The legislation also would:

• Require insurers to provide consumers with information about medication coverage and cost-sharing prior to their purchasing insurance
• Limit the type and frequency of formulary changes a health plan can make during the enrollment year
• Create a 60-day transition period for patients changing insurance plans to prevent gaps in their access to medications.

In addition, the MMA-backed legislation calls for creating a task force to monitor trends in medication coverage and formulary design. It also would mandate use of Minnesota’s existing prior authorization and formulary exception form, and require health plans to provide better information to prescribers about covered alternatives when an initial prescription is denied and make decisions about coverage faster.

The MMA launched its work on medication PA in earnest in June 2013. Member George Schoephoerster, MD, led this effort, talking with a variety of physicians and clinic administrators to gather their PA “horror stories.” The MMA tried to work with the health plans to improve the PA process but met with resistance. A task force was formed in 2014; it provided recommendations to the Board of Trustees in January. The board opted for the most aggressive stance, which is reflected in the proposed legislation.

The MMA continues to gather stories about problems with PA at www.mnmed.org/PriorAuth and has created a website to provide a quick overview of the issue and share physician and patient stories, www.fixPAnow.com. Physicians are also encouraged to use the hashtag #fixPAnow and tweet their feelings about PA.