Children's MINNESOTA

The Kid Experts™

March 6, 2024
Senate Commerce and Consumer Protection Committee

Dear Chair Klein and Committee Members,

On behalf of Children's Minnesota, we are writing in support of SF205 which would prohibit insurers from requiring prior authorization for cancer treatment.

Children's Minnesota is the state's largest pediatric healthcare system with the largest pediatric cancer and blood disorders program in the upper Midwest. We care for more than 58 percent of children diagnosed with cancer or blood disorders in Minnesota and our program delivers some of the highest survival rates among leading U.S. children's hospitals treating patients with these conditions.

In 2024, our prior authorization team submitted prior authorizations (PAs) for over 12,000 visits for 6,298 individual cancer patients. In their course of treatment, one Leukemia patient can receive anywhere from 13-15 different high-cost chemotherapy/immunotherapy drugs and supportive therapy drugs. These medications are administered over multiple phases of treatment, and the phases may have to be restarted if progression or remission is not obtained. Some insurers require us to submit a PA every month for the same drugs. A new PA is required if the dose or frequency changes. If the patient has a reaction to a drug, a new PA needs to be submitted for an alternate drug. This could lead to hundreds of submissions over the course of treatment for a single patient. Our 6,298 individual patients alone could result in, on average, more than 37,000 authorizations.

Things get even more complicated for these patients when a PA is denied and needs to be appealed. In one patient's case, an initial PA request for a cancer treatment drug was denied because the drug requested was not the preferred drug by the insurer, even though it followed the recommended standard of care. The insurer instead recommend that providers try two other drugs not approved for the patient's age before using the drug they denied. Our PA team worked diligently to appeal this denial on behalf of the patient's family. In the meantime, so as to not delay cancer care, the family agreed to have the patient treated with the drug our team requested authorization for, and they were left waiting for months to know if their insurance would cover it. Just two doses of the drug cost $79,000.

Our prior authorization team and members of the care teams treating children with leukemia, lymphoma and other cancers, work tirelessly on cases like these, spending hours working on individual PA requests. After going back and forth with denials and appeals, over 95% of these requests eventually do get approved, but too often the time it takes to complete the process threatens to delay patient care leaving families to make a difficult decision to move forward with their child's cancer treatment without knowing if it will be covered by their insurance. SF205 would ensure that families supporting a child receiving cancer treatment would not have to be burdened by these processes in the future.

When a family comes to us and their child receives a cancer diagnosis, they should be able to access the best treatment available and recommended by experts in the field. I hope we can count on your support for SF205.

Sincerely,

Nathan Gossai, MD
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