May 29, 2020

The Honorable Seema Verma Administrator Centers for Medicare and Medicaid Services Department of Health and Human Services Hubert H. Humphrey Building 200 Independence Avenue SW Washington, DC 20201

Dear Administrator Verma:

On behalf of the 50 undersigned patient and provider organizations, we would like to thank you for actions the Centers for Medicare and Medicaid Services (CMS) has taken during the novel coronavirus (COVID-19) pandemic to support beneficiary access to care and ask that additional action be taken to extend these flexibilities to include step therapy requirements. Over the past several months, CMS has implemented a number of protections to ensure beneficiaries have access to health care despite the enormity of the COVID-19 pandemic. This is particularly important for beneficiaries with chronic conditions who require regular access to medical care and medications. CMS' 'Patients Over Paperwork' initiative works to "cut the red tape" to reduce burdensome regulations in healthcare. Now more than ever, these new flexibilities help ensure care for patients during the pandemic and that care is not delayed "due to administrative red tape."¹

While we recognize the unprecedented amount of action CMS has taken, we feel that further measures are needed to address the use of step therapy by Medicare Advantage (MA) and Medicare Prescription Drug Plan (PDP) sponsors. As you know, under step therapy protocols, a patient may be required to try - and fail - one or more medications before being granted coverage for the drug originally prescribed by their health care provider. Step therapy protocols are often used as a utilization management tool to keep prescription drug spending low. Plans with unclear exemption processes or lengthy response timelines can place great administrative burden on providers by requiring multiple follow-ups with the plan, the beneficiary, and beneficiary's pharmacy. Across the country, many patients are unable to see their doctors in person and some physicians are being forced to cut staff, in particular, administrative staff. In a pandemic where there is limited staff, resources, and time, providers and patients simply do not have the bandwidth to go through the challenging process of obtaining exemptions to step therapy protocols. For patients, these protocols can result in delayed treatment, increased disease activity, loss of function, and potentially irreversible disease progression. Americans cannot afford to be put at risk of hospitalization right now, especially when hospitals are low on resources and those with chronic conditions are already at higher risk of contradicting COVID-19.

¹ <u>https://www.cms.gov/newsroom/press-releases/trump-administration-issues-second-round-sweeping-changes-support-us-healthcare-system-during-covid</u>

In the April 21st memorandum to MA and PDP sponsors, CMS addressed the issue of prior authorization by stating that sponsors "can also choose to waive or relax PA requirements at any time for other formulary drugs in order to facilitate access with less burden on beneficiaries, plans and providers." CMS went on to say "we encourage plans to consider utilizing this flexibility." Unfortunately, this section of the document makes no reference to step therapy.

Because step therapy can and does create a burden on providers and is an impediment to beneficiary access during these challenging times, we ask that CMS further update this guidance to provide explicit flexibilities to MA and PDP sponsors to waive the use of step therapy requirements and to similarly encourage use of such flexibilities. This action would speak explicitly to step therapy and place it on par with prior authorization more broadly. As we are only requesting the CMS permit this flexibility, plan sponsors would not be compelled to take actions that they are unwilling to take. We note that CMS has already amended the April 21st memorandum with two clarifying FAQs, so an avenue exists for CMS to permit plans to reconsider step therapy usage during the emergency.

We thank you for the actions CMS has already taken to lessen provider administrative burden and facilitate beneficiary access to care during the PHE. We reiterate our request that the agency provide plans with explicit authority and encouragement to waive the use of step therapy protocols during this time. If you or others at CMS have any questions or if you would like to connect directly, please contact Patrick Stone of the National Psoriasis Foundation at <u>pstone@psoriasis.org</u>. Thank you for your consideration.

Sincerely,

Alabama Rare Allergy & Asthma Network Alliance for Balanced Pain Management Alliance for Patient Access Alpha-1 Foundation American Academy of Dermatology Association American Academy of Ophthalmology American Cancer Society Cancer Action Network American College of Rheumatology American Gastroenterological Association American Liver Foundation Arthritis Foundation Association for Clinical Oncology **Cancer Support Community Chronic Disease Coalition** Derma Care Access Network **Digestive Disease National Coalition Dystonia Medical Research Foundation**

Epilepsy Foundation Fabry Support & Information Group **Global Healthy Living Foundation** Good Days Hemophilia Federation of America International Foundation for Gastrointestinal Disorders Interstitial Cystitis Association Lupus and Allied Diseases Association, Inc. Lymphatic Education & Research Network **METAvivor Michigan AHEC** National Alliance on Mental Illness National Eczema Association National Health Council National Infusion Center Association National Multiple Sclerosis Society National Organization for Rare Disorders National Pancreas Foundation National Patient Advocate Foundation National Psoriasis Foundation NephCure Kidney International Patient Services, Inc. **Pulmonary Hypertension Association Restless Legs Syndrome Foundation** Scleroderma Foundation The American Society for Parenteral and Enteral Nutrition The Marfan Foundation The Olev Foundation **Tourette Association of America** U.S. Hereditary Angioedema Association U.S. Pain Foundation United Ostomy Associations of America