

May 10, 2021

Tina Pickett Chair, Insurance Committee Pennsylvania House of Representatives tpickett@pahousegop.com

Anthony DeLuca Democratic Chair, Insurance Committee Pennsylvania House of Representatives repdeluca@pahouse.net

Bud Cook Secretary, Insurance Committee Pennsylvania House of Representatives <u>bcook@pahousegop.com</u>

Steven Mentzer Vice Chair, Insurance Committee Pennsylvania House of Representatives <u>smentzer@pahousegop.com</u>

Re: Letter in Support of PA HB 225 and SB 225

John DiSanto Chair, Banking & Ins. Committee Pennsylvania State Senate jdisanto@pasen.gov

Sharif Street Minority Chair, Banking & Ins. Committee Pennsylvania State Senate <u>sstreet@pasen.gov</u>

Daniel Laughlin Vice Chair, Banking & Ins. Committee Pennsylvania State Senate <u>Dlaughlin@pasen.gov</u>

Jake Corman Ex-Officio, Banking & Ins. Committee Pennsylvania State Senate jcorman@pasen.gov

Dear Reps. Pickett, DeLuca, Cook, and Mentzer and Sens. DiSanto, Street, Laughlin, and Corman:

Aimed Alliance is a 501(c)(3) non-profit health policy organization that seeks to protect and enhance the rights of health care consumers and providers. We are writing in support of HB 225 and SB 225, which seek to establish important patient protections regarding step therapy protocols and preauthorization. We ask that you support the bills in committee and approve the bills for a full vote before the legislature.

Health plans' step therapy policies require insured individuals to try and fail on alternative treatments specified by a health plan, sometimes with harmful side effects, before the health plan will cover the prescribed treatment.¹ Health plans often justify step therapy as a cost containment technique. When step therapy is used appropriately, it can steer patients towards less risky and lower cost treatments as first-line treatment options.² However, some step therapy policies are inconsistent with sound scientific and clinical evidence. First-line treatment options may be older and less effective drugs. Moreover, a plan may require an individual to try and fail on the same drug more than once or on several drugs before accessing the prescribed medication. These requirements can significantly delay access to the practitioner-prescribed treatment.

¹ <u>https://www.goodrx.com/blog/what-is-step-therapy-how-to-get-insurance-to-pay-for-your-non-preferred-drug/</u> ² <u>https://www.goodrx.com/blog/what-is-step-therapy-how-to-get-insurance-to-pay-for-your-non-preferred-drug/</u>

Health plans' preauthorization policies require insured individuals to request the health plans' permission before the insured can obtain a medical service or treatment prescribed to them. Like step therapy, preauthorization requirements can be inconsistent with medical standards of care and can result in delays or complete barriers to necessary treatment. Health plans may also require outdated forms of communication when submitting necessary paperwork, including fax and mail. Yet, these forms of communication cause additional delays.

As a result of step therapy and preauthorization policies, patients can experience harmful side effects, interruption patient stability, and disease progression or relapse. Such results can increase health care utilization and costs, thereby undoing any modest cost-savings realized by step therapy or preauthorization requirements.³

HB 225 and SB 225 seek to resolve these issues. For example, the bills prohibit health plans from imposing preauthorization requirements on treatment in a manner that would disrupt a stable patient's continuity of care. Additionally, step therapy protocols must be developed based on clinical practice guidelines, developed by independent experts, and rooted in high-quality studies, research, and medical practice, among other criteria. Furthermore, the bills seek to establish clear step therapy exception processes that defer to the prescribing professional's expertise and knowledge of the patient, ensuring patients receive treatment based on their unique circumstances. These bills also seek to reduce unnecessary delays in patient care by requiring that health plans accept preauthorization paperwork electronically. We are also pleased to see that the bills contain provisions requiring health plans to report certain data on their use of step therapy to the Insurance Department, which encourages compliance with the law. These added protections will be crucial in ensuring the professional-patient relationship is respected and in preventing delays in individualized treatment.

In sum, we urge you to support HB 225 and SB 225 in committee and before the full legislature. Thank you for your efforts to improve the health care system and to protect patients from the potential harms of step therapy and preauthorization requirements.

Sincerely,

Stacey L. Worthy Counsel

³ <u>https://www.statnews.com/2016/08/22/step-therapy-patients-insurance-treatments/</u>