

SENATE COMMITTEE OF REFERENCE AMENDMENT

Committee on Health & Human Services.

SB22-078 be amended as follows:

1 Amend printed bill, page 2, lines 2 and 3, strike "**amend** (4)(b)(II)(A)"  
2 and substitute "**add** (4)(b)(II)(C) and (4)(c)".

3 Page 2, strike lines 6 through 20.

4 Page 3, strike lines 1 and 2 and substitute "**exceptions - definitions -**  
5 **rules - repeal. (4) Criteria, limits, and exceptions.** (b) (II) (C) THIS  
6 SUBSECTION (4)(b)(II) IS REPEALED, EFFECTIVE JANUARY 1, 2023.

7 (c) (I) ON AND AFTER JANUARY 1, 2023, A CARRIER OR  
8 ORGANIZATION SHALL OFFER A QUALIFIED PROVIDER AT LEAST ONE  
9 ALTERNATIVE TO PRIOR AUTHORIZATION, INCLUDING:

10 (A) AN EXEMPTION FROM PRIOR AUTHORIZATION REQUIREMENTS;

11 (B) AN INCENTIVE AWARDED TO THE PROVIDER THAT REDUCES  
12 THE WAIT TIME FOR OR ADMINISTRATIVE BURDEN ON A COVERED PERSON  
13 TO RECEIVE THE REQUESTED HEALTH-CARE SERVICE; OR

14 (C) ANY OTHER INNOVATIVE PROGRAM OF THE CARRIER'S OR  
15 ORGANIZATION'S DESIGN TO REWARD PROVIDER COMPLIANCE WITH THE  
16 CARRIER'S OR ORGANIZATION'S PRIOR AUTHORIZATION REQUIREMENTS  
17 AND THAT REDUCES THE WAIT TIME FOR OR ADMINISTRATIVE BURDEN ON  
18 A COVERED PERSON TO RECEIVE THE REQUESTED HEALTH-CARE SERVICE.

19 (II) A PROVIDER IS A QUALIFIED PROVIDER FOR PURPOSES OF  
20 SUBSECTION (4)(c)(I) OF THIS SECTION IF THE PROVIDER:

21 (A) IS A PARTICIPATING PROVIDER AND HAS BEEN A PARTICIPATING  
22 PROVIDER CONTINUOUSLY FOR AT LEAST THE IMMEDIATELY PRECEDING  
23 TWELVE MONTHS; AND

24 (B) OVER THE IMMEDIATELY PRECEDING TWELVE MONTHS, HAS AT  
25 LEAST A NINETY-FIVE PERCENT APPROVAL RATE ON AT LEAST FIFTY PRIOR  
26 AUTHORIZATION REQUESTS SUBMITTED FOR COVERED PERSONS UNDER A  
27 HEALTH BENEFIT PLAN OFFERED BY THE CARRIER.

28 (III) NEITHER A CARRIER NOR AN ORGANIZATION IS REQUIRED TO  
29 OFFER AN ALTERNATIVE TO PRIOR AUTHORIZATION TO A PROVIDER THAT  
30 IS NOT QUALIFIED PURSUANT TO SUBSECTION (4)(c)(II) OF THIS SECTION,  
31 INCLUDING A PROVIDER THAT HAS NOT SUBMITTED PRIOR AUTHORIZATION  
32 REQUESTS TO THE CARRIER OR ORGANIZATION FOR AT LEAST TWELVE  
33 MONTHS.

34 (IV) AT LEAST ANNUALLY, A CARRIER OR ORGANIZATION SHALL  
35 REEXAMINE A PROVIDER'S PRESCRIBING OR ORDERING PATTERNS AND  
36 REEVALUATE WHETHER THE PROVIDER IS A QUALIFIED PROVIDER FOR  
37 PURPOSES OF AN EXEMPTION FROM OR OTHER ALTERNATIVE TO PRIOR  
38 AUTHORIZATION REQUIREMENTS PURSUANT TO SUBSECTION (4)(c)(I) OF  
39 THIS SECTION.

1 (V) THE CARRIER OR ORGANIZATION SHALL INFORM THE PROVIDER  
2 OF THE PROVIDER'S EXEMPTION STATUS AND PROVIDE INFORMATION ON  
3 THE DATA CONSIDERED AS PART OF ITS REEXAMINATION OF THE  
4 PROVIDER'S PRESCRIBING OR ORDERING PATTERNS FOR THE  
5 TWELVE-MONTH PERIOD OF REVIEW."

6 Page 3, line 14, strike "A" and substitute "ON AND AFTER JANUARY 1,  
7 2023, A".

8 Page 3, strike lines 15 through 17 and substitute "SHALL OFFER A  
9 QUALIFIED PRESCRIBING PROVIDER AT LEAST ONE ALTERNATIVE".

10 Page 3, line 20, strike "PROVIDER;" and substitute "PROVIDER THAT  
11 REDUCES THE WAIT TIME FOR OR ADMINISTRATIVE BURDEN ON A COVERED  
12 PERSON TO RECEIVE THE REQUESTED DRUG BENEFIT;"

13 Page 3, line 24, strike "REQUIREMENTS." and substitute "REQUIREMENTS  
14 AND THAT REDUCES THE WAIT TIME FOR OR ADMINISTRATIVE BURDEN ON  
15 A COVERED PERSON TO RECEIVE THE REQUESTED DRUG BENEFIT.

16 (II) A PRESCRIBING PROVIDER IS A QUALIFIED PRESCRIBING  
17 PROVIDER FOR PURPOSES OF SUBSECTION (5)(b)(I) OF THIS SECTION IF THE  
18 PRESCRIBING PROVIDER:

19 (A) IS A PARTICIPATING PROVIDER AND HAS BEEN A PARTICIPATING  
20 PROVIDER CONTINUOUSLY FOR AT LEAST THE IMMEDIATELY PRECEDING  
21 TWELVE MONTHS; AND

22 (B) OVER THE IMMEDIATELY PRECEDING TWELVE MONTHS, HAS AT  
23 LEAST A NINETY-FIVE PERCENT APPROVAL RATE ON AT LEAST FIFTY PRIOR  
24 AUTHORIZATION REQUESTS SUBMITTED FOR COVERED PERSONS UNDER A  
25 HEALTH BENEFIT PLAN OFFERED BY THE CARRIER.

26 (III) NEITHER A CARRIER NOR A PHARMACY BENEFIT MANAGEMENT  
27 FIRM IS REQUIRED TO OFFER AN ALTERNATIVE TO PRIOR AUTHORIZATION  
28 TO A PRESCRIBING PROVIDER THAT IS NOT QUALIFIED PURSUANT TO  
29 SUBSECTION (5)(b)(II) OF THIS SECTION, INCLUDING A PRESCRIBING  
30 PROVIDER THAT HAS NOT SUBMITTED PRIOR AUTHORIZATION REQUESTS TO  
31 THE CARRIER OR PHARMACY BENEFIT MANAGEMENT FIRM FOR AT LEAST  
32 TWELVE MONTHS."

33 Renumber succeeding subparagraphs accordingly.

34 Page 3, line 27, after "REEVALUATE" insert "WHETHER".

35 Page 4, line 1, strike "PROVIDER'S STATUS FOR" and substitute "PROVIDER  
36 IS A QUALIFIED PRESCRIBING PROVIDER FOR PURPOSES OF AN".

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