



**MEDIA TOOLKIT**



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## Who We Are

**Patient Access for Florida** unites organizations committed to public policy to strengthen patient protections and appeals processes, specifically in the areas of streamlining step therapy and fail first protocols, simplified prior authorization, protection against discriminatory plan designs, providing continuity of care for stable patients, and offering an appeals process for medical exceptions. The coalition unites all types of stakeholders—patient, healthcare professionals, and business organizations—to ensure a unified strategy to address these issues.

Healthcare professionals have the expertise to know what is best for patients and must have access to a full range of therapeutic options to use as they see fit for their patients. They should not have to jump through burdensome bureaucratic hoops to secure the most appropriate therapy. Ultimately, healthcare professionals, not bureaucrats, should make the determination of the best course of treatment and medications for a patient. We need to ensure Florida's patients are receiving the *right medication at the right time*.

**Patient Access for Florida** is fully engaged in the conversation. Join us today at [www.PatientAccessFL.com](http://www.PatientAccessFL.com) or via our social media channels: [Facebook](#), [Twitter](#), and [YouTube](#).





## **Issue & Solution**

### **THE ISSUE**

Access restrictions can prohibit a provider from prescribing what they believe is the best therapy option for a patient. It is imperative certain access protections be implemented.

Protections such as continuity of care, adequate product selection, and ensuring a clear and simple path for healthcare professionals to navigate the prior authorization process are essential to patient health.

Physicians should not be burdened with administrative roadblocks to securing the most appropriate therapy.

Ultimately, healthcare professionals, not bureaucrats, should make the determination of the best course of treatment and medications for a patient.

Patients already face many challenges in remaining compliant with their medication regimens. Without these protections, unnecessary barriers to needed drug therapies could deter patients from adhering to their therapeutic regimens.

### **THE SOLUTION**

Ensure Florida's patients have access to the right medication at the right time.

Require standard forms for a physician to utilize when seeking a prior authorization for a patient's medication, which reduces paperwork and allows for more time to treat patients.

Allow for the ability of a physician to override policy "Fail First/step therapy" protocols, when the physician believes it is in the best interest of the patient.

Increase access to an appropriate range of medication options and to newly approved medications pending approval by the managed care organization.

Allow for continued access to a medication even if the health plan changes the list of medications it will cover, if the patient requests and the patient's physician agrees.



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## **2014 Poll: Florida Patients Find Fail First Protocols Dangerous**

- 90% of Floridians agree that an insurance company should not be allowed to force patients to switch their drugs if there are changes to the insurers preferred drug lists when a doctor deems the medication medically necessary.
- 88% of Floridians believe that all insurance companies should use the same prior authorization form to cut down on the amount of paperwork patients and doctors have to deal with.
- 58% of Floridians disapprove of insurance companies requiring a patient to take a cheaper drug before agreeing to pay for a more expensive drug only after doctors show the cheaper drug is not working.
- 88% of Floridians agree that insurance companies that have preferred drug lists should have at least two drugs on the list for every disease so that doctors have choices for their patient's treatment options.
- 92% of Floridians believe that preferred drug lists should be posted online so patients and doctors can find them quickly.
- 88% of Floridians agree that insurance companies and medical care providers must reply within 24 hours to a request by a doctor to switch a patient to a drug the doctor considers appropriate.

Note: Poll commissioned by the Florida Medical Association and conducted by Voter/Consumer Research from February 1-5, 2014.



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## **Frequently Asked Questions**

### ***What does the proposed bill do?***

The proposed bill provides basic protections for patients who are subject to a prior authorization or Fail First protocol in their prescription drug coverage. The bill will also streamline the paperwork process that doctors use to obtain authorizations for prescriptions for their patients.

### ***What are the major provisions of the bill?***

#### **1. Streamlining Step Therapy and Fail First Protocols**

Streamlining Step Therapy protocols ensures that physicians have a clear pathway to navigate health plan's step therapy protocols. Under a 'fail first' or 'step-therapy' program, patients cannot receive the drug their physician believes is the best medicine for the patient until they try and fail on older and cheaper drugs. Step therapy programs can be impediments to timely care and are contrary to medicine's best practice of getting the right medicines to the right patient at the right time.

#### **2. Simplified Prior Authorization**

This legislation would require each insurer in the state to develop a standard prior authorization form to be used for all requests. Standardization will minimize costs to the state and maximize the efficiency of the prior approval process, while keeping our doctors in the clinical setting instead of navigating time-consuming and inefficient paperwork. In most cases, the prior authorization request is eventually approved but only after considerable delay and administrative expense that is a hardship for patients and a burden for physicians.

#### **3. Protection against Discriminatory Plan Designs**

This legislation seeks to prohibit insurers from discriminating against vulnerable populations through such means as exclusion of certain therapies or conditions, differential reimbursement rates or cost sharing benefits, clinical prerequisites or heightened administrative requirements based on a patient's disease or disability, or burdensome exceptions processes.

In addition, this legislation would also prevent discrimination on the basis of such variables as expected length of life, disease, or health condition. The concept behind this legislative language is a response to a disturbing decision by the state of Oregon to severely restrict access to cancer treatments for patients based on the severity of the illness. Since the Oregon policy was adopted, other states have quickly moved to prohibit similar discriminatory policies.

#### **4. Providing Continuity of Care for Stable Patients**

If a person with a chronic condition is stabilized using a particular drug therapy, that patient should



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be allowed to continue on that medication as long as it is working and reviewed periodically by their physician. Patients who are seeing such positive results should not be forced to change medications based on the calendar or administrative changes in their coverage plans without the ability to appeal those bureaucratic decisions. This legislation would allow a patient who has maintained a continuous enrollment in a managed care plan to receive continued coverage for a medication that is continuously prescribed and is considered safe for the treatment of their condition.

### **5. Offering an Appeals Process for Medical Exceptions**

This legislation would require health plans providing Essential Health Benefits (EHBs) to have procedures in place that allow an enrollee to request and gain access to clinically appropriate drugs not covered by the health plan. If a person finds their medicine is not covered by their plan, they should have access to a fair process for handling exceptions and appeals, including expedited for urgent or emergency medical conditions as well as continued benefits during the appeal.

#### ***How do doctors feel about this bill?***

The physician community is in full support of this bill. They understand that the paperwork and administrative barriers prevent them from treating and caring for their patients.

#### ***Managed care plans tell us that the costs will increase if this bill passes. Is that true?***

States that have implemented these policies have given their patients and providers the tools to better control their own health care at zero cost to the state. The bill does not ban any activity. It simply sets up guidelines for insurers to provide for an override process in the event that patient health or safety may be an issue, so there should be no additional costs to them.

#### ***Why can't a doctor prescribe the medicine he or she wants for their patient?***

Insurance companies set up "fail first" programs to start patients on less expensive medications before beginning them on the drug the physician believes is the appropriate medicine for the patient.

The bill mirrors language in other states that establishes the three criteria for doctors to ask for an override are very simple and as follows:

- The medication has been ineffective for the patient.
- The patient's medical history indicates that the drug will not work.
- The drug may do harm to the patient.



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## Expert Media Resource



**Edith Gendron**

***Brain Bank Program Manager, Alzheimer's & Dementia Resource Center***

As a Type II diabetes patient prescribed Victoza, Edith had to go through a prior-authorization process twice with her new insurer to receive the same medicine she had been taking, forcing her to go weeks without medication. Her other option was to fail first on a medication that she had never taken and wasn't prescribed to her. A health advocate was a necessity for her in wading through the complications of the system.



**Pam Langford**

***Executive Director, H.E.A.L.S. of the South***

As a long-time Hepatitis C patient, Pam had to fail first on one treatment, losing a year of access to advanced medicine. The dangers in fail first and need for education inspired her to dedicate her life to helping other patients across the nation. As a patient who is high-risk for thyroid issues, she had to choose to pay for a thyroid test out of pocket instead of pay her electric bill because Medicare would not cover it.



**William Choisser, MD**

***Physician, MDVIP***

Dr. William Choisser is a family physician with more than 30 years of experience. Currently, Dr. Choisser has twice the administrative staff as medical staff just to manage the billing and paperwork required from each different insurance company. Dr. Chossier believes his practice would benefit from one uniform system for drug prescription overrides, which would make him and his staff more efficient so they are able to better serve their patients.



**Robert W. Levin, MD, FACP, FACR**

***Physician, Florida Medical Association***

Dr. Robert W. Levin is a rheumatologist who has been practicing medicine for the past 25 years in Dunedin, Fla. He has been involved in advocacy efforts for the American College of Rheumatology for the past 10 years. In the past year, Dr. Levin has been working on behalf of the Florida Medical Association and the Florida Society of Rheumatology to increase patient access to necessary and life changing medications through efforts to improve the prior authorization and step therapy process imposed by insurance companies.



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**Pete Martinez**

***Senior Director of State Advocacy, Pharmaceutical Research & Manufacturers of America***

For more than a decade, Pete Martinez has been a voice for increased patient access. A chronic rheumatology patient, Pete knows first-hand the challenges patients face as they navigate the burdensome prior authorization process and fail-first protocols, which all too often hinder their ability to obtain the medications prescribed by their doctor. Working with numerous governors, legislators and state agencies, Pete has successfully advocated for the passage of legislation that has provided for a fairer health delivery system.





## Patient Access for Florida Partners

Patient Access for Florida is a coalition of patient, healthcare professionals, and business organizations who have united with to ensure Floridians have access to the right medicine at the right time.

Alpha-1 Foundation  
Alzheimer's & Dementia Resource Center  
Alzheimer's Project  
American Cancer Society-Cancer Action Network  
American College of Cardiology, Florida Chapter  
American College of Physicians, Florida Chapter  
American Lung Association in Florida  
Arthritis Foundation Florida Region  
Arthritis Foundation Southeast  
Big Bend Cares  
BioFlorida  
Broward County Medical Association  
Broward County Pediatric Society  
Broward County Society of Plastic Surgeons  
Broward Palm Beach Allergy Society  
Capital Medical Society  
Celma Mastry Ovarian Cancer Foundation  
Central Florida Behavioral Health Network  
Children's Magic  
Citrus Council, National Kidney Foundation of Florida  
Clay County Medical Society  
Collier County Medical Society  
Community Health Charities of Florida  
COPD Foundation  
Duval County Medical Society  
Elder Care Advocacy of Florida  
Epilepsy Association of Central Florida  
Epilepsy Foundation of Florida  
Florida Academy of Family Physicians  
Florida Academy of Pain Medicine  
Florida Academy of Physicians Assistants  
Florida Allergy, Asthma & Immunology Society  
Florida Breast Cancer Foundation  
Florida CHAIN  
Florida Chapter of American Academy of Pediatrics  
Florida Hemophilia Association  
Florida HIV/AIDS Advocacy Network  
Florida Legal Services Inc.

Florida State Hispanic Chamber of Commerce  
Florida Surgical Society  
HEALS of the South  
Hemophilia Foundation of Greater Florida  
Hispanic CREO  
Hispanic Health Initiatives  
Indian River Medical Society  
Invisible Project  
Leukemia & Lymphoma Society  
Lung Transplant Foundation  
Lupus and Allied Diseases Association  
Lupus Foundation of America, Florida Chapter  
Lupus Foundation of Florida  
Lupus Research Institute  
Manatee County Medical Society  
Medicare Rx Access Network of Florida  
Mended Hearts of Orlando-Central Florida  
Mental Health Association of Central Florida, Inc.  
Mental Health Association of Southeast Florida  
Multiple Sclerosis Foundation  
NAMI Florida  
Nassau County Medical Society  
National Lipid Association  
National Multiple Sclerosis Society  
National Patient Advocate Foundation  
National Psoriasis Foundation  
Oncology Managers of Florida  
Palm Beach Medical Society  
Parkinson's Action Network  
Partnership for Prescription Assistance Florida  
Patient Access for Florida  
PhRMA  
Pinellas County Medical Association  
Putnam County Medical Society  
SaludUSA  
Sickle Cell Disease Association of Florida  
Sickle Cell Foundation  
St. Johns County Medical Society



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Florida Medical Association  
Florida Neurosurgical Society  
Florida Osteopathic Medical Association  
Florida Partners in Crisis  
Florida Physical Therapy Association  
Florida Podiatric Medical Association  
Florida Psychiatric Society  
Florida Public Health Association  
Florida Society of Clinical Oncology  
Florida Society of Dermatology & Dermatologic Surgery  
Florida Society of Plastic Surgeons  
Florida Society of Rheumatology  
Florida Society of Thoracic and Cardiovascular Surgeons

Susan G. Komen Central Florida Affiliate  
Susan G. Komen Miami/Ft. Lauderdale Affiliate  
Susan G. Komen North Florida Affiliate  
Susan G. Komen South Florida Affiliate  
Susan G. Komen Southwest Florida  
Susan G. Komen Suncoast Affiliate  
Tampa Bay Black Nurses Association  
The AIDS Institute  
The Key Clubhouse  
U.S. Pain Foundation  
United Partners for Human Services  
US Oncology  
Volusia County Medical Society

