







March 8, 2016

Kansas Legislature House Health and Human Services c/o Renae Hansen 300 SW 10th Ave Room 521-E Topeka, KS 66612-1586

Dear Chairman Hawkins and Members of the Health and Human Services Committee:

Collectively, the undersigned organizations would like to express their opposition to SB 341, legislation that will *remove* existing protections against the use of step therapy. If passed, SB 341 will prevent patients from accessing the prescribed care or treatments they need in a timely manner.

Step therapy is a type of utilization management tool used by payers to help control and contain rising health care costs. Sometimes called "fail first", step therapy policies require patients to try and *fail* another lower cost medication before the prescribed medication can be given.

More than other utilization management tools such as formulary tiering, step therapy raises important ethical concerns regarding the proper balance between cost control and the ability of patients and clinicians to care for the needs of the individual patient. While the undersigned organizations recognize the importance of cost containment and share the concern that the rising cost of health care delivery is placing new and dangerous risks onto patients, we are concerned that step therapy, if applied inappropriately, will lead to less robust patient outcomes and could potentially even be harmful to patients. By requiring patients to first prove that another medication is not effective, particularly when the patient is already seeing results from an existing course of treatment, is equivalent to telling a patient that she must harm herself before being allowed to get better. For many treatments, proving "failure" on an alternate medication is tantamount to causing damage to the body, thus putting the patient's health at significant risk. It is in that light that we believe that step therapy protocols must be

drafted and applied with consideration for the patient's medical history and the medical provider's professional judgment and expertise. The easiest way to do this without placing undue risk onto payers, providers, or patients is to ensure that payers have a clear, expedient, and easily-navigable exceptions process for all step therapy protocols that allow those protocols to be overridden at the judgment of the medical provider.

Patients in need often cannot afford long wait times for specialty medications that would otherwise be subject to step therapy protocols. In the case of many medical conditions, a patient's health will deteriorate rapidly if she does not have access to the proper treatment. We firmly believe that health care decisions, be they mundane or significant, deserve to be made between patients and their health care providers. Administrative choices should not come between a patient's need and a provider's expertise. It is for this reason that we believe that efforts to clarify the process for utilization reviews are worthwhile and will facilitate better health outcomes for patients.

In closing, we stand in opposition of this critical legislation and urge the committee to vote **NO** to SB 341 to ensure that Kansas patients continue to have protections against inappropriate step therapy practices, a well-known barrier to receiving care.

Respectfully Submitted,

Aimed Alliance
Alliance for Patient Access
International Myeloma Foundation
National Patient Advocate Foundation

cc: Members of the Health and Human Services Committee