



August 17, 2017

Mike Kreidler  
Washington State Insurance Commissioner  
PO Box 40255  
Olympia, WA 98504-0255

Re: Comments on proposed rulemaking for "Goldcarding"

Dear Commissioner Kreidler,

We are writing on behalf of the Washington Healthcare Forum to comment on proposed rulemaking related to "optimizing prior authorization, also known as "Goldcarding" (R2017-07). These comments are derived from the collaborative work the Forum has undertaken over the past two years to study alternative approaches to prior authorization. Throughout this effort, we worked closely with your office and other non-Forum organizations. In the course of this exercise, the Forum was privileged to be able to learn from healthcare organizations with significant experience around "Goldcarding." One way to perhaps better describe "Goldcarding," is as a provider recognition program that is predicated upon evidence based criteria, clinically rigorous decision rules and appropriateness of care. The Forum's interest in this subject, which is shared by our stakeholders, is derived from our belief that Goldcarding can produce better outcomes, reduce administrative complexity and enhance the patients' experience.

While we know "Goldcarding" takes many forms, among our stakeholders, one form of "Goldcarding" is seen to offer the most promise. This approach involves provider organizations demonstrating to health plan partners, sufficient clinical rigor in their internal medical management practices, that the providers can take increasing responsibility for medical management. This has the effect of simplifying the patients' journey through the system by easing health plan prior authorization requirements. The Forum's comments below are targeted exclusively at this particular form of "Goldcarding" which we describe as "shared medical management responsibilities."

In compiling these comments we reflected back on the conversation the Forum had with you and Ms. Beyer last February. You stressed, and we agreed, that despite the ongoing discussions at the federal level, it was critical for our health care community in Washington State to continue its work on delivery system reform and achievement of the triple aim. Key elements of this work are well aligned with the goals of shared medical management responsibilities. In this context, our comments are as follows:

- Where provider organizations can demonstrate sufficient clinical rigor in their medical management practices, we believe it is in the best interest of all parties, particularly patients, for those providers to assume greater responsibility for medical management. This allows provider organizations and health plans to deliver the best patient outcomes, while reducing administrative waste and streamlining the process for everyone. We believe it is important to support and encourage expansion of these improved approaches. We are concerned that a regulatory approach in this area will unduly restrict the best practices of progressive health plans and provider organizations. We believe this model of sharing medical management responsibilities is an effective alternative to traditional prior authorization and should not be regulated as a prior authorization activity.



- We understand that your office is concerned about how providers and health plans employ medical criteria in shared medical management initiatives like those described above. We would note that the nature of medical management today, with expanding use of health information technology, is such that different provider and health plan organizations may utilize slightly different criteria and practices. We do not believe it is practical or desirable to force rigid standardization on these medical management criteria and practices. We believe what is most important, is that provider organizations and their health plan partners utilize *evidence-based criteria and clinically rigorous and appropriate practices* that they both believe will enhance patient safety and improve outcomes.
- We know that our stakeholders who are engaged today in shared medical management activities support expansion of these efforts and the shared benefits these activities confer on patients, providers and health plans. These progressive organizations are concerned that the proposed regulatory efforts described in the CR 101 will have the opposite effect and freeze or eliminate these shared medical management activities. *For this reason, the Forum respectfully requests the OIC to withdraw the CR-101. We do not believe the OIC has adequately demonstrated the need for this rulemaking effort and, there is a legitimate concern that adopting the OIC's proposed language will result in health plans and providers being discouraged from collaborating around innovative medical management initiatives that improve efficiency and support appropriate, evidence-based care.*
- The Forum has considered moving forward with a pilot project to explore what opportunities may exist to harmonize practices around shared medical management responsibilities. One goal of this pilot would be to make it easier for more provider and health plan organizations to expand their efforts in this area. The Forum is unable to proceed with this effort in a regulatory environment that restricts such initiatives. For this reason, we do not know if this pilot will move forward. However, if the regulatory approach adopted by your office is supportive of this type of work, the Forum will attempt to launch the pilot, invite your representatives to observe and, if successful, will share the findings from the pilot broadly. We believe this pilot will complement the ongoing work of health plans and providers to develop and deploy alternative approaches to traditional prior authorization.

We strongly support the expansion of efforts to share medical management responsibilities between providers and health plans using clinically appropriate and rigorous practices, and evidence based criteria. We know this expansion will significantly accrue to the benefit of the patients involved in these efforts. We urge you to allow these activities to continue without the constraint of a restrictive regulatory framework.

Thank you for your consideration of our comments. We are happy to answer any questions you and your staff may have. We look forward to future collaboration with you and your staff.

Sincerely yours,

Richard Cooper, Chairman

Sincerely yours,

Richard Rubin, Executive Director

Cc: Forum member organizations