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April 24, 2025

Senator Kyle Mullica  
Colorado State Capitol  
200 E Colfax Ave  
Denver, CO 80203

Dear Health and Human Services Committee Chair and Members,

The Crohn's & Colitis Foundation is pleased I am writing to support Senate Bill 25-301 "Remove Authorization Requirement Adjust Chronic Prescription". The Crohn's & Colitis Foundation is a non-profit, volunteer-fueled organization dedicated to finding cures for Crohn's disease and ulcerative colitis and improving the quality of life of children and adults affected by these diseases. This bill represents a significant step forward in the management of chronic and debilitating conditions, particularly for patients with Inflammatory Bowel Disease (IBD).

Many Colorado residents who suffer from a chronic disease or illness rely on prescription medications to survive. One example is IBD, a lifelong chronic illness that requires access to specific treatment. There is no one size fits all treatment for everyone with IBD. The approach must be tailored to the individual because each person's disease is different. Healthcare providers typically seek to avoid switching the medication of stable IBD patients, as finding a new treatment can be painful and time intensive. When insurance companies deny coverage of a medication or the optimization of dosage to an existing approved prescription, despite healthcare providers deeming medication vital to the patient's health, patients risk hospitalization and even death

Many chronic diseases are well-managed with the regular use of the right medication at the right dose. When providers work with patients to find an effective medication, over time they may require adjustment of the amount given, either by increasing the dose or decreasing the dosing interval to achieve an effective therapeutic response.

SB 25-301 allows healthcare providers to modify the dosage or frequency of chronic maintenance drug prescriptions without needing prior authorization and would greatly improve IBD patient care.

- **Timely Access to Medication Adjustments:** IBD patients often experience unpredictable flare-ups that require immediate adjustments to their medication regimen. The ability



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to adjust prescriptions without the administrative delays associated with prior authorization ensures that patients receive timely care, which is crucial for managing their symptoms and improving their quality of life.

- **Continuity of Care:** By allowing healthcare providers to adjust prescriptions without prior authorization, this legislation supports continuous and uninterrupted care for IBD patients. This is especially important for pediatric IBD patients, who may require more frequent medication adjustments as they grow and their bodies change.

However, it is also critical to address potential unintended impacts that could result by carving out off-label use. Many medications prescribed for IBD pediatric patients are used off-label. Off-label use often reflects the most current and innovative approaches to treatment. Restricting this flexibility could stifle advancements in IBD management and negatively impact patient outcomes.

In conclusion, SB 25-301 is a needed step toward improving healthcare for IBD patients, especially those in the pediatric population. It is imperative that the bill remains focused on facilitating timely and effective treatment without restrictive amendments that could harm patient care. I urge you and your colleagues to support this bill and ensure that it remains unencumbered by limitations on off-label use.

Thank you for your attention to this important matter. I am confident that with your leadership, we can make a significant positive impact on the lives of IBD patients in Colorado.

Sincerely,

A handwritten signature in black ink that reads "Maggie Acuna".

Maggie Acuna

Associate Director, State Advocacy



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Associate Director, State Advocacy



April 23, 2025

Colorado State Capitol  
200 E Colfax Ave  
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**RE: Support for Colorado SB25-301 Prescription Drug Coverage: Dose Adjustments**

On behalf of the Headache and Migraine Policy Forum (HMPF) we are writing in support of SB25-301, which would give health care professionals the authority to streamline prior authorization requests for previously covered prescription drugs and dosage adjustments. We ask that you pass this bill into law, ensuring patients receive timely treatment access.

HMPF is a group of diverse stakeholders seeking to advance public policies and practices that promote access to care for persons living with headache disorders and migraine disease. Approximately 40 million Americans live with migraine disease – with an estimated 680,000 of which live in Colorado. As the second leading cause of disability globally, poor management of the disease leads to presentism and absenteeism in the workplace and at school, additional pain for patients, and a burden to families and caregivers.

Delays in treatment for patients, especially those living with migraine, can worsen the patient's outcomes and lead to even higher costs to the health care system. For these patients, access to timely treatment that could improve their quality of life and prevent migraine attacks is incredibly important.

Current prior authorization regulations lead to burdensome requirements and questions about the process due to its lack of transparency. Insurers claim prior authorization stops unnecessary use of expensive treatments. However, it's become a cost-cutting tool that makes it hard for patients to access treatment, especially newer, more innovative medicines. Migraine patients need tailored approaches to their care and treatment in order to optimally manage their disease.

SB25-301 would give health care professionals the authorization to adjust dosage and frequency of a drug to meet patients specific needs without burdensome prior authorization paperwork. It would also protect patients whose treatment plans had previously been covered, from onerous re-authorization processes that often lead to treatment delays and sometime abandonment.

On behalf of Colorado headache and migraine patients, we ask that you pass SB25-301 into law, creating protections for patients ensuring timely access to care.

Sincerely,

Lindsay Videnieks

*Executive Director*

The Headache & Migraine Policy Forum

[headachemigraineforum.org](http://headachemigraineforum.org)



**To:** Members of the Senate Health and Human Services Committee  
**From:** Khoa Nguyen | Young Invincibles | MD/MBA Candidate at the University of Colorado  
**Re:** **SB25-301 - Remove Authorization Requirement Adjust Chronic Prescription**

Mr. Chair, and members of the committee,

Thank you for the opportunity to share my testimony with you. My name is Khoa Nguyen. I am representing Young Invincibles as one of their Young Advocates. I am completing my MD at the University of Colorado School of Medicine and my MBA at the University of Colorado Denver Business School. Short of applying to residency and obtaining my MD, I have fulfilled all curricular and licensure requirements expected thus far for the MD. I am here to encourage you all to **pass SB25-301**.

This morning, I was reviewing a list of past patients that I have been a part of the care team for. To my surprise, one of my patients had passed away. This individual suffered from chronic illness, ranging from Crohn's disease to chronic abdominal pain and nutritional decline. During the year that he was under the care of my attending physician and me, I was always personally on-call to ensure rapid response to their chronic health needs. Calls for adjusting medications and prescriptions to manage his pain, his ability to sleep, and his quality of life came at all points of the day. Many times, changes to specific prescriptions often required my attending physician to conduct prior authorization calls with his insurance companies. At times, these calls could happen immediately, while on other occasions, they required scheduled calls that were days to weeks out from the time of his initial request. No patient living with a chronic disease or requiring chronic medication maintenance should ever have to live days to weeks without vital medication.

Professionally, as a future physician, prior authorization calls limit my ability and that of my colleagues to provide quality, timely care to our patients. Prior authorization calls consume a significant amount of time in our schedule. In fact, the last time I had participated in a call with one of my mentors, it took us over two hours to obtain authorization from the insurance company. At times, these calls can escalate in heated tension between the physician responsible for the patient and the claims reviewer, who often has no formal medical training or limited training in medical terminology.

Living with chronic disease, and needing chronic medication management is a 24/7 role that patients have to live with. Changes and adjustments for chronic prescriptions are meant to help alleviate the pain and suffering for these patients. If this were your loved one, would you be okay with them suffering while their physician has to obtain prior authorization?

No one should be prevented from obtaining a much-needed adjustment in their prescriptions due to prior authorization. I urge every committee member to **vote "yes" on SB25-301**. Thank you for your consideration. I am happy to answer any questions.

Sincerely,

Khoa Nguyen | MD/MBA Candidate

University of Colorado School of Medicine | University of Colorado Denver Business School

Youth Advocate | Young Invincibles

Junior Fellow | Global Council on Science and the Environment