April 21, 2021

The Honorable Raul Ruiz, MD
2342 Rayburn House Office Building
Washington, DC 20515

The Honorable Brad R. Wenstrup, DPM
2419 Rayburn House Office Building
Washington, DC 20515

RE: Support for H.R. 2163, the Safe Step Act

Dear Representatives Ruiz and Wenstrup:

As patient and physician advocates, the Alliance of Specialty Medicine (Alliance) writes in support of your legislation, H.R. 2163, the Safe Step Act, which would provide patients and providers with a clear and transparent appeals process when subject to step therapy protocols instituted by insurers.

As you know, a medication step-therapy protocol establishes a specific sequence in which prescription drugs are covered by a group health plan or a health insurance issuer. Step-therapy protocols may require patients to try and fail an insurer-preferred medication before being covered by the physician-prescribed medication. Many insurers have instituted this practice to help control the costs of expensive medications. However, while this practice may initially reduce insurer costs, it can have devastating health consequences for patients and ultimately lead to more expensive health care costs in the long run. Patients who are denied first coverage of medications recommended by their physicians can end up with poor health outcomes due to adverse health events which can lead to costly hospitalizations. In the era of personalized medicine, patients with chronic diseases such as inflammatory bowel disease, rheumatoid arthritis, cancer, psoriasis, or age-related macular degeneration may respond differently to various medications used to treat these diseases.

In 2017, the Alliance conducted a survey of specialists, finding:

- More than 85% have experienced an occasion during which a stable patient was asked to switch from his or her medication by the insurer even though there was no medical reason to do so.
- 70% reported that their patients were unable to follow recommended treatment plans due to out-of-pocket costs.
- Nearly 95% report needing to change a prescription to a different medication due to delay tactics from insurers related to the original prescription.
- More than half reported that it took longer than 3 days to get a patient the proper medication.

H.R. 2163 will help patients and physicians by requiring insurers to implement a clear and fair appeals process that is easily accessible on the plan’s website that allows step therapy to be bypassed in medically
necessary circumstances such as when a patient is already stable on a therapy. The legislation would also establish a time frame in which insurers must respond to appeals to ensure that patients can receive appropriate treatment in a timely manner.

The Alliance thanks you for your leadership in sponsoring this necessary legislation to provide patients with basic protections and with fair and reasonable exceptions when subject to step therapy. Your legislation would help return medical decisions that impact patients’ lives back to physicians and patients, thereby helping to restore the physician-patient relationship. For these reasons, the undersigned organizations of the Alliance extend our strong support of your legislation, H.R. 2163, the Safe Step Act.

Sincerely,

American Academy of Facial Plastic & Reconstructive Surgery
American Association of Neurological Surgeons
American College of Osteopathic Surgeons
American College of Mohs Surgery
American Gastroenterological Association
American Society for Dermatologic Surgery Association
American Society of Cataract and Refractive Surgery
American Society of Plastic Surgeons
American Society of Retina Specialists
American Urological Association
Coalition of State Rheumatology Organizations
Congress of Neurological Surgeons
National Association of Spine Specialists