

2018 ANNUAL REPORT



AIMED
ALLIANCE

Key Staff



Dr. Shannon Ginnan

As Director of Medical Affairs for Aimed Alliance, Dr. Shannon Ginnan provides the organization and its partners valuable insight from a practitioner's perspective and serves as a liaison to the medical and health care technology communities.



Stacey L. Worthy, Esq.

Stacey L. Worthy, Esq. serves as counsel to Aimed Alliance. She provides unique legal insight through research and analysis of laws, regulations, and legislation; provides counsel in support of advocacy initiatives; offers policy analysis and drafting; and supports allied organizations focused on advancing common goals. Ms. Worthy is a partner in a Washington, DC-based health law and policy firm.



John A. Wylam, Esq.

As staff attorney for Aimed Alliance, John Wylam conducts legal research and analysis, provides strategic recommendations, and drafts issue briefs, op-eds, press releases, and newsletters. Mr. Wylam also creates content for the Aimed Alliance website and assists the organization in developing policy positions and public statements on emerging issues.

Aimed Alliance's key staff is supported by a team of attorneys, policy advisors, communications advisors, administrative personnel, and other consultants.

Mission

Aimed Alliance is a 501(c)(3) not-for-profit health policy organization. Our mission is to protect and enhance the rights of health care consumers and providers.

Vision

The vision of Aimed Alliance is a society in which consumers, in consultation with their health care providers and loved ones, can make informed and individually appropriate decisions about their health care, and those decisions are not overridden by third parties.

Beliefs

We believe that Americans should value their health care and prioritize it as consumers. We believe that health care industry stake holders should place the health and safety of patients above all other considerations. We believe that the costs of health care services should be reasonable and transparent.

Aimed Alliance seeks to achieve its mission through research and analysis, thought leadership, and organizational collaboration.

Research and Analysis

Aimed Alliance conducts research and provides analysis on its policy priorities, including improving patient access to treatment, preserving the practitioner-patient relationship, and assessing the drivers of health care costs. Its findings culminate in reports, fact sheets, brochures, legislative maps, and comments. Its research and analysis in 2018 included the following:

Reports

Common-Sense Steps to Reduce the Cost of Health Care in the U.S. Part I: Federal Government

On May 10, 2018, Aimed Alliance published the first installment in a three-part series that analyzes the factors that contribute to rising health care costs and presented recommendations for how the federal government can address the issue.



Common-Sense Steps to Reduce the Cost of Health Care in the U.S.: Part II

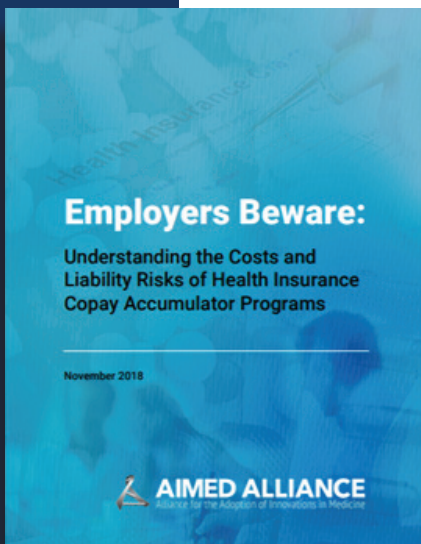
On December 3, 2018, Aimed Alliance published the second installment in this three-part series. This report focuses on steps that members of the health care industry can take to reduce the cost of health care in the U.S.





Putting Profits Before Patients: Provider Perspectives on Health Insurance Barriers that Harm Patients

On Oct. 29, 2018, Aimed Alliance published the findings from a national survey of primary care physicians. This report draws attention to challenges that primary care providers face due to administrative burdens that health insurers place on them as well as how these burdens contribute to their overall job dissatisfaction.

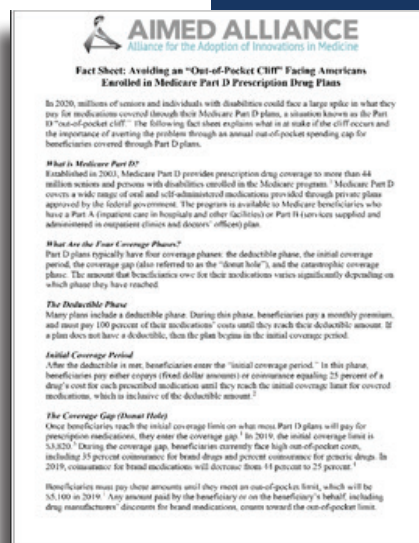


Employers Beware: Understanding the Costs and Liability Risks of Health Insurance Copay Accumulator Programs

On November 15, 2018, Aimed Alliance published a report that explores the legal status of copay accumulator programs, educates employers about the legal risks that copay accumulators can present, and provides recommendations for employers who are considering implementing a copay accumulator policy.

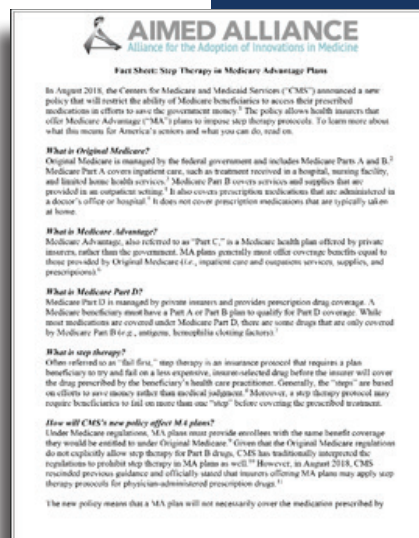
Medicare Part D “Out-of-Pocket Cliff” Fact Sheet

In December 2018, Aimerd Alliance published a fact sheet to educate consumers about the upcoming out-of-pocket cliff for Medicare Part D that will become effective in 2020 unless Congress takes action to remedy the situation. If the out-of-pocket cliff occurs, some Medicare beneficiaries can expect to be burdened with substantial out-of-pocket costs for medications that are covered by Part D.



Step Therapy in Medicare Advantage Plans Fact Sheet

On October 5, 2018, Aimerd Alliance published a fact sheet to inform consumers about a new policy enacted by the Centers for Medicare & Medicaid Services that allows Medicare Advantage plans to utilize step therapy restrictions. The fact sheet describes what step therapy is and how it could delay access to prescribed medications.



Brochures



Know Your Rights: A Resource for People with Cancer and Their Loved Ones

On August 21, 2018, Aimed Alliance published a Know Your Rights brochure tailored for individuals with cancer. This brochure defines common utilization management strategies that payers often use to restrict access to treatment. The brochure also educates patients about how to appeal an adverse coverage determination.



Open Enrollment: Understanding Your Health Plan and Your Cost-Sharing Responsibilities

On November 1, 2018, Aimed Alliance published a brochure designed to assist insured consumers during open enrollment. This brochure provides information about common plan features to ensure that consumers fully understand the benefits they are purchasing when they enroll in a health plan.

Health Care Providers: Know Your Patients' Rights

In October 2018, Aired Alliance published a brochure for health care providers that highlights the findings of *Putting Profits Before Patients: Provider Perspectives on Health Insurance Barriers that Harm Patients*, which revealed how 85 percent of surveyed providers believe that insurers compromise the health of their patients.

HEALTH CARE PROVIDERS: KNOW YOUR PATIENTS' RIGHTS YOU PLAY AN IMPORTANT ROLE IN HELPING PATIENTS GET TIMELY ACCESS TO TESTS AND TREATMENTS

WHAT YOU NEED TO KNOW

Health insurance practices to control costs often delay or deny patient care, increase administrative expenses, and hold up payments to providers.

3 COMMON INSURANCE ROADBLOCKS

- Nonmedical Switching** - Insurers force providers to take a different drug, often by changing the formulary or increasing patient costs.
- Prior Authorization** - The patient or provider must get approval before the plan will pay for the test or treatment.
- Step Therapy** - Patients must try and "fail" on one insurance treatment before the plan will cover the one prescribed.

CONSEQUENCES FOR PATIENTS

- Prolonged pain and disability
- Worsening of a chronic condition
- Hospitalizations and readmissions
- Less trust in provider's decisions

IMPACTS ON PROVIDERS

2018 SURVEY OF PRIMARY CARE PHYSICIANS¹

- 85% Say insurers compromise patients' health
- 71% Need more staff to handle insurance matters
- 75% Report that insurers do not honor their commitments to pay for treatment
- 86% Say they face legal risks from monetary decisions

LAWS THAT PROTECT PROVIDERS

- Prompt Payment Laws** - States that require insurers to pay providers' claims within a certain period. Insurers that do not comply face penalties.
- Contract Law** - Insurers must follow the terms of managed care contracts, including paying claims, or risk breaching the contract.
- Breach of Duty of Good Faith and Fair Dealing** - An insurer that denies a provider's claim without the benefit of an agreement may be in breach of the contract and the duty of good faith and fair dealing.
- Intentional Interference with the Provider-Patient Relationship** - A provider can make a successful intentional interference claim by showing that the insurer purposely interfered in the provider-patient relationship and harmed the provider.

Conducted by David Dwyer Research, the survey polled 800 primary care physicians in the U.S. between February 2018 and March 5, 2018. Visit aimedalliance.org/healthcareproviders for more findings.

AIMED ALLIANCE

Health Insurance Matters Glossary of Terms

In June 2018, Aired Alliance published a Health Insurance Glossary of Terms, which defines terms that are commonly used in health insurance coverage documents. This easy-to-use resource is intended to improve health literacy, so that patients can select the health plan that will work best for them.

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Health Insurance Matters Glossary of Terms

Below is a glossary of commonly used terms related to health plans, coverage, and access to care.¹

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Access - The ability of an individual or a patient population to obtain or receive health care.

Adverse Tiering - The practice in which a health plan places most, if not all, medications that treat a particular condition or disease on the highest pharmacy tier of a plan's formulary. As a result, plan enrollees who have the condition must pay high out-of-pocket costs for their medications.


Affordable Care Act (ACA) - The abbreviated name for the Patient Protection and Affordable Care Act, often referred to as Obamacare, which was passed in March 2010. Among its provisions, the ACA eliminates practices that deny coverage or result in discrimination due to pre-existing conditions; caps annual out-of-pocket costs; and requires that individual and small group health plans cover 10 essential health benefits, including hospitalizations, ambulatory services, maternity and newborn care, and prescription drug coverage.

Allowed Amount - The highest amount a health plan will pay for a covered health care service. Also referred to as a "benefit maximum."

Ambulatory Care - Health services provided on an outpatient basis in contrast to services provided in the home, hospital, or long-term care facility.

Appeal - A request for a health insurance company to review and reconsider a decision to deny a benefit or payment. If a health plan refuses to pay a claim or continue plan coverage, individuals may have the right to appeal the decision, and have the decision reviewed by a third party if the appeal is denied.

¹ Many of the definitions herein are based on the Glossary from HealthCare.gov.



Advocacy Activity

Aimed Alliance supports laws, regulations, and policies that encourage or require public and private health insurers to make treatments and services accessible, culturally competent, efficient, and transparent. Aimed Alliance also takes action to curtail the use of discriminatory practices in the delivery of health care and the administration of health insurance and employee benefits. For example, throughout the year, Aimed Alliance sent letters to several health plans to request that they halt certain nonmedical switching practices that are unfair, deceptive, and harmful to patients.

Maps

Aimed Alliance also actively maintained pages on the Aimed Alliance website that provide up-to-date information for the public regarding step therapy, prior authorization, and non-medical switching laws and legislation.

Know Your Rights

Aimed Alliance maintains its Know Your Rights Initiative at www.coveragerights.org. This initiative includes state-by-state instructions for consumers on how to appeal adverse benefits determinations if their treatment or services have been denied.

COVERAGE RIGHTS

[Home](#) [Insurance Barriers](#) [Find Your State](#) [About Us](#) [Brochures](#) | [Q](#)

KNOW YOUR RIGHTS

Has your health insurer denied your care or placed unreasonable restrictions on your ability to access health care treatments and services?

Health insurance companies use various approaches to cut costs. Examples of these include copay accumulators, nonmedical switching, step therapy, and prior authorization.

As a result of these tactics, your insurer may not cover certain treatments prescribed to you or may require you to take a number of steps before your treatment is approved. While your experience with your health insurer may be frustrating and demoralizing, we are here to help.

Thought Leadership

Using its research and analysis, Aimed Alliance develops sound, patient-centered policy recommendations. Representatives for the organization disseminate messages by presenting to audiences of patients, advocates, practitioners, associations, employers, human resources professional industry members, and policymakers; and engaging with the media. In 2018, thought leadership activities included the following:

Meetings

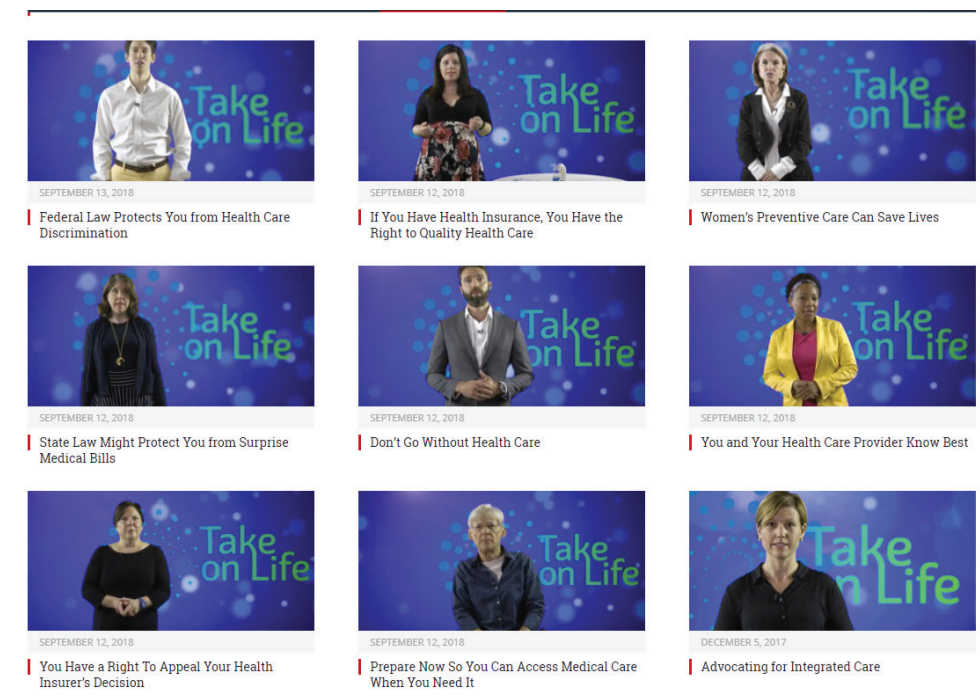
Doctors in Distress: Avoiding Health Care Provider Shortages

Aimed Alliance hosted a panel presentation at the National Foundation for Women Legislators conference in November 2018. This panel presented our findings from the national survey of primary care physicians and explained to approximately 80 women state legislators about how interference from insurers contributes to lower job satisfaction among primary care physicians. The panelists emphasized how administrative burdens imposed on health care providers by insurers have accelerated the national shortage of primary care providers.



PSA Series

To inform consumers about the importance of health coverage and to assist them with enrollment, Aimerd Alliance produced and released the “Take on Life” public service announcement videos. This series features an assortment of short videos that consumers can watch on YouTube and the Aimerd Alliance website to improve their health literacy.



Speaking Engagements

Aimerd Alliance staff regularly speaks at conferences and other similar events. Below is a partial list of our speaking engagements from 2018.

- 2018 National Summit on Balanced Pain Management, Washington, DC
- BIO's Policymaker Roundtable on Biotechnology, Philadelphia, PA
- Healthy Women "Preserving Health Coverage and Access to Care for Women and Families" Hill Briefing, Washington, DC
- Lung Cancer Alliance's 4th Annual Collaborating for Improved Screening and Care Conference, Washington, DC
- Research!America "The Research on Workplace Accommodations for Migraine Sufferers" Hill Briefing, Washington, DC


Op-Eds and News Articles

Aimed Alliance authored several op-eds that were published by regional and national news outlets. Additionally, Aimed Alliance staff members have been quoted in news articles, discussing issues relevant to patients and providers. Below is a summary of Aimed Alliance's media placements over the course of 2018.


 **CBS NEWS** "Anthem Among Health Insurers Refusing to Pay ER Bills, Doctors Say," **CBS News** (quoted)

"Did Your Prescription Drug Change? This May Be Why," **CBS News** (quoted)


"Health Insurer Denials May Be Making Americans Sicker," **CBS News** (quoted)

 **MORNING CONSULT** "Congress: Put Professionals Back in Charge of Treatment Decisions," **The Morning Consult** (op-ed)

"Administration's Proposed ACA Rules Create Legal Loopholes for Discrimination," **Morning Consult** (op-ed)

 **benefitsPRO** "Copay Accumulator Programs: Are the Risks Worth the Savings?," **BenefitsPro** (quoted)

 **The Columbus Dispatch** "Column: Practice of 'Switching' Medication Can Be Unhealthy," **The Columbus Dispatch** (op-ed)

 **FierceHealthcare** "Who's Calling the Shots? Doctors Worry About Insurers Overriding Their Treatment Decisions," **Fierce Healthcare** (quoted)



"Priority Health, BCBS, Others Receive Failing Grades," **GRBJ.com** (referenced)



"Insurers Have a New Strategy to Short-Change Patients," **RealClear Health** (op-ed)

"Another Sneaky PBM Practice Needs to End," **RealClearHealth** (op-ed)



"Copay Accumulator Plans Put Employers in Legal Jeopardy," **Law360** (op-ed)



"Formulary Exclusion Lists Make It Harder for Patients to Get Prescriptions," **Cleveland.com** (quoted)



"Doctor-Patient Rights Project Reignites Issuer, Drug Maker Feud," **InsideHealthPolicy** (quoted)



"Doctors, Not Insurance Companies, Should Make Medical Decisions," **Newsweek** (op-ed)



"A Drug Program that Keeps Patients Safe (And Profits, Too)," **Bloomberg** (quoted)



"States Have Figured Out Drug and Copay Reforms – Senate, Follow Their Lead on AHCA," **The Hill** (op-ed)

Organizational Collaboration

Aimed Alliance partners with like-minded organizations whose missions align with our efforts. Aimed Alliance conducts this organization collaboration by participating in coalitions and sharing ideas at meetings and conferences. In 2018, organizational collaboration activities included:

Spotlight Meetings

In an ongoing endeavor to inform patients about barriers to care and how to overcome them, Aimed Alliance convened patient advocacy organizations to address access issues that pertain to specific disease states, including cancer, migraine, and autoimmune conditions. This effort included in-person meetings in Scottsdale, Arizona; San Francisco, California; Boston, Massachusetts; and Washington, D.C.






Q&A Series

Throughout the year, Aimed Alliance joined Patient Power via videoconference to answer coverage-related questions submitted by individuals with cancer. The in-depth discussions of health policy topics included barriers that patients may face when they attempt to get treatments and services covered, as well as how to appeal coverage denials. Aimed Alliance and Patient Power co-produced an episode dedicated specifically to informing patients about copay accumulator programs.

Looking Ahead

Aimed Alliance experienced great success in 2018 while working to protect and enhance the rights of health care consumers and providers. To build upon our progress, we have begun to take on new issues in 2019, including cannabidiol regulation, discrimination against providers, discrimination in the workplace, health data privacy, and surprise medical bills.

To stay abreast of our health policy activities, sign up for our monthly newsletter at aimedalliance.org/newsletters, and follow us on social media:

-  @AimedAlliance
-  facebook.com/aimedalliance
-  linkedin.com/company/aimedalliance



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