

RESOLUTION

Subject: Requiring Workers Compensation Companies to Develop Processes for Electronic Prior Authorization

Submitted by: Bell County Medical Society

Referred to: Reference Committee

WHEREAS, Kentucky Workers Compensation have existed in this state for many years; and

WHEREAS, these companies have slashed workers compensation benefits to insured employees, deny coverage in many instances for needed medical care, and have shifted the cost of workplace accidents to taxpayers by directly denying care for legitimate work related claims; and

WHEREAS, many reviews as well as denials are determined by non-specialist physicians, nurse practitioners, physician assistants, and out of state physicians not licensed in Kentucky; and

WHEREAS, it is a common practice that critical care is frequently delayed by over one month for “review” by worker compensation companies; and

WHEREAS, similar problems have recently been addressed in the Kentucky Legislature in 2019 under Senate Bill 54 and signed by the Governor mandating among other requirements that “insurers develop processes for electronic prior authorizations, to establish an extended length of authorization under certain circumstances” and meet electronic prescribing prior authorization; now, therefore, be it

RESOLVED, that the Kentucky Medical Association requests the same requirements that are in place for private insurances be mandated for workers compensation companies and that prior authorization be determined on-line with preset objective criteria, and that any disputes be handled with Kentucky licensed physicians with the same specialty as the treating physician.