



April 11, 2024

Senator Bert Stedman, Co-Chair
Senator Lyman Hoffman, Co-Chair
Senate Finance Committee
Room 532, State Capitol
120 4th St
Juneau, AK 99801

Dear Chair Stedman, Chair Hoffman, and Members of the Senate Finance Committee,

The Denali Oncology Group and the Association for Clinical Oncology (ASCO) are pleased to support **SB 133**, which would improve timely access to care for patients and reduce administrative burden for physicians in Alaska.

The Denali Oncology Group's primary mission is to promote, plan, support, represent, advocate for, and conduct educational and scientific activities to facilitate improvements in the practice of oncology and the delivery of care to patients for the benefit of the citizens and residents of the State of Alaska. ASCO is an organization representing physicians who care for people with cancer. With over 50,000 members, our core mission is to ensure that cancer patients have meaningful access to high quality cancer care.

Prior authorization requires patients or their providers to secure pre-approval as a condition of payment or insurance coverage of services. In a recent ASCO survey, 80% of respondents said that a patient has experienced significant impacts on their health, such as disease progression, because of prior authorization processes. The most common harms to patients include delays in treatment (95%) and diagnostic imaging (94%), patients being forced onto second-choice therapy (93%) or denied therapy (87%) and increased out-of-pocket costs (88%). These survey responses confirm that prior authorization results in unnecessary delays or denials of cancer care.

The Denali Oncology Group and ASCO are committed to supporting policies that reduce cost while preserving quality of cancer care; however, it is important that these policies are developed and implemented in a way that does not undermine patient access. Payer utilization management approaches like prior authorization are of particular concern because they represent greater likelihood of raising barriers to appropriate and timely care for patients with cancer. While many treatments preferred by payers cost less, they may not be the best treatment available for the patient. Furthermore, the burden on practices in terms of employee resource utilization dedicated to preauthorization is onerous.

The Denali Oncology Group and ASCO support language in this bill that:

- **Accommodates the needs of specialized patient populations** by requiring insurers to establish a process for a clinician to requires a clinical peer review of a prior authorization request;
- **Improves timely access to care** by requiring insurers to respond to prior authorization requests within 24 hours for urgent requests and within 72 hours for other requests;
- **Ensures continuity of care** by stipulating that prior authorization for a chronic condition is valid for at least 12 months; and
- **Increases transparency** by requiring insurers to publicly share on their websites which healthcare services require prior authorization and to submit an annual report to the Director of Insurance certain prior authorization statistics.

The Denali Oncology Group and ASCO also support language in this bill that would place guardrails around step therapy by requiring carriers to grant an exception to a step therapy protocol if the drug required to be used has been tried under a previous health plan and found to be ineffective.

The Denali Oncology Group and ASCO support SB 133 and encourage the Committee to pass this legislation to ensure that physicians most familiar with their patients' health care needs can provide timely care. For a more detailed understanding of our policy recommendations on this issue, we invite you to read the [ASCO Position Statement: Prior Authorization](#). Please contact Sarah Lanford at ASCO at Sarah.Lanford@asco.org if you have any questions or if we can be of assistance.

Sincerely,

Mary Klix, MD, FACP
President
Denali Oncology Group

Eric P. Winer, MD, FASCO
Chair of the Board
Association for Clinical Oncology