



NEWS RELEASE

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Physician Surveys Find Health Insurer Step Therapy Protocols Harm Patient Care; Organizations Urge Lawmakers to Establish a Fair and Expedited Override Process

Albany, N.Y. – Today the Medical Society of the State of New York (MSSNY) and the New York State Academy of Family Physicians (NYSAFP) announced the findings of recently conducted surveys on health insurer step therapy protocols for prescription medications. Responses were received from over 400 physicians practicing throughout New York and across many physician specialty areas.

Each organization issued its own survey to members yet the physician responses were remarkably consistent. The surveys found that existing insurer step therapy protocols delay and adversely affect patient care, are challenging and time consuming and limit clinical judgment in determining what medication will be most effective for patients. 90% of physicians indicated that step therapy protocols at least “sometimes” adversely affected their patients and 46% indicated that it “frequently” adversely affected patients. The surveys also found that 94% of respondents support the concept of requiring insurers to provide an expedited process to exempt patients from step therapy protocols when the drug they prescribed is medically necessary.

“Imposition of step therapy protocols, also known as ‘fail first’, are one way among many that insurance companies are limiting needed patient care and treatments to enhance their bottom line” stated Dr. Andrew Kleinman, MD, President of MSSNY. “We have heard from many physicians regarding the difficulties they face from insurers when they and their staff seek to assure their patients have coverage for the prescription medications they need. The surveys further demonstrate the frequency by which insurer rules that require patients to ‘fail first’ on certain medications can have serious consequences for their health. We need legislation or regulatory action to assure our patients can get the medications they need without having to needlessly wait weeks or months to comply with insurance company protocol.”

Step therapy is a utilization management tool that health insurers commonly use to control spending on prescription drugs. It functions as a coverage restriction placed on prescription drugs by health plans. These policies require that before the insurer will cover drugs initially prescribed by a physician, the patient must first try other (sometime multiple), generally less expensive drugs to treat the patient’s condition to see if they will be effective.

“The survey findings are very disturbing. Patients are being forced to fail multiple times, sometimes for months at a time on ineffective medications before health insurers will cover the right medication to treat conditions,” stated NYSAFP President, Raymond Ebarb, MD. “Our members view it as central to our role as family physicians to be advocates for our patients. Time is often of the essence for our patients with serious and debilitating illnesses. We need a clear, fair process that puts medical decision making back in the hands of physicians so patients get the medications that most effectively address their needs.”

As supported by the MSSNY and NYSAFP surveys, step therapy restrictions are imposed by most health insurers in the State and are applied to prescription drugs treating a wide range of diseases and conditions including autoimmune diseases, cancer, diabetes, HIV/AIDS, mental health, treatment of pain and many others. Included in the list of drugs identified by physicians as being subject to step therapy even included medications such as suboxone which is used to treat opioid addiction- a major focus in New York this year. Patients need access to these medications without hurdles or delays.

Legislation has been introduced in New York to address this serious and widespread issue. The bill (S.2711-A/ A.5214-A) is sponsored by Senator Catharine Young (R-Olean) and Assemblyman Matthew Titone (D-Staten Island) and would establish two simple patient protections:

- A clear and abbreviated process that prescribers may use to override a step therapy protocol in cases where evidence demonstrates that it is medically necessary; and
- A limit on the amount of time a patient can be required to try different medications.

This legislation applies to commercial plans regulated by the State and is supported by MSSNY, NYSAFP and a coalition of patient advocacy organizations, other health providers including Roswell Park Cancer Institute and others. It is currently under review in the Insurance Committee in each house.

Key Findings of the MSSNY & NYSAFP Surveys:

- MSSNY: Over 64% of physicians said only some health insurers permit them to attempt to override a step therapy protocol and 30% said none of the insurers they work with allow them to do so;
- MSSNY: Over 93% of physicians said it was “challenging” or “extremely difficult” to override health insurers’ step therapy protocols to assure their patients get the medications they need;
- NYSAFP: Over 98% of physicians said the process to exempt patients from step therapy requirements was “challenging” or “extremely challenging;”
- MSSNY: Over 50% of physicians said it can take a minimum of 2 days to more than one week to override an insurers’ step therapy protocol;
- NYSAFP: Over 56% of physicians said the process to exempt patients from step therapy protocols can take a minimum of 1-2 weeks or longer;
- MSSNY: 65.5% of physicians said that they had to repeat a step therapy protocol for the same patient;
- NYSAFP: When asked how step therapy policies affect patients, more than 95% of physicians said they delay access to appropriate therapies, 64% said they decrease medication adherence, and nearly 61% said they increase non-medication costs; and
- COMMENTS PROVIDED IN MSSNY SURVEY:
 - Drugs that insurers require patients to fail first on were often not in the same class as the drug initially prescribed and there are potentially adverse drug to drug interactions;
 - Step therapy restrictions are now the most time consuming issue in his/ her practice;
 - A recent example was provided of a patient who ended up in the emergency department with a seizure after the insurer did not approve Lamictal;
 - Step therapy requirements cause physical and emotional harm to patients before forced to trial cheap ineffective drugs;
 - One insurer requires patients to try four atypical antipsychotics for three months before the newer brand name drug will be covered;
 - Patients often have to wait several weeks to receive anti-cancer drugs, during which the cancer progresses and they deteriorate;
 - A physician noted that he/ she has been forced to use a medications that he/she knew would be harmful in order to get the one he/she wished to prescribed for children; and
 - A physician said that every year the insurer’s step therapy policy starts over so he/she has had to take patients off medications they have been stable on, calling this a dangerous policy.