

April 1, 2021

The Honorable Andy Beshear
Governor
Commonwealth of Kentucky
700 Capitol Avenue, Suite 100
Frankfort, Kentucky 40601

Re: American Medical Association support for Kentucky Senate Bill 51, “An Act relating to addiction treatment”

Dear Governor Beshear:

On behalf of the American Medical Association (AMA) and our physician and medical student members, I am writing to express the AMA’s strong support for Senate Bill (S.B.) 51, “An Act relating to addiction treatment.” The AMA has advocated throughout the nation for an end to health insurance company administrative barriers, including prior authorization, to evidence-based treatment for substance use disorders (SUD). While all states have suffered considerable loss of lives due to drug-related overdose, we are well-aware that Kentucky has been hit harder than most.

The AMA urges you to sign S.B. 51 because when implemented, it would immediately help increase access to evidence-based treatment to save lives and help end Kentucky’s drug overdose epidemic. According to the [Legal Action Center](#), only “21 states and the District of Columbia have enacted laws that limit public and/or private insurers from imposing prior authorization requirements on a [substance use disorder] service or medication.” [Research](#) in the *Journal of the American Medical Association* and other sources continue to demonstrate that policies removing prior authorization for medications to treat substance use disorders lead to “increased use of these medications and improved health care outcomes.”

Physicians in states that have removed prior authorization for medications to help treat opioid use disorder [report](#) being able to spend more time on patient care rather than paperwork. In states that have removed prior authorization for medications to help treat opioid use disorder (MOUD), there also is no indication that premiums have increased for health insurers. On the other hand, states that have removed prior authorization for MOUD have reported increases in MOUD utilization.

We note that S.B. 51 importantly removes barriers to all forms of MOUD—including those medications containing methadone, buprenorphine, naltrexone, or other medications that may be approved by the U.S. Food and Drug Administration for the treatment of alcohol use disorder or OUD. Just as no two patients are the same, it is equally true that a patient might respond better to one form of OUD over another—making it essential for all forms of MOUD to be available to the patient.

Finally, the AMA supports S.B. 51 because it smartly requires insurers to report back to the Kentucky Department of Insurance important information to measure compliance with the law. The AMA understands that there are challenges with access to addiction medicine professionals in Kentucky and many other states. Having accurate information from insurers on “the number and type of providers that

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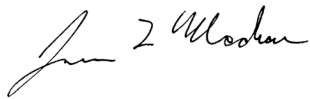
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have prescribed medication for addiction treatment to its insureds” is an excellent starting point. This information will provide the Commonwealth with baseline information to understand and address the real access issues faced by Kentucky’s patients.

The AMA urges you to sign S.B. 51 because of its combination of new policy to remove barriers to evidence-based care for patients with an SUD, and comprehensive coverage of medication with a reporting mechanism on which to effectively understand patient access issues. This is legislation that will add a critical piece to Kentucky’s efforts to save lives from the drug overdose epidemic.

If you have any questions, please contact Daniel Blaney-Koen, JD, Senior Legislative Attorney, Advocacy Resource Center, at daniel.blaney-koen@ama-assn.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Jim L. Madara". The signature is fluid and cursive, with a large initial "J" and "M".

James L. Madara, MD

cc: Kentucky Medical Association
Steven Stack, MD