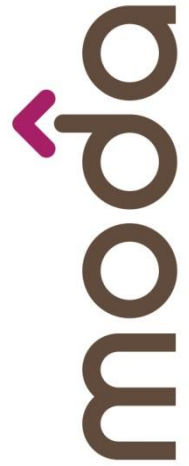


March 10, 2021

Sen. Deb Patterson, Chair  
Senate Committee on Health Care  
Oregon State Capitol  
900 Court Street, NE  
Salem, OR 97301



**RE: SB 2**

Dear Chair Patterson and Committee Members,

Thank you for the opportunity to provide comments on **SB2** which pertains to modification of the mandated coverage for proton beam therapy found at ORS 743A.130. Moda Health would like to express our opposition to this bill. Below is the major concern we have with this proposed legislation.

Moda worked closely with legislators on the enactment of the current mandate for proton beam therapy. It ensures that proton beam therapy, which is an established and effective treatment for certain types of cancer, is treated the same as other radiation therapy covered to treat cancer.

One important aspect of our coverage of radiation therapy is our medical management program. Through medical management, particularly through required prior authorization, we ensure that our members have access to effective, medically necessary treatments that we expect will provide clinical value in treating each member's health condition. While proton beam therapy is considered effective for some cancers, it has not been found effective with all cancers. Therefore, we need to maintain a mechanism to steer providers and our members to treatments that are proven effective for their cancer.

We utilize established, evidence-based medical necessity criteria to reach this goal and we apply these criteria when reviewing a service as part of a prior authorization request. If a particular procedure is not expected to benefit a member, we do not authorize it. This is a reasonable and well understood method of managing the ever-increasing cost of health care. Without a prior authorization program, we are put into the difficult position of retrospectively reviewing a claim submitted for payment and at times denying the claim for not meeting our medical necessity criteria. An after the fact denial leaves our member and the provider with an unpaid bill for a service that is not likely to provide a benefit. We would much rather steer the provider and our member toward a more effective treatment, through our prior authorization program, before an ineffective treatment is provided.

Again, thank you for the opportunity to comment and share our concerns with **SB 2**

Sincerely,

Dave Nesseler-Cass  
Chief Compliance Officer and Director, Regulatory Affairs  
Moda Health Plan, Inc.



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