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3 **RESOLUTION 57-09A**
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5 **Title: Prior Authorization Requirements of Insurance and**
6 **Managed Care Entities for Medications**
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8 **Introduced by: Michael L. Gambel, MD, for the International Medical**
9 **Graduates Section**
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11 **Original Author: Samasandrapalya Kiran, MD**
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13 **Referred to: Reference Committee A**
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15 **House Action: Substitute Resolution (in lieu of Resolutions 23-09A, 57-09A**
16 **and 58-09A) See Resolution 23-09A**
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19 **Whereas, it takes physician time to discuss the appropriateness of**
20 **medicines for patients' medical conditions, and**
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22 **Whereas, it can require multiple physician and physician staff telephone**
23 **calls to get approval from insurance companies and managed care entities to**
24 **prescribe medicines that are not in the formulary list, and**
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26 **Whereas, the process of prior authorization often withholds the**
27 **necessary medicines from the patient and increases the anxiety and**
28 **apprehension associated with having to wait for an approval for appropriate**
29 **medicine that may never come, and**
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31 **Whereas, this prior authorization process takes away essential time**
32 **from active patient care; therefore be it**
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34 **RESOLVED: That the Michigan Delegation to the AMA ask the AMA to**
35 **collaborate with insurance companies and third party payers to come up with**
36 **a long-term solution to the cumbersome process of prior authorizations for**
37 **medications by simplification of the process and broadening of general**
38 **guidelines for clinical practitioners in an attempt to save precious time thus**
39 **enhancing patient safety.**
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42 **WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE**