

May 12, 2021

Honorable Assemblymember
New York State Capitol
Albany, NY

RE: Assembly Bill 4668

Dear Assemblymember,

On behalf of the 3.6 million New Yorkers with doctor-diagnosed arthritis, the Arthritis Foundation urges reform regarding mid-year formulary changes. Presently, after enrollment, insurance plans sometimes change the available benefits of a policy and coverage of medications, imposing new utilization management practices, increasing cost sharing obligations and making other changes that can have a negative impact on an insured. As a result, the plans in which people have enrolled often lack adequate patient protections, preventing patients from getting the care that they need.

Currently, the state of New York does not restrict negative mid-year formulary changes for commercial health plans. However, Senator Neil Breslin, and Assemblywoman Peoples-Stokes have introduced legislation (A 4668/S 4111), to protect patients against these negative mid-year formulary changes.

As the law currently stands, a patient may choose an insurance plan during open enrollment based on the fact that their medicine is covered, but there is nothing stopping the health insurance plans from changing coverage of that medicine at any time during a plan year. Plans are allowed to move medications to higher cost-sharing tiers at any point during a year, or worse, remove medications from their formularies entirely. However, individual patients cannot change their plan mid-year even if their coverage changes. An insurer unilaterally changing its coverage while requiring an insured to stay in the plan is tantamount to a “bait and switch” technique and is adverse to the interests of patients. Essentially, a patient is forced to commit to a plan while the plan is not required to make the same commitment to the patient.

It is critical for patients who are currently undergoing a course of therapy with one or more prescription medications to continue to have access to those medications throughout the plan year. Patients who have been stabilized on one therapy as determined by their physician should not be switched to an alternative therapy without regard to health impact. Without the proposed protections in A.4668, alongside the bill’s Assembly companion S.4111, patients who select a particular plan based on their individual medication needs will have no assurances that the plan will maintain coverage for those particular medications during the course of the enrollment year. These unexpected changes can be financially devastating.

There must be safeguards in place that ensure appropriate access to quality health care and medicines for all New Yorkers. These safeguards include prohibiting negative midyear formulary changes in commercial health plans bought in New York.

For this reason, the Arthritis Foundation supports A.4668, which prohibits negative mid-year formulary changes, and encourages the New York State Senate and Assembly to pass this legislation to protect New York patients.

Sincerely,



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