

April 7, 2024

Dear Chair Lyons and Members of the Senate Health and Welfare Committee,

We are the Green Mountain Care Board's Primary Care Advisory Group (PCAG) and are urging you to support of H.776. PCAG is a diverse group of 16 primary care providers with a variety of licensures, practice structures and primary care specialties. Decreasing the burden of prior authorizations has been a priority since our inception in 2016. By limiting prior authorizations, passage of H.766 stands to improve multiple critical issues in primary care including patient access, patient outcomes, high cost, fragile primary care infrastructure, workforce shortage and burnout.

Insurance companies will tell you that they save money with PAs. But they do so on the backs of already overburdened primary care practices. This increases overall healthcare cost and decreases patient access. In PCAG members' practices, for every 4 -6 providers, there is 1 employee working solely on PAs. This is financially draining and takes resources away from patient care. Think for a moment how we might be able to expand *meaningful* primary care services if these staff members could spend their time in actual patient care, such as patient education or coordination of care for our high-risk patients.

Prior authorizations cause real harm to patients. PCAG members have seen our patients unnecessarily hospitalized due to delays in getting authorization for medications such as antibiotics, inhalers, and cardiac meds. We have seen unintended pregnancies when PAs were delayed for birth control pills.

Prior Authorizations increase cost and decrease access to primary care. Many PCAG members report having sent patients to the ED and to specialists to get testing done. A pediatrician gave an example of a child with head trauma needing a head CT. Because of a delay in obtaining the PA, she sent the child to the ED. Insurers will tell you that PAs are done within 48 hours and on-call wait times are less than 8 minutes. If you are inclined to believe them, the members of PCAG invite you to spend a day in our clinics.

The PA process is irrational, burdensome, and contributes to professional burn-out. We often don't have access to lists of approved medications, or to the criteria for getting tests approved. Sometimes simply phrasing the request differently results in approval. We have to play games in order to get our patients the care they need.

PCAG member Dr. Fay Homan, will be providing testimony on H.766 this Thursday, April 11th. She will have further specific examples from our group to share on this issue.

As legislators, you are well aware of the recurring issues in today's challenging health care scene: patient access, patient outcomes, high cost, fragile primary care infrastructure, workforce shortage, and burnout. H.766 plays a role in addressing all of these. Please provide your support.

With thanks for your dedication to improving health care in Vermont,

Sincerely,

Primary Care Advisory Group:

Allan Ramsay, MD

Carrie Wulfman, MD

Eileen Murphy, MSN, APRN, FNP-BC

Elliot Rubin, MD, FAAP

Fay Homan, MD

Katie Marvin, MD

Leigh LoPresti, MD

Michelle Wade, MSN/Ed, APRN, NP-C, ACNPC-AG

Robert Penney, MD

Tim Tanner, MD, MPH

Valerie Rooney, MD, FAAP

Courtney Ledger, NP

John King, MD, MPH

Emilija O. Florance, MD

Paul Reiss, MD

Kristen Sheehan, MSN, APRN, FNP-BC