March 12, 2014

Connecticut State Legislature
Joint Committee on Insurance and Real Estate
300 Capitol Avenue
Hartford, CT 06106
(Via electronic delivery)

Dear Members of the Committee on Insurance and Real Estate:

On behalf of the American College of Rheumatology, I would like to express our support for Senate Bill 394, An Act Concerning Requirements For Insurers’ Use Of Step Therapy. We believe that access to treatment should be reasonable and timely without unnecessary barriers to medically necessary care.

The ACR opposes step therapies also known as fail-first policies, step protocol, sequencing or tiering. These requirements were originally designed by managed care organizations as an attempt to control the costs of prescription drugs. In reality, they create unnecessary obstacles for patients and their physicians, delays in appropriate therapy, potentially dangerous outcomes for patients and undermine decisions made between the patient and physician. The ACR supports strategies for lowering the cost of expensive medical therapies but discourages cost savings plans that compromise the standards of quality and safe clinical practice.

Under step therapy programs, the patient is generally required to fail one of more formulary covered drugs before allowing the non-formulary (or non-preferred) drug to be used. Often higher copays for non-preferred drugs are applied to discourage their use which leads to tiering of drugs within a similar class. It is concerning to us that this specialty tiering often places crucial treatments out of reach financially for the patient however, SB 394 takes the very important step of addressing crucial issues by creating a minimum time frame a patient must be treated under a step therapy protocol. It is very encouraging that Connecticut has an opportunity to have legislation in place that recognizes the importance of quality patient care and we applaud you and your colleagues.

The ACR appreciates the opportunity to provide these comments. We are committed to advancing excellence in the care of patients with arthritis and rheumatic and musculoskeletal diseases, which includes serious conditions such as rheumatoid arthritis and other debilitating and potentially-disabling rheumatic diseases. If we may assist you with any additional information or questions, please contact Starla Tanner at stanner@rheumatology.org or by telephone at (404) 633-3777.

Thank you very much for the work you do and for your consideration of this important issue. We urge the Committee to vote “yes” for SB 394.

Sincerely,

Joseph Flood, MD
President, American College of Rheumatology