

From: [Hakeman, Susan M., M.D.](#)
To: [OIC Rules Coordinator](#)
Subject: FW: Prior Auth
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Hello,

Thanks for tackling the upward spiral of prior authorizations. Here are two examples.

I will have an adult patient who has AD/HD and may have been on a generic Adderall XR cousin for years. They change insurances, and it will need a prior authorization, which will be only granted for one year (at this point, the patient can't be expected to out grow it!). This is a needless waste of time (not done by Regence or Premera).

Or, I will have someone trying a new stimulant, and they need to find the best dose. I will write the directions one to 3 tablets to best attention. I have to get a prior auth for the single dose strength and then start over when it turns out the best dose is for double strength (and sometimes it will only be ok'd for a year).

This takes time, delays care and causes patient and provider and staff frustration.

Thank you,

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mailgate.hinet.org made the following annotations

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