

LET MY DOCTORS DECIDE PRINCIPLES

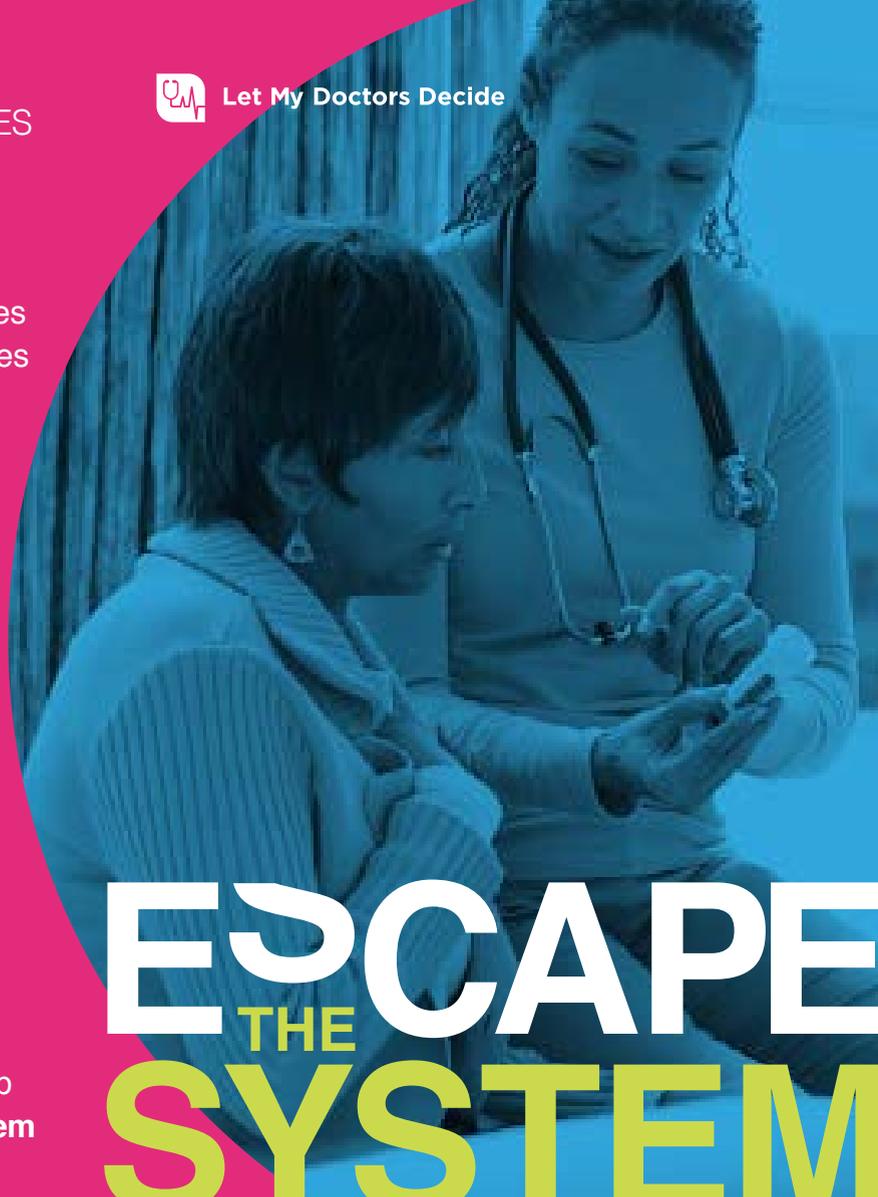
- Patients and physicians should make individual treatment choices
- You cannot treat all autoimmune diseases the same because responses to therapies vary widely from patient to patient
- Patients should have access to easily understood information about their coverage: what is covered, how much it will cost them personally and how to get coverage approved for the treatment they need
- Patients should have affordable access to discounts, rebates, and other savings on innovative therapies at the pharmacy counter

TAKE ACTION

Sign a petition to stop the madness of step therapy: www.LMDD.org/escape-the-system



Let My Doctors Decide



ESCAPE THE SYSTEM

Stop the Madness of Step Therapy

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Why we
need to
act now

“ Step therapy is a series of obstacles developed by insurance companies to slow the appropriate treatment of our patients. ”

—Dr. Michael Schweitz

Stop the Madness of Step Therapy

WHAT IS STEP THERAPY?

The term “step therapy” is a misnomer because there’s nothing therapeutic about it. In fact, insurers and PBMs use step therapy to require patients to “fail first” on alternative therapies preferred by the insurer before covering the doctor-prescribed medicine.

There are a variety of reasons insurers and PBMs deny patients access, but the end results are always the same: Doctors are undermined. Patients’ health is put at risk. And step therapy continues to cause significant financial waste in our healthcare system.

WHY WE MUST STOP THE MADNESS

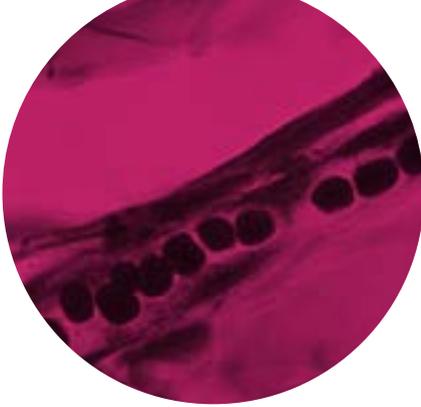
Without exception, doctors should make medical care decisions in tandem with their patients. Any system that forces patients — especially those with autoimmune disease and other chronic conditions — to go without doctor-prescribed treatments is an unethical one.

Read the stories of patients and doctors to learn why we must stop the madness of step therapy.

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01



LEE-ANNA

By the time she was 29, Lee-Anna already had achieved her goal of becoming a Family Nurse Practitioner-BC and a registered nurse. She was also the same age when diagnosed with Behcet's disease, a rare autoimmune condition that causes inflammation in the blood vessels throughout the body. It was at that point Lee-Anna experienced step therapy for the first time as a patient.

Having worked in the healthcare field, Lee-Anna had seen first-hand when patients were denied their prescribed treatments. But that could not prepare her

““ At 36 years old, I was forced with the heartache of planning my own funeral. ””

for what came next. “My symptoms got worse with each failed treatment,” she remembered. “The side effects were unbearable. This went on for months. Months turned into years, as I became sicker, weaker, and unable to function normally. I thought I was going to die.”

After a long period filled with chronic pain – and the eventual end of her dream career – Lee-Anna finally failed her insurer's final preferred prescription and was able to switch to the one her physician had chosen years before. Now she works to make sure others do not have to face the same step therapy nightmare.

02



DR. DELFIN SANTOS

As a long-tenured physician, Dr. Santos has experienced step therapy perils from both caregiving and administrative angles. Two staff members in his office spend an average of 4-5 hours each day on the phone trying to obtain authorizations for his patients. But he's most concerned with how step therapy affects his patients' health.

“I have a patient who is suffering from rheumatoid arthritis (RA),” he said. “Her sister has multiple sclerosis. Because of my patient's family history,

““ All of the hoops we have to jump through just to get our patients the right medicines take time away from treating our patients. ””

I avoid putting her on a certain RA medication because I know that the drug can trigger MS in rheumatoid arthritis patients. But that RA medication is the first ‘step’ her insurance company requires her to try. I don't want my patient to develop another harmful condition just because the insurance company is trying to save money.”

Despite the frustrations he faces every day, Dr. Santos encourages patients — as well his fellow healthcare providers — to keep fighting against step therapy. He knows it is the only hope doctors and patients have of ensuring the best outcomes.

03

HEATHER



Being diagnosed with multiple sclerosis scared Heather. She had no idea, however, that she had to fear being able to access the treatment her doctor recommended. Instead of the oral treatment her doctor prescribed, Heather's insurer required her to go through step therapy and use an injectable therapy first.

"The six weeks of trying the first injectable treatment destroyed my body," she would later report. "I didn't respond well to the drug. I talked to my doctor every

“ I finally got a new prescription for the oral medicine my doctor originally prescribed, but I still had to jump through more hoops with my insurance company. ”

week and he eventually put me on a steroid, believing that my reaction to the drug was a flare-up. Those six weeks using a drug that my doctor never prescribed made my health decline tremendously.”

Eventually Heather was able to access the oral treatment, but her insurer required that she take unnecessary blood tests and imaging scans as evidence of her condition. She and her doctor both spent hours on the phone with the company to secure the necessary approvals. In total, Heather missed six months of work as a result of all the step therapy hoops.

04

SANDY



Sandy's doctors were unable to diagnose her Behcet's disease until she had experienced symptoms for more than three decades. And even then she had to wait for her prescribed treatments. As someone who also suffers from rheumatoid arthritis, fibromyalgia, vasculitis and Raynaud's disease, Sandy knew she should have access to uninterrupted care.

"When I use biologics to treat my disease, after a while my body adjusts to them and I must find a new drug that will work," she said. "But because Behcet's

“ Each time I go through this process of trying to access RA and vasculitis medications, it takes months before I can get back to managing my health. ”

is a rare autoimmune disease, and these biologics are not specifically labeled for Behcet's, my insurance company mandates that I must go through step therapy first. Each new drug has the same process and the same fight of trying to get access to the medications I need.”

Sandy's life gets put "on pause" whenever her Behcet's goes untreated, which is unfortunately common. While she is currently experiencing success using a therapy that is part of a study, Sandy worries about what will happen when the study ends and she is forced to go back through step therapy again.

05

SANDRA



Late in 2016, Sandra began experiencing extreme chronic fatigue that left with her with little energy to do anything but rest. After visiting several physicians, she finally got her diagnosis: sarcoidosis, an inflammatory disease that affects multiple organs (primarily the lungs and lymph glands). But she received even worse news later – she would have to go through step therapy.

However, Sandra didn't find out she was going through step therapy for nearly 18 months. In that

“ Perhaps the most difficult part was losing the ability to play with my grandchildren. I couldn't pick them up and hug them anymore. ”

time, she experienced intense pain while failing an alternate therapy. “I was livid when I found out there was a better drug I could have been on this whole time that would have treated my sarcoidosis more effectively and without all the negative side effects of prednisone,” she would later say.

While Sandra is now on a therapy that is working for her, she remains concerned that she won't be able to access more advanced treatments as they come to market.

Stop the Madness of Step Therapy

STATS/FACTS

Step therapy hurts patients, doctors, and the bottom line.

More than half of all patients reported having to try two or more different drugs before getting the one their doctor had originally prescribed.¹

86% of employer-based health plans use step therapy.²

87% of healthcare providers surveyed believe step therapy prevents autoimmune patients from receiving the treatments that could help them the most. Only 10% of insurers and PBMs surveyed agree.³

On average, medical practices spend 853 hours – or 35.5 days – each year on prior-authorization tasks.⁴

98% of consumers polled believe that doctors, not insurance companies, should have the final say in treating patients with autoimmune diseases.⁵

35% of patients surveyed experiencing step therapy believe it had a very/extremely negative impact on their quality of life.⁶

When patients fail to take their medicine because of step therapy, healthcare costs increase. The economic burden of psoriasis, for example, reached an estimated \$112 billion in 2013 in the US, including direct costs and lost productivity.^{7,8}

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