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Statement in Opposition to SB 341
House Committee on Health and Human Services
March 10, 2016

To the Honorable Chairman Representative Hawkins and Members of the Kansas House Health and Human Services Committee:

I am Dr. Donna E. Sweet, an HIV specialist credentialed by the American Academy of HIV Medicine. I have practiced medicine in Kansas for 34 years and take care of more than 1200 HIV infected individuals currently. The therapy for HIV infection is nearly a miracle; if patients are found early enough and treated appropriately and according to the guidelines, then life span is not significantly less than that of age matched controls.

Therapy is guided by the Department of Health and Human Services evidence based guidelines, nationally developed by HIV experts. Which drugs patients are placed on depends on their treatment history and viral resistance, concurrent diseases and medications, the patient's immune status (CD4 count), the viral load (HIV-RNA) and the toxicity (side effects) of the drugs (which differ in individual patients.)

Step therapy is not possible with HIV and could significantly harm patients, including leading to premature death. I ask that you leave the prescribing of these lifesaving medications to providers, not to legislators and insurance companies.

Hepatitis C is another condition for which step therapy cannot be used. Currently, the guidelines call for universal screening for Hepatitis C in baby-boomers, those born between 1945–1965, because the majority of the Hepatitis C infected patients in this country are in that birth cohort. Life-style issues may have been an issue for them 20 years ago, but not now. As providers, we generally restrict use of Hepatitis C antivirals to those with 6 months of sobriety from alcohol and illicit drugs. Further restrictions of their ability to get lifesaving care (a cure in >92% of patients with 3 months of anti-Hepatitis C drugs) is wrong. Step therapy should not be used to prevent the poor from getting appropriate and lifesaving drugs.

The poor of Kansas need care, and they need quality care. Please do not restrict our ability as providers to do the best for these patients, and give them the same care you would expect for your family. Second class, inferior care for HIV and Hepatitis C infected patients will lead to increased loss of life and increased disease progression in the patients given inferior care. In the case of HIV, where we know that treatment is prevention and that an undetectable viral load is protective for the contacts of that patient, inferior care will lead to increased spread of the disease.

Thank you.

HOUSE HEALTH & HUMAN SERVICES

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