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CHRONICALLY ILL PATIENTS FEARFUL OF UNREPORTED INSURANCE COMPANY DRUG SWITCHING

Global Healthy Living Foundation Releases National Patient Survey Revealing Widespread Concerns with Medication Switching

UPPER NYACK, NY (April 22, 2015) – The Global Healthy Living Foundation (GHLF), a non-profit organization dedicated to improving the quality of life for people with chronic illness, today released the findings of a national survey of stabilized autoimmune patients that explored their perspectives on switching prescribed biological medicines. The survey, “Patient Perspectives on Medication Switching for Non-Medical Reasons,” found 98 percent of the 177 eligible respondents said insurance companies and pharmacists should not switch effective therapies without patient and physician notification.

Patients with autoimmune diseases such as rheumatoid arthritis rely on expensive complex drugs called biologics to be productive members of society. A strong patient-physician relationship is key to finding the most effective biologic drug for a patient. It can take several years of trying different options before finding the most appropriate for a particular patient.

“Patients often spend years working with their healthcare providers to find the right medication for their condition” said GHLF Executive Director, Louis Tharp. “This is compromised when insurers decide to stop covering a drug that has been working for a patient. Now a patient is forced to pay out of pocket or switch,” he said.

Insurance companies use a tier system to determine reimbursement and out-of-pocket costs for beneficiaries. When establishing their formulary tiers for a drug class, insurers compare drugs based on clinical value and price. The lowest priced drugs with comparable clinical effectiveness are regularly selected as an insurer’s “preferred drug”. This evaluation process as well as changes to covered drugs can play out once, or multiple times, a year depending on the insurance company and plan. Often times when a drug or series of drugs are dropped from a plan the patient and physician are not notified of the change. Patients are then required to switch to whichever drug(s) the insurer has newly selected as its preferred (cheaper) option. Whether or not a patient and physician have tried those therapies and failed in the past is not considered.
These drugs are incredibly complex and patients with autoimmune diseases taking them can be very sick. One small difference between drugs can regress their disease state or worse, trigger a life-threatening adverse reaction.

The survey revealed stabilized patients have widespread health and financial concerns about switching biologics without patient and physician notification.

“This survey shows patients reject non-medical switching not only because it threatens their health, but also because of its impact on the patient-physician relationship. A physician selects the best therapy for a patient based on unique attributes. A patient trusts a doctor’s decisions and commits to complying. An insurer disrupts this when it drops drugs and makes patients pay thousands of dollars to stay stable on their therapy. This is wrong,” Tharp said.

**Specific findings of the GHLF survey include:**

- **98 percent of survey respondents support legislation** that would specifically **prohibit PBMs or pharmacists from switching** a patient’s biologic medicine without patient or provider notification;

- **86 percent of respondents agreed only patients and doctors (90 percent of respondents said only doctors) should have a say in which biologic medicine they are prescribed**—compared with **the 2 percent of respondents who said insurers** should have a say in the matter;

- **95 percent of stabilized patients** would be concerned that their disease would **worsen if their biologic medicine was switched**;

- **93 percent of respondents who have tried multiple biologics** said they **do not believe all biologics are equally effective**;

- It took **88 percent of patients more than one year to find the biologic treatment that worked for them**, with **30 percent of respondents reporting to have waited at least five years** to find an effective biologic for their condition;

- **68 percent of respondents** have tried at least one other biologic medicine before finding their current, effective medication;

- In a series of questions about effectiveness and side effects, patients surveyed said they would **prefer to stay on their current biologic, even if there were a 20 percent increase in costs**, than switch to a cheaper drug that had either less effectiveness or more side effects.

**In response to the survey and ongoing state legislative efforts, GHLF announced the following policy recommendation to help prevent medication switching:**
• Enact legislation that would **prohibit a pharmacist or insurance company from switching a patient’s biologic medicine** without allowing stabilized patients to be grandfathered onto therapy

For the complete results of the survey, “Patient Perspectives on Medication Switching for Non-Medical Reasons,” please visit: [www.GHLF.org](http://www.GHLF.org)

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**About GHLF**

The Global Healthy Living Foundation is a 501(c) (3) non-profit organization, based in New York, with the mission to improve the quality of life for people with chronic illness. GHLF accomplishes its mission by advocating for improved access to care and by educating the community about the importance of diagnosis, early and innovative medical intervention, long-term lifestyle improvement, and therapeutic compliance. Co-founded in 1999 by arthritis patient and advocate Seth Ginsberg (diagnosed with Spondyloarthritis at age 13), the GHLF includes disease-specific communities, the most visible being CreakyJoints (CreakyJoints.org), a network of nearly 80,000 arthritis patients and caregivers. For more information, visit [www.ghlf.org](http://www.ghlf.org).