



May 26, 2021

Dear Senators Looney and Duff,

We, the below signed, **urge** you to bring HB 6622 to the floor for a vote as soon as possible.

HB 6622 prohibits non-medical switching, often referred to as mid-year formulary changes, which occurs when an insurer removes a covered drug from a formulary or moves it to a higher cost-sharing tier mid-policy term for reasons other than medical necessity. HB 6622 would require insurers to honor the agreed contract between an individual and an insurance carrier and cover a medication for the remainder of the policy term. We **oppose** any amendments to the current language of this legislation.

Many residents across the state depend on the stability a specific medication affords them. During open enrollment periods, individuals often review insurers' formularies specifically to find the medication they need and choose a plan accordingly. When they sign up for a plan, they are signing a contract for a specific time period. It is inherently unfair that an insurer should be allowed to break the terms of this contract and remove a covered medication during the plan year. It is important to note that, for many chronic and complex diseases, medications and therapies are not interchangeable.

Movement from one treatment to another should only occur for medically appropriate reasons. Given the rising price of prescription drugs, when faced with non-medical switching, patients have discontinued or rationed treatment because they can no longer afford their medication's increased cost-sharing or the full cost without insurance coverage. For those living with chronic illnesses, this option can often lead to disease progression, reduced functional capabilities, increased healthcare costs due to the higher incidence of ER and physician visits, rehab stays, and an overall lower quality of life.

A poll by the Alliance for Patient Access found that two-thirds of respondents saw an impact in their ability to work after they were switched and 40% said they were unable to contribute needed family care. 70% said they were left feeling helpless after the switch and nearly 60% reported suffering at least one complication from the switch. This research shows that non-medical switching is extremely detrimental to the lives of those living with chronic illnesses and the residents of Connecticut are already seeing the impacts.

HB 6622 passed the House with overwhelming bipartisan support yesterday on a vote of 126-18. We urge Senate leadership to bring this bill to the floor for a vote as soon as possible. This legislation is crucial to the health, safety, financial security, and emotional stability of Connecticut residents.

Sincerely,

National Multiple Sclerosis Society

AARP Connecticut

Aimed Alliance

Arthritis Foundation

Connecticut #insulin4all

Connecticut Legal Rights Project

CT Cross Disability Lifespan Alliance

Epilepsy Foundation of Connecticut

Universal Health Care Foundation of Connecticut