring that health plan utilization review criteria be evidence-based and peer reviewed, reducing the insurer timeframe for reviewing prior authorization requests and limiting when an insurer can withdraw or repeat a previously granted prior authorization. The standards within this bill are based on recommendations made by several respected health care advocacy organizations to improve patient care.

A.7129/S.6435-A is critically important to protecting patients' access to timely care and to the prescription drugs that they need to keep them healthy. We urge you to support this important legislation.

¹ <https://www.ama-assn.org/system/files/2021-04/prior-authorization-survey.pdf>