

STREAMLINE ACCESS TO PATIENT CARE ELIMINATE UNNECESSARY DELAYS FOR 'GOLD CARD' PHYSICIANS Support HB 4979 (Rep. Gabel)/SB 3373 (Sen. Gillespie)

IHA Position: Managed Care Organizations (MCOs) often use prior authorization to deny payment for the delivery of Medicaid services, interfering with timely patient access to care and exacerbating patient boarding in hospital emergency departments (EDs). In response, IHA strongly supports HB 4979/SB 3373, "Gold Card" legislation that would exempt preferred providers from the prior authorization approval process based on their demonstrated history of prior authorization approvals and adherence to evidence based guidelines. Gold Card programs streamline access to care and help eliminate unnecessary delays and related administrative burden and costs. We urge Illinois lawmakers to co-sponsor and vote YES on HB 4979/SB 3373.

Background: Physicians order services that require prior authorization from MCOs, which are not allowed to proceed until authorization is received. This causes delays in performing a test or providing other services that can further exacerbate the patient's condition. Unfortunately, inappropriate delays in receiving prior authorization are a pervasive problem.

- An American Medical Association survey found **more than nine in 10 physicians (94%) report care delays while waiting for insurers to authorize necessary care and 89% saying prior authorization has a somewhat or significant negative impact on patient outcomes.**
- A 2023 U.S. Dept. of Healthcare and Human Services (HHS) Office of Inspector General's (OIG) study found that **on average, MCOs denied one of every eight requests for prior authorization for Medicaid healthcare services—** more than twice the denial rate of Medicare claims.
- **One Illinois MCO reported overturning 57% of denied prior authorization requests on appeal, and another MCO said it overturns 63% of denied prior authorization requests on appeal.**
- **A JAMA Network Open study of cancer patients showed that prior authorization led to delays in care, increased anxiety and patient administrative burden.** Twenty-two percent of patients did not receive the care recommended by their cancer treatment team. **An American Society of Clinical Oncologists 2022 survey found that nearly all participants report a patient has experienced harm because of prior authorization processes,** including disease progression (80%) and loss of life (36%).
- Cumbersome and unnecessarily burdensome **prior authorization policies can result in days-long waits for transfer to receive appropriate, non-emergent care.** This contributes to ED boarding, a practice the American College of Emergency Physicians has deemed a public health crisis, with research showing that boarding leads to worse patient outcomes, including increased mortality.

Gold Card laws have been adopted by West Virginia, Texas and Michigan as a way to exempt high-performing physicians from prior authorization requirements if they have a prior authorization request approval rate percentage that meets the minimum threshold established in the law.

Key Provisions: HB 4979/SB 3373 require a Gold Card designation for physicians who meet a defined level of proficiency when ordering medical services, waiving the requirement that a service authorization request must be submitted. Physicians with an 80% approval history will receive a waiver of any prior authorization requirement for one year. As recommended in an Office of Inspector General report, HB 4979/SB 3373 require HFS to conduct an annual third party medical review of initial prior authorization denials and denials overturned on appeal.

PLEASE CO-SPONSOR AND SUPPORT HB 4979/SB 3373