

## **Testimony of Shane Goettle**

*On Behalf of the American Cancer Society-Cancer Action Network*

**House Industry, Business and Labor Committee**

**Chairman - Representative Jonathan Warrey**

### **Senate Bill 2280**

Chairman Warrey, members of the House Industry, Business and Labor Committee, my name is Shane Goettle, and I am here today on behalf of the American Cancer Society-Cancer Action Network to testify in strong support of Senate Bill 2280.

This legislation is crucial in addressing the systemic barriers created by the current prior authorization process, which often delays access to medically necessary care for patients, including those battling cancer.

When prior authorization was first introduced, it was intended as a safeguard to ensure that high-cost medical procedures and treatments were necessary and appropriate. However, over time, this process has evolved into an overused bureaucratic hurdle that affects even the most routine treatments. According to a 2023 survey conducted by the American Medical Association:

- 92% of physicians report that prior authorization results in care delays, posing a significant risk to patient health.
- 33% report that delays in authorization have led to serious adverse events for their patients.
- 80% indicate that prior authorization requirements contribute to treatment abandonment.

For cancer patients, these statistics are not just numbers; they represent real people facing life-threatening illnesses who are being forced to wait for care while their insurance company reviews requests that should be standard.

For patients undergoing chemotherapy, radiation, or other critical treatments, timely access to care is not a luxury—it is a necessity. Prior authorization delays can mean the difference between a treatment being effective or ineffective, particularly in aggressive cancers where every day counts. Cancer patients cannot afford to wait days or weeks for an insurance company to determine whether their prescribed treatment is necessary.

Moreover, requiring re-authorization for medications that patients have already been using successfully for years adds unnecessary stress to individuals already dealing with the emotional and physical toll of a cancer diagnosis.

SB 2280 introduces several key reforms to address these issues:

1. **Standardized Definitions and Transparency** – The bill ensures uniformity in how "prior authorization" and "medical necessity" are defined, reducing ambiguity and streamlining the approval process.

2. **Extended Validity for Prior Authorizations** – A prior authorization for maintenance medications will be valid for at least one year, eliminating redundant paperwork and preventing unnecessary delays.
3. **Timely Decision-Making** – Insurers must respond to urgent prior authorization requests within 72 hours and non-urgent requests within seven calendar days, ensuring that patients receive the care they need when they need it.
4. **Peer Review by Qualified Specialists** – The bill mandates that prior authorization denials must be reviewed by a physician, licensed dentist, or licensed pharmacist with expertise in the specific medical condition, reducing the likelihood of inappropriate denials.
5. **Online Accessibility and Transparency** – Health insurers will be required to post all prior authorization procedures and lists of services subject to prior authorization on their websites to provide clear guidelines for patients and providers.
6. **Protection Against Retrospective Denials** – A prior authorization review organization may not revoke or limit a previously granted authorization if care is provided within 45 business days unless fraud is involved.
7. **Study on Prior Authorization's Impact** – The bill now includes a legislative management study to assess the effects of prior authorization on patient care and healthcare costs, ensuring accountability and improvement in future reforms.

Reforming prior authorization is a national trend. According to the National Conference of State Legislatures, 23 states have enacted over 43 bills in recent years to address this issue, with 18 new laws passed in 2024 alone. North Dakota must act now to ensure that our patients receive timely, appropriate care without unnecessary bureaucratic obstacles.

### **Conclusion:**

On behalf of the American Cancer Society-Cancer Action Network and the countless cancer patients affected by prior authorization delays, I urge you to support Senate Bill 2280. This legislation will not eliminate prior authorization, but it will ensure that the process is transparent, efficient, and, most importantly, does not put patients' health at risk.

I appreciate your time and consideration and respectfully ask for a Do Pass committee vote on SB 2280. Thank you, and I am happy to answer any questions.