

**Help Texans Stay Healthy and Stable. Reform Non-Medical Switching.**

For patients living with complex chronic or progressive diseases, it can take months or even years to find a treatment that works effectively with manageable side effects. Even if patients and their physicians find the right medication to control their condition and keep them stable, arbitrary insurance policy changes at the beginning of a new plan year – such as formulary changes, higher copays or new prior authorization requirements – can force these Texans to forgo the treatments they depend upon.

When insurance companies change the rules and push patients off prescribed treatments that are working well, those patients may experience a recurrence of symptoms, further disease progression, missed work and family time and even hospitalization.

**HB 1646 by Rep. Stan Lambert and SB 1142 by Sen. Judith Zaffirini will help Texans stay stable on medications that keep them stable, as long as they stay on the same health plan.**

**Being forced off the right treatment is COSTLY FOR TEXANS**

**Being forced off the right treatment is COMMON FOR TEXANS**

**67.7%** of Texas patients reported their health plan’s formulary change switched their medication to one different from what their physician prescribed.

**73.6%** reported being financially coerced by their health insurer to change their prescribed medication for non-medical reasons.

*Source: GHLI and NICA survey of 266 Texas patients, June-August 2018.*

Medication nonadherence annually costs the U.S. health care system **$100 billion.**

Annual indirect costs exceed

**$1.5 billion in lost earnings** &

**$50 billion in lost productivity.**

*Source: Goldman D.P., et al. "Pharmacy benefits and the use of drugs by the chronically ill." JAMA, 291(19):2344-2350*

**Employers, hospitals, families and insurers save money when people are allowed to avoid missed work, additional tests, outpatient care and hospitalizations that often accompany a gap in treatment or a change in physician-prescribed care.**

**How HB 1646 | SB 1142 help Texans stay healthy:**

* Patients who stay on the same health plan can remain stable on the prescribed medication that works for their condition.
* Out-of-pocket costs remain predictable not only throughout the health plan year, but also from one year to the next within the same health plan.
* Patients and their physicians can trust that the treatment plans they make will continue to be covered as they had been the previous year.
* Stable patients won’t have to forgo the treatments they depend upon while they and their providers try to appeal coverage denials or reductions.

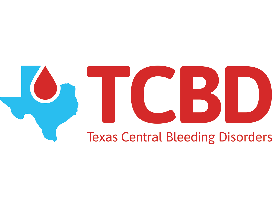
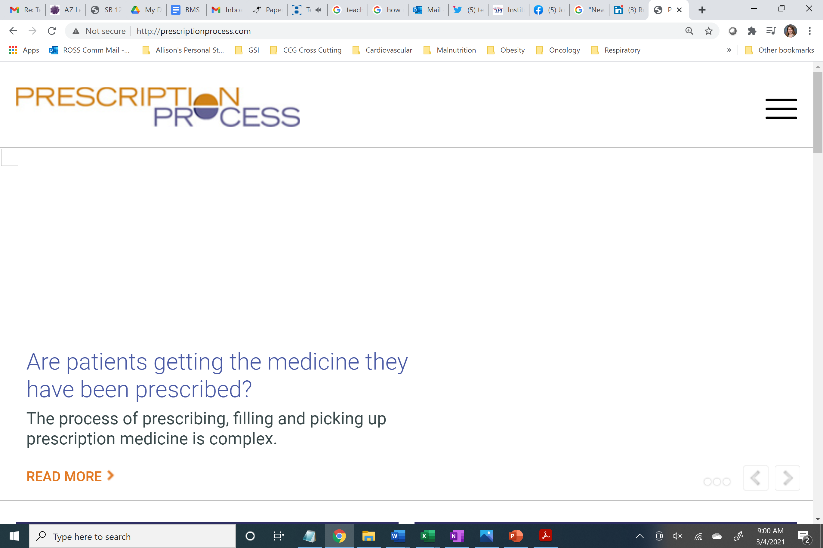
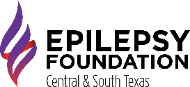
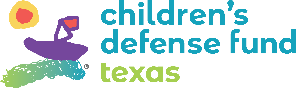
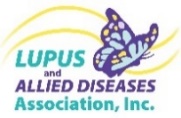
**How HB 1646 | SB 1142 preserve insurers’ autonomy:**

* Health insurers may still make changes to their health plans that improve patients’ access to their stabilizing medications.
* Health plans may still remove drugs from the formulary that are deemed by the FDA to be unsafe or ineffective.
* Health insurers may still adjust their formularies and remove medications from their formularies at the start of a new plan year for patients who are not already stable on the affected medications or for patients who are new to the health plan.

Leg. Adv.: Greg Hansch, National Alliance on Mental Illness (NAMI) Texas, Austin State Hospital Campus, Building 781, Room 428, Austin, TX 78703

**Lawmakers can make healthcare work better for Texas families and our state by helping patients stay stable on the treatments that keep them healthy.**







Building on our state’s strong record of patient protections, we ask members of the Texas Legislature to **please vote for HB 1646 by Rep. Stan Lambert / SB 1142 by Sen. Judith Zaffirini to reform the insurance practice of Non-Medical Switching.** This legislation will allow patients to remain stable on a medication that has been prescribed by their physician and covered by their health plan when they stay on that same health plan. This will benefit the health of the patient, improve continuity of care and reduce medical costs for that patient and for the Texas healthcare system.

Sincerely,

**The Coalition for Stable Patients**

Alliance for Patient Access

Alliance for the Adoption of Innovative Medicine

Alliance of Independent Pharmacists of Texas

Association for Clinical Oncology

Children’s Defense Fund | Texas

Coalition of State Rheumatology Organizations

Coalition of Texans with Disabilities

Epilepsy Foundation Central and South Texas

Global Healthy Living Foundation

Infusion Access Foundation

Keep My Rx

Lone Star Bleeding Disorders Foundation

For more information, contact Greg Hansch with NAMI Texas at executive.director@namitexas.org or (512)-693-2000.

Leg. Adv.: Greg Hansch, National Alliance on Mental Illness (NAMI) Texas, Austin State Hospital Campus, Building 781, Room 428, Austin, TX 78703

Lupus and Allied Diseases Association

National Alliance on Mental Illness | Texas

National Association of Social Workers | Texas

National Infusion Center Association

Prescription Process

Texas Bleeding Disorders Coalition

Texas Central Bleeding Disorders

Texas Dermatological Society

Texas Medical Association

Texas Pediatric Society

Texas Rare Alliance

U.S. Pain Foundation