



To: Senate Public Health and Welfare Committee

From: Rachelle Colombo
Director of Government Affairs

Date: January 27, 2016

Subject: SB 341; allowing for Step Therapy for Medicaid recipients

The Kansas Medical Society appreciates the opportunity to submit comments in opposition to SB 341, allowing for “step therapy” for Medicaid recipients. In an effort to control state expenditures in Medicaid, this bill would allow the state to require patients to try and fail on certain prescription medications before permitting the patient to receive the specific medication actually prescribed by their physician. Step therapy requires patients to fail on a lower cost medicine or medicines before they can receive a more effective treatment or product that is more costly.

Our concerns are that such programs create unnecessary barriers to ensuring that patients receive the most effective medicine for their medical needs in the most timely fashion. Such programs also create more administrative complexity and cost for physicians and other providers who are caring for these patients. Such programs always put costs ahead of care, and do not allow physicians the ability to override the process, even when known factors, such as previous experiences, disease-type, or co-morbidities are taken into consideration. Additionally, by preventing patients from receiving the most effective treatment first, their health can be further compromised, potentially resulting in higher costs for extended, more complex care.

While we certainly understand the need to contain or reduce state expenditures in the Medicaid program, we cannot support such a broad authorization. For example, there is no guidance in the bill about how such a program would be structured and administered. Would the three Medicaid MCOs all be allowed to implement their own unique step therapy process? One of the problems we already have in KanCare is lack of standardization in prior authorization requirements, appeal processes, etc., which all add to the administrative complexity providers have to deal with. How many times would a patient have to fail on an “approved” medication before the most effective product for that individual could be prescribed?

Implementing step therapy for Medicaid patients without any reasonable and meaningful parameters just adds to the administrative burden placed upon physicians, while inhibiting their ability to promptly provide the most effective treatment for their patients. We appreciate the opportunity to submit these comments and respectfully request that you oppose SB 341.