



February 25, 2019

My name is Gayle M Taylor-Ford, LSCSW, LCAC, I serve on the Board of Directors of the International Pain Foundation (iPain) and owner of Therapy Services, LLC based out of Burlington, KS. I am here today to support SB 93 with patient protections in place. Through my work with the iPain Foundation, I am dedicated to empowering patients to become self-advocates and educating patients and public on the challenges chronic pain patients live with on a daily basis. I am here to speak on behalf of the 900,000 pain patients living in Kansas who know the challenges of access to proper and timely care.

Step therapy and prior authorization practices in many cases are unethical and take decision making away from prescribers who have had the benefit of examining the patient, reviewing blood work, test results, etc., and transferring these decisions to the insurance company representatives. This is a person making the decision who may or may not (in most cases not) be a doctor. This person who is making medical decisions on YOUR care or denial of care based on the mighty dollar.

One of the biggest challenges we hear about most from our pain community is access to care involving delays. We are seeing an increase in patients who are facing restrictions to medication and less invasive options such as chiropractic and physical therapy through step therapy by insurance companies. SB 93 is written with protections in place to help to prevent these things from happening.

Step Therapy has protections have already passed in 22 states. Of those States, the iPain was involved in supporting the passage of the legislation in 17 of those states. This includes when we passed the legislation here in Kansas in 2016 that covered KanCare recipients. This year we are supporting Step Therapy Bills have been introduced in 15 states and iPain is involved in supporting that legislation in Wisconsin, Illinois and Kansas. I cannot stress enough how important it is to allow a prescribing provider, based on his or her professional judgment, to request a step therapy override determination from a health plan or insurer on behalf of a patient. Poor step therapy practices need to be limited to help eliminate the often-cruel practice, which denies access to critical life-giving medication for chronic pain diseases.

We are looking to support step therapy bills and prior authorization bills which address the specific problems of patients in pain to highlight the inadequacies of the practices because a pain patient can tell immediately whether a pain medication is working or not, and they should not be forced to stay on medicine which does not relieve their pain. They also should not be forced to wait weeks and months for the prior authorization for the proper care that they need. The International Pain Foundation adamantly believes that applying step therapy and prior authorization protocols rigidly to a pain patient is not in the patient's best interest and simply creates undue challenges to pain patients.

Additionally, any cost savings that the state is looking at by delaying care with prior authorization practices or enacting this type of Step Therapy legislation has been shown to increase costs. Even though potentially the number of dollars spent on medication may have decreased that is offset by the increased number of emergency visits and increased phone calls, and office visits to the provider because of medication that is not working or undue side effects of medications that are not as effective as what could have been prescribed.

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Personally, my Husband, a combat veteran, was diagnosed in early December 2015 with MS. It took more than two months to start actual MS medication because the Neurologist, who is an MS Specialist, had to get prior authorization to prescribe the type of therapy he needs. This is due to Step Therapy and prior authorization rules. The Neurologist was very up front with us about this process. He stated it would take at least 90 days before my husband could start this needed medication. The Neurologist was first denied the prior authorization that he requested then he and his staff worked through the rigorous appeal process until they were finally successful in obtaining the authorization. In the mean time they had my Husband take IV By the time, he finally got the medication the Neurologist prescribed, he was so ill and weak that four days later he ended up in the hospital for four days. Time in the hospital that likely could have been avoided if he had been able to have the original medication in a timely manner.

Just to provide an idea of harm that is caused by this step therapy process, as part of the diagnosis process my husband had an MRI of his brain and spinal cord. The initial MRI showed two lesions on his brain and no lesions on his spinal cord. After his 90 day plus wait until his first treatment, a new MRI was done. The new MRI showed the two initial lesions on his brain, but it also showed two new lesions that had developed on his spinal cord. That is why he is in a wheel chair now. The positive news is that since he has started that medication, he has not developed any new lesions to this day.

Last year we had to battle the prior authorization process several times. Our COBRA insurance coverage ended at the end of November (2017) and we were forced to change insurance plans. Then the insurance plan that we changed to which was the only one available to us that was in network for our providers left the network one month later. On January 2018 we changed insurance companies yet again. In May 2018 my husband qualified for Medicare coverage. With all the changes in insurance a prior authorization process cannot be started prior to the first day of active coverage so each time in both December and January and May it took 2-3 weeks to get the needed authorization for a medication that he has been taking for over two years. Our Neurologist shared that his nurses spend 40% of their MS related activities dealing with the insurance companies working to overcome the Step Therapy and Prior Authorization obstacles.

The International Pain Foundation provides community-based support services that address the immediate needs of pain patients. The International Pain Foundation's goal is to allow chronic pain patients the ability to perform their regular activities in the community and to bolster society's ability to provide full opportunities and appropriate supports for its pain citizens. It is our goal to shed light on the unethical treatment of pain patients, especially women, minorities and economically disadvantaged patients, whom studies have shown are either disproportionately undertreated, or go untreated for pain.

In conclusion, we support SB 93 with patient protections in place.

Thank you for your time,
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