As a doctor, I've been told to reduce my feelings of burn-out by engaging in yoga, mindfulness, exercise, hobbies, vacations, and SSRIs only go so far. However, what is really needed are reforms that make my job more efficient. The proposed H766 promises to do just that by reducing Prior Authorization hassles!

This bill would:

- reduce the time frames within which health plans must respond to urgent prior authorization requests;
- limit the occasions on which reauthorization is necessary for a previously approved treatment, service, or course of medication;
- require health plans to grant exceptions to prescription drug step-therapy requirements under certain circumstances;
- direct the Department of Financial Regulation to prohibit prior authorization requirements
 for generic medications and for items and services with low variation and low denial rates
 across health care providers;
- limit payer claims edits to Medicare claims edits and prohibit any prepayment reviews where documentation is required before claim payment; and
- require health insurers, not health care providers, to collect cost-sharing amounts from patients.

I strongly recommend this bill which I believe will help:

- prevent the real harm that is done to physicians and other health care professionals by the many hurdles involved in trying to deliver good health care
- reduce the hassles to patients as they try access health care
- improve efficiencies which promises to save money for the health care system.

Sincerely,	
George	
George Terwilliger, MD	
Chief Medical Officer	
Grace Cottage Hospital	