Fail First Puts Rhode Island Patients Last

Please support common sense guardrails (HB 5704/SB 302) to protect Rhode Island patients. As patient and provider organizations, we work every day to advocate for the health and well-being of your constituents. Under fail first policies, patients are currently required to try and fail one or more medications specified by their insurance company – not their health care professional - to treat their health condition. This one-size-fits-all approach to controlling health care costs puts patients at risk and undermines a health care professional’s assessment of the best treatment option for their patient’s condition.

Collectively, we urge you to pass legislation that reforms fail first policies, also known as step therapy.
Date: March 16, 2021

To: Honorable Members, House Committee on Health and Human Services
Chairman Stephen M. Casey
First Vice Chair James N. McLaughlin
Second Vice Chair Susan R. Donovan

From: New England Hemophilia Association

Subject: Support for H.B. 5704 (Group Letter)

Collectively, we are writing in support of H.B. 5704: An Act Relating to Insurance – Accident and Sickness Insurance Policies – Step Therapy Protocols. This bill would ensure that step therapy programs in Rhode Island are based on appropriate clinical guidelines. Under a step therapy protocol, a patient must try one or more drugs chosen by their insurer—usually based on financial, not medical, considerations—before coverage is granted for the drug prescribed by the patient’s health care provider. While we all can support the concept of saving money on health care, the protocol has gone too far, restricting patients from having access to the needed and recommended medication that their doctors have prescribed.

Contrary to what you may be hearing, H.B. 5704 will not prevent insurance companies from using step-therapy protocols. It does not limit the number of drugs a patient must try ("steps") nor does it prevent insurers from requiring prior authorization before covering a drug. It also won’t prevent insurers from requiring patients try a generic drug if it is equivalent to a brand.

Under step therapy protocols, patients may be required to try one or more alternative prescription drugs that are of lower cost to the insurer but may not be the best therapy for some patients. Patients need the ability to quickly assess their condition with their doctors and find the best course of treatment for their individual medical needs. Delays in access to the best treatment available, which could be experienced as a result of patients having to go through a step therapy protocol, can pose significant risk to the treatment of disease.

We need to put patients first in Rhode Island. Patients must bear the financial risks of additional co-pays and office visits as they move through the step therapy process. Patients are already struggling; COVID-19 only made things worse. Step therapy can undermine physicians’ ability to effectively treat patients, can lower quality of care, and lead to setbacks and disease progression for patients. Exemptions from step therapy do not prohibit insurers from using step therapy but seek to balance cost containment with patient needs.

We appreciate your consideration and are available to discuss any questions you may have.
Respectfully Submitted,

Aimed Alliance
Allergy & Asthma Network
Alliance for Patient Access
ALS Association Rhode Island Chapter
American College of Gastroenterology
Arthritis Foundation
Crohn's & Colitis Foundation
Epilepsy Foundation New England
Global Healthy Living
Infusion Access Foundation (IAF)
Lupus and Allied Diseases Association, Inc.
Multiple Sclerosis Association of America
National Eczema Association
National Infusion Center Association (NICA)
National Organization for Rare Disorders (NORD)
New England Bleeding Disorders Advocacy Coalition
New England Hemophilia Association
Patients Rising Now
Providence Fire Fighters
Rhode Island State Nurses Association
Rhode Island State Medical Society
Rhode Island Neurologic Society
Susan G. Komen

Cc: Lisa Cataldi, Committee Clerk, HouseHealthandHumanServices@rilegislature.gov