



The Harmful Impact of Access Restrictions

There are a number of business tactics used by health insurance companies and Pharmacy Benefit Managers (PBMs) that restrict access for patients to their doctor-prescribed medications. While insurers are familiar to all of us, patients are starting to learn more about PBMs, companies that develop drug formularies and manage prescription drug coverage for insurers and employers.

The business tactics in question can limit access to timely, life-saving medications. One such tactic used is step therapy, a practice used by health insurers that require patients to try one or more medications specified by the insurance company, not the doctor, to treat a medical condition. These tactics are profitable from a health insurer's perspective, but they put the patient's health at risk and undermine the doctor's expertise. For example, patients that undergo step therapy are required to try several drugs before an insurer will cover the medicine originally prescribed by their doctors.

Another business tactic is the use of rebate walls, where the drug with the most profitable rebate return (which is negotiated by an insurer or PBM) is the drug the patient is required to try first, even if it's not the one recommended by their doctor. In a survey of 2,600 people living with IBD, 40% reported having to meet step therapy requirements. Of those, 58% of patients were required to try and fail on two or more drugs before having access to the drug originally prescribed!

Patients should get the medicines based on clinical knowledge and the patient's treatment goals. Period. Let My Doctors Decide is a national partnership of leaders across health care working in support of a simple goal: treatment decisions should always be made by patients and trusted health care professionals, not insurance companies or PBMs.



JAIME'S STORY

At age 31, Jaime couldn't walk without intense pain. Her joints swelled, her nerve endings were on fire, and her digestive issues were unbearable. After being misdiagnosed for nearly a decade, Jaime was diagnosed with Crohn's disease. A few years later, her symptoms were no longer manageable. So, she consulted with a doctor who created a treatment plan. Unfortunately, her insurance provider had other plans.

Often times, doctors prescribe a particular medicine based on their expertise and knowledge of their patients to ensure the best outcome. Unfortunately, Jaime and her doctor were told by her insurance company — repeatedly — that she needed to try other, less expensive treatments, first. Though the insurer-preferred medications would not work as well if at all, her insurer required Jaime to document those failures before the insurer would cover the medications originally prescribed by her doctor. Jaime experienced extensive side effects that created more medical complications making healing more complex.

Jaime's health suffered from this harmful insurance practice known as step therapy. Jaime suffered needlessly trying and failing on different medications for an entire year, before insurance approved the originally prescribed treatment.

The harm she suffered due to step therapy became Jaime's catalyst to become an advocate, reclaim her health and life, and to help others. Jaime educated herself on the intricacies of inflammatory diseases, treatments, and insurance practices. Raising awareness about IBD and step therapy's harmful impact motivates her each and every day.

Statistics

45% of providers surveyed reported that a patient's care frequently had been compromised due to the time it took to receive prior authorization.²

In a survey of IBD patients, 59% of those that said they had been subjected to step therapy were delayed over 3 months from their optimal treatment plan. 32% were delayed by more than seven months.¹

Research that examined how much insurers and PBMs restrict access to medicines for patients with autoimmune disease, including Crohn's disease, found that the vast majority of health plans (97-98%) received grades of C or below on access to medicines at the pharmacy because of the significant restrictions the plans place on access.³

"We [HHS] are and I am very much aware of these rebate walls that can prevent competition and new entrants into the system. That is yet again a reason why I think we need to get at this question of rebates in the PBM world." Testimony of HHS Secretary Alex Azar before Senate HELP Committee, June 12, 2018.⁴

1. <https://site.crohnscolitisfoundation.org/steptherapy/step-therapy-infographic.html>

2. [https://www.gastrojournal.org/article/S0016-5085\(16\)30887-3/abstract](https://www.gastrojournal.org/article/S0016-5085(16)30887-3/abstract)

3. <https://static1.squarespace.com/static/59a55aa28dd041cc6f74be62/t/5cd22375652dea377743db53/1557275511394/LMDD-Scorecard-web.pdf>

4. <https://www.c-span.org/video/?446791-1/secretary-azar-testifies-prescription-drug-pricing-plan>

