

**OFFICE OF THE HEALTH INSURANCE
COMMISSIONER**
Administrative Simplification Task Force

November 15, 2022



OFFICE OF THE
HEALTH INSURANCE COMMISSIONER

STATE OF RHODE ISLAND



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Draft Problem Statement Elements

- Payers view prior authorization as a utilization management tool to promote evidence-based care, reduce wasteful spending, and promote patient safety.
- Providers view prior authorization as causing increased administrative burden, increased operating costs, and potentially jeopardizing patient safety.
- Patients' experience of care can be materially and adversely impacted when the application of prior authorization creates real, or perceived, barriers and delays in accessing care.

Straw Model Proposal Overview

- To facilitate discussion among members of the task force OHIC has drafted the following straw model proposal.
- The proposal is comprised of two parts which are severable.
- OHIC invites members of the task force to propose alternatives or to suggest refined language.

Straw Model Proposal – Part A

- Remove prior authorization from all services (medical) that have an average approval rate of 95% or higher, and;
 - Average cost of \$25,000.00 or less.

Straw Model Proposal – Part A

- Would Part A of the proposal reduce the administrative burdens faced by providers while preserving latitude for payers to maintain evidence-based PA requirements?
- Would the task force like to propose changes to the parameters of Part A?
- Would the task force like to propose alternatives to Part A?

Straw Model Proposal – Part B

- Discontinue prior authorization for all in-network behavioral health services.

Straw Model Proposal – Part B

- Would Part B of the proposal reduce the administrative burdens faced by providers?
- Would the task force like to propose alternatives to Part B?

PUBLIC COMMENT