



Let My Doctors Decide

ESCAPE THE SYSTEM

Stop the Madness of Step Therapy

Why we
need to
act now

“ Unfortunately,
with the system as
it stands, insurance
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to provide the best
care we can for
our patients. ”

– Dr. Avery LaChance

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.

TAKE ACTION

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

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 an autoimmune disease," 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 medication because I know that the drug can trigger MS in patients who have her condition. But that 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 as 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



DR. AVERY LACHANCE

Dr. LaChance is an experienced dermatologist who often treats patients with multiple complex conditions. As a dermatologist, it is her job to take the clues the skin provides to diagnose, monitor, and treat her patients. Insurance companies, however, sometimes make this process difficult to the detriment of the patient.

“ Unfortunately, with the system as it stands, insurance algorithms too often impede our ability to provide the best care we can for our patients. ”

Dr. LaChance has a patient with psoriasis and psoriatic arthritis. Her conditions affect her ability to sleep, and the pain in her joints limits her ability to perform her job as a massage therapist. Her patient also has a rare form of blood cancer, limiting treatment options. Although her patient was on a medication that worked, the patient changed insurance companies and had to go back to taking a medicine she had previously tried that was not effective – forcing her to “fail first,” causing months of suffering and delays to accessing the appropriate treatment.

Unfortunately, Dr. LaChance and countless other medical professionals are faced with this challenge on a regular basis. That is why Dr. LaChance and healthcare professionals across the country are partnering with other stakeholders to fight for patients and stop the harmful practice of step therapy.



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.



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: 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 disease 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.

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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LET MY DOCTORS DECIDE PRINCIPLES

- Requiring that step therapy requirements be clinically based on current evidence and used for medical reasons only.
- Leaving the final decision as to whether a patient has “failed” on a therapy with the treating physician not the insurer.
- Prohibiting switching of medications for non-medical reasons without the prescribers’ consent.
- At the pharmacy counter, patients should receive discounts, rebates, and other insurer and non-insurer savings that help make medicines more affordable.

TAKE ACTION

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