



October 14, 2016

Jim Freeburg,
Washington State Office of the Insurance Commissioner
PO Box 40255
Olympia, WA 98504-0255

Re: Comments Regarding Prior Authorization Stakeholder Draft

Dear Mr. Freeburg,

On behalf of our 107 hospital and health system members, the Washington State Hospital Association appreciates the opportunity to comment regarding potential rulemaking by the Office of the Insurance Commissioner (OIC) on prior authorization practices in this state.

We are pleased that the OIC is willing to consider rulemaking regarding prior authorizations. There has been a tremendous increase in the number of prior authorizations required by health plans. While the current draft does not address all our concerns regarding the proliferation and lack of standardization of prior authorization requirements, we believe it is a strong step forward in ensuring plans are more responsible for administering prior authorizations in a more accessible and transparent manner.

In particular, we appreciate the addition in this latest draft of the language concerning extenuating circumstances and the addition of the clinical criteria transparency requirements from House Bill 1471. We have a few comments, which we intend as helpful clarification of some of the draft language. These comments are on the attached sheet.

Thank you for considering our additional comments. If you have questions, please contact Andrew Busz, WSHA Policy Director, Finance at andrewb@wsha.org or (206) 216-2533.

A handwritten signature in blue ink that reads 'Claudia'.

Claudia Sanders
Senior Vice President
Policy Development

A handwritten signature in red ink that reads 'Andrew'.

Andrew Busz
Policy Director, Finance

Specific WSHA Comments Regarding Current Stakeholder Draft Rules

New Definitions

'Pre-Service Requirement'. We believe the list of examples should include what may be the most common type of pre-service requirement demanded by carriers. To the end of the examples we request be added "or a service that must be provided before a specific service will be authorized, such as a trial of physical therapy prior to surgical treatment".

Extenuating Circumstances

We appreciate the OIC's inclusion of this section. We request one correction/clarification. The language in (2) (a) seems incorrectly to limit the provision to outpatient services. It is very possible that in the midst of an inpatient surgery a doctor may find the patient requires a procedure in addition to or different than the one that was prior authorized. We request the provision be changed to include: (a) a provider is unable to anticipate the need for a specific service in question before providing the service.