



March 13, 2019

Senator Heath Sanborn and Representative Denise Tepler
Chairs, Joint Committee on Health Coverage, Insurance and Financial Services
Cross Building, Room 220
Augusta, Maine 04333

Re: Support for LD 1009

Dear Chairs Sanborn and Tepler:

On behalf of the 1-in-10 individuals in Maine with one of the approximately 7,000 known rare diseases, the National Organization for Rare Disorders (NORD) urges you to support LD 1009, bipartisan legislation sponsored by Representative Charlotte Warren that would put in place incredibly important patient protections pertaining to step therapy protocols.

NORD is a unique federation of voluntary health organizations dedicated to helping people with rare "orphan" diseases and assisting the organizations that serve them. We are committed to the identification, treatment, and cure of rare disorders through programs of education, advocacy, research, and patient services.

NORD believes strongly that all patients deserve the medical care that is best suited for their medical situation and that will give them the best results. Based on the reports we receive from member organizations and individuals, step therapy (also known as fail first) is increasingly being applied by health plans in Maine with little regard for a patient's treatment history and specific medical needs.

Step therapy is a procedure by which insurers (public or private) require patients to take one or more alternative medications before being put on the medicine preferred by their provider. While we understand that this is done by insurers in an attempt to control health care costs for the good of all beneficiaries, it can often be applied inappropriately, with little regard to clinical practicalities. As a result, in many cases, these requirements can delay appropriate treatment and ultimately increase costs, not lower them.

As the use of step therapy has increased (at least 60 percent of commercial health plans have implemented it)¹, so has the need for states to ensure that these requirements do not needlessly interfere with appropriate care for patients. For instance, in some cases, patients switching insurance plans may be required to stop taking a successful treatment and start taking a medicine

¹ Pharmaceutical step therapy interventions: a critical review of the literature. J Manage Care Pharm. 2011 Mar;17(2):143-55.



that they have already failed on simply because the step therapy protocol does not take into account whether a patient has failed a medicine while covered by another insurer.

LD 1009 would address this issue by providing new protections for patients when health plans implement fail first policies. First, this legislation would require that step therapy protocols be based on medical criteria and clinical guidelines developed by independent experts. Second, it would require insurers to have a simple and accessible process for patients and providers to request exemptions. Finally, it would specify certain conditions under which it is medically appropriate to exempt patients from step therapy and require insurers to grant or deny exemption requests within a specified timeframe.

In order to guarantee patient safety, Maine needs to ensure that fail first policies do not interfere with appropriate care. By implementing the protections created in LD 1009, the Committee will be protecting patients while still enabling health plans to achieve the cost-saving benefits of step therapy when appropriate.

Thank you for the opportunity to comment on this legislation.

Sincerely,

Tim Boyd,
Director of State Policy