

March 20, 2025

Chair Nosse and Members of the Committee

On behalf of the Oregon Academy of Family Physicians, I am pleased to supply this testimony in support of HB 3134.

We have been impressed and grateful for the thoughtful process the Oregon Medical Association has led, including stakeholders in successive rounds of amendments and adjustments to produce a piece of legislation that includes meaningful steps to lessen the administrative burden clinicians deal with every day as they work to care for Oregonians.

For too long, meaningful reform to prior authorization systems in Oregon has been impossible, and the strain on clinicians is telling. Oregon's insurance marketplace is very crowded. One FQHC clinic in a frontier community where our members work recently reported that including primary care, behavioral health and dental health contracts, **their clinic manages 246 contracts**. Navigating different prior authorization requirements for even half of those contracts is an enormous task; those resources could be better applied to providing patient care.

The current provisions in HB 3134 provide for public reporting of prior authorization information, which will give Oregon clinicians and policymakers a better understanding of the frequency, scope and impact of prior authorization requests and the collective impact of those processes on the health care system.

The bill also aligns Oregon's statute on electronic prior authorization with CMS standards, which is another common-sense improvement. Importantly, the bill also still includes fixes for applications of prior authorization that ease the provision of needed care, even if it wasn't foreseen, during emergent or serious medical procedures.

That data will help drive further consensus-driven action to reduce how many dollars are spent on the business of billing for health care, rather than its actual delivery. There is definitely more work to be done. Primary care clinicians are too often faced with prior authorization requirements for continuation of care for chronic conditions that require continual treatment, such as COPD.

We look forward to participating in future work on this important topic, and strongly urge the committee's support of HB 3134.

Thank you for your consideration, and we stand ready to answer any questions.



Executive Director & CEO
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