Verbal Testimony of Andrew Wiens
On behalf of Kansas Employers for Affordable Healthcare
In Opposition to SB 330
Provided to the Senate Committee on Financial Institutions & Insurance
On February 4, 2026

Chair Dietrich & Members of the Senate Committee on Financial Institutions & Insurance:

Thank you for the opportunity to provide testimony today in opposition to Senate Bill 330. My name is Andrew Wiens, and I'm testifying in my role as Executive Director of Kansas Employers for Affordable Healthcare (KEAH). Briefly, KEAH advocates on behalf of employers facing rising healthcare costs by pushing back against anti-competitive legislation and government mandates that harm Kansas businesses, employees, and their families.

KEAH respectfully opposes SB 330. The reason KEAH is opposing SB 330 today is that this legislation will raise the cost of employer-sponsored health benefits.

SB 330 restricts prior authorization services by prescribing in great detail when and how they can be used. This bill impinges on contractual arrangements between payers (private and public employers and their insured employees) for healthcare services and providers, and significantly encroaches on a tool used by these payers to keep costs low: prior authorization.

What is prior authorization? Prior authorization is a requirement that a plan pre-approves a healthcare service (medical, chiropractic, dental or vision services, hospitalization, or pharmaceutical services as defined in SB 330) before a provider can provide it to the enrollee as a covered benefit. The major goals of prior authorization are to ensure appropriateness and suitability of the prescribed service for the specific patient, control costs, and mitigate the risk of fraud, waste, and abuse. We support appropriate prior authorization as a cost-controlling tool for employers.

In a study of pharmacy benefits managers' (PBMs') efforts to manage drug expenditures and utilization in Medicare Part D, the U.S. Government Accountability Office stated, "Our review of 52 peer-reviewed studies indicates that utilization management services were associated with financial savings or improved beneficiary health indicators."[1]

It is important to note that "utilization review entities" are defined in this legislation to include "an individual or entity that performs prior authorization for an employer with employees in Kansas who are covered under a health benefit plan or health insurance

[1] U.S. Government Accountability Office (GAO), "Medicare Part D: Use of PBMs and Efforts to Manage Drug Expenditures and Utilization," July 2019

policy." The requirements and mandates that follow will increase costs on Kansas employers, their employees, and their families.

SB 330 mandates the means by which electronic prior authorization transactions be conducted, giving preference to the physician's electronic health record or electronic prescribing system rather than the system used by the utilization review entity. Requiring certain systems for conducting these transactions is not a decision the legislature should make. These decisions should be made by the parties involved, not by legislative fiat.

This legislation also includes a number of time limits that utilization review entities have for conducting prior authorization reviews and for responding to appeals of prior authorization decisions. Interestingly, the bill uses "not less than" language for the deadline for providers to submit information and "not later than" for the time in which utilization review entities must respond.

SB 330 also proposes new requirements for utilization review entities to submit reports to the Commissioner of Insurance on their prior authorization practices.

Prior authorization is a tool to improve patient access to more affordable, safer healthcare services while minimizing overall medical costs. While these costs may be borne initially by insurance plans, everything rolls downhill. Employers will be forced to pay the lion's share of increased costs through more expensive plan costs. Employees and their families will also be forced to pay higher premiums, deductibles, and copays.

With this in mind, we ask that you refrain from passing SB 330. Thank you.

Andrew Wiens
Executive Director
Kansas Employers for Affordable Healthcare