



May 08, 2025

The Honorable Buffy Wicks
Chair, Assembly Appropriations Committee
1021 O Street, Suite 8220
Sacramento, CA 95814

SUBJECT: AB 510, AB 512, AB 384, AB 669, AB 371, AB 682 — SUPPORT

Dear Assemblymember Wicks:

When timely access to medically necessary care is delayed or denied, waiting patients suffer; their medical outcomes are compromised and their health care costs increase. One major cause of delays in access to care and hospital discharge is the process known as prior authorization. Clearer standards for meaningful and timely review of authorization requests, as well as increased transparency regarding service denials and appeals, are needed to ensure California's residents can receive the medical care they need.

This is why the California Hospital Association (CHA), on behalf of more than 400 hospitals and health systems, supports legislation that would improve timely access to health care, including:

- Assembly Bill (AB) 510 (Addis) and AB 512 (Harabedian), which would clarify prior authorization requirements and improve the review timelines
- AB 384 (Connolly), which would prohibit health plans from requiring prior authorization for inpatient mental health and substance use disorder treatment
- AB 669 (Haney), which would require health plans to cover medically necessary substance use disorder treatment, including prescription drugs, outpatient services, and the first 28 days of inpatient treatment — without requiring prior authorization
- AB 371 (Haney), which would implement additional network adequacy standards for health plans and insurers that cover dental services
- AB 682 (Ortega), which would require health plans to report the total number of claims processed, adjudicated, denied, or partially denied

When used correctly, prior authorization can be a valuable tool for health plans to manage utilization and support the delivery of safe and appropriate patient care. Too often, however, prior authorization becomes a barrier that leads to harmful and unnecessary interruptions in

care and increased administrative burdens. Thoughtful and comprehensive prior authorization reform is needed to ensure that California residents receive the care that they need when they need it. Moreover, streamlining the prior authorization process and requiring greater plan transparency regarding health plans' decisions about patient treatment will decrease unnecessary costs to the health care system and promote cost-effective and timely access to medically necessary care.

Together, these bills would make important changes that would improve the prior authorization process, improve health plan and insurer accountability and transparency, and remove barriers that cause harmful and unnecessary interruptions in care.

For these reasons, **CHA requests your "YES" vote on AB 510, AB 512, AB 384, AB 669, AB 371 and AB 682.**

Sincerely,



Kalyn Dean
Vice President, State Advocacy

cc: The Honorable Dawn Addis
The Honorable John Harabedian
The Honorable Damon Connolly
The Honorable Matt Haney
The Honorable Liz Ortega
Members of the Assembly Appropriations Committee
Allegra Kim, Principal Consultant, Assembly Appropriations Committee
Joe Shinstock, Fiscal Director, Assembly Republican Caucus
Justin Boman, Health Consultant, Assembly Republican Caucus