

# HB 225, SB 225

## Improving Prior Authorization and Fail First for Pennsylvanians

### What is Prior Authorization?

Prior authorizations (PA) require a physician to request health insurer approval of a prescription drug or other health care services before such care is delivered. Health plans often use PA to restrict access to costly services and therapies—particularly newer treatments. Health plans may also use PA to ensure that a therapy is appropriate and safe for a specific patient.

### What is Fail First?

Fail First (also known as step therapy) requires patients to try, and fail, on one or more prescription drugs chosen by their insurance company – not their healthcare professional - before gaining access to the drug that was recommended to treat their health condition.

### Who is Affected?

Prior Authorization and Fail First are often applied to patients living with a wide range of diseases and chronic conditions including, but not limited to:

- Cancer
- Diabetes
- Hemophilia
- Epilepsy
- Arthritis
- Multiple Sclerosis
- Lupus
- Crohn’s Disease
- Colitis
- Rheumatoid Arthritis
- Psoriasis
- Autoimmune Disorders
- Heart Disease
- Mental Illness
- Chronic Pain Related Diseases
- HIV/AIDS

### Why are Prior Authorization and Fail First a Problem?

This one-size-fits-all approach to controlling health care costs undermines and burdens providers, and may lead to unnecessary delays, even denials, of care. This often causes Pennsylvania patients’ health to deteriorate as they await authorization or try and fail on medications that don’t work for them. There is currently no requirement that prior authorizations be determined in reasonable timeframes in addition to no clear step therapy exemption process.

**Health care decisions should be made by providers and patients!**

#### What the Legislation Does:

- Ensures prescribers have access to more efficient electronic prior authorization systems (“ePA”) and establish a minimum approval duration period to expedite the prior authorization process, reducing administrative burdens for physicians, and ultimately, better serving patients in the health care system.
- Ensures that fail first protocols are based on clinical guidelines developed by independent experts.
- Establishes a basic framework for when it is medically appropriate to exempt patients from fail first, as well as an exceptions process that is transparent and accessible to patients and health care providers.

#### What the Legislation Does NOT Do:

- It does not prohibit insurers from using fail first nor limit the number of allowed steps.
- It does not prevent insurers from requiring prior authorization before covering a drug.
- It does not prevent insurers from requiring patients to try a generic drug if it is equivalent to the brand.