

Dear Chair Houghton & members of the House Health Care Committee:

I am reaching out to express my support for H. 766 and reducing prior authorization and administrative burdens in the practice of medicine.

I am an ophthalmologist running a small, private practice in Middlebury. One example of particularly burdensome prior authorizations are those that are approved at 100%. These do not save money or improve care. An example of this in my practice is when payers require prior authorization for cataract surgery. They are always required but always approved. This takes time away from more important tasks for both staff and clinicians and is of no benefit to the patient. A number of states in the south have recently fought to remove cataract prior authorization requirements and succeeded. Section 4, asking DFR to create rules that would prohibit PA for services with low variation and denial rates is particularly important.

Thank you for considering my comments and please feel free to reach out with questions.

Amy Gregory, M.D.