



February 15, 2023

Dear Chair and Committee Members,

My name is Kemper Tell, executive director of the Kansas Association of Osteopathic Medicine (KAOM) and on behalf of KAOM, **I am submitting written testimony as a proponent of HB 2283**. KAOM is the membership organization for osteopathic physicians (DOs) practicing in the state of Kansas and our members provide care in communities across the state.

Originally, prior authorization was put in place to control spending and promote cost-saving care. Over time, we have seen the prior authorization process move from a financial controlling mechanism to a system preventing the delivery of needed care and a major cause of administrative burden on our healthcare providers and the systems they work with.

Prior authorization is not a simple call to receive approval; it takes hours, days, and sometimes longer for a healthcare provider to be able to receive the approval (or the denial) needed to treat their patients. These hours, days, and longer is time taken away from the ability to provide patient care in a state that is already dealing with a massive healthcare worker shortage.

In a 2021 survey by the American Medical Association, 88% percent of physicians responded that the administrative burden of prior authorization in is the 'high or extremely high' category. 93% report delays in the ability to provide care, spending an average of two days (13 hours) each week completing prior authorization work. In addition, two out of five (40%) physicians surveyed have staff who work exclusively on prior authorization; staff that could otherwise be assisting in providing additional patient care<sup>1</sup>. When an answer is finally received through prior authorization, there is usually little information given on why treatments are approved or denied. Finally, there is simply not enough data to show that prior authorization has help provide better care or created net economic impacts<sup>2</sup>.

Not only will HB 2283 give the much-needed breathing room for our healthcare workers to provide the care our communities require, but it also opens the door to the modernization of the prior authorization process that is desperately needed.

I welcome any comments, questions, or further dialogue with members of the committee. Please feel free to contact me at (785) 234-5563 or via email at [kemper@kansasdo.org](mailto:kemper@kansasdo.org).

Thank you,

Kemper Tell  
Executive Director

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<sup>1</sup> <https://www.ama-assn.org/system/files/prior-authorization-survey.pdf>

<sup>2</sup> <https://www.kff.org/policy-watch/examining-prior-authorization-in-health-insurance/>