



# PHPN Advocacy Day 2019

## Talking Points and “Asks”

**ASK 1: *Please protect access to charitable co-pay and premium assistance for individuals with rare, chronic conditions such as pulmonary hypertension.***

- The Centers for Medicare and Medicaid Services allows insurers operating under the *Affordable Care Act* to deny coverage to individuals if they receive support from charities. Plans in 42 states have utilized this policy to drive patients off costly medications or even off coverage altogether.
- Insurance companies outside the Marketplace are now following suit.
- Other plans have adopted a “co-pay accumulator” policy of accepting payment via grants from non-profit organizations but not applying the payments to patients’ deductibles or out-of-pocket maximums. In these cases, the plans receive the deductible amount directly from the patient in addition to grant funds from a non-profit – essentially double dipping.
- Please become an original co-sponsor of legislation pending introduction in the Senate which would end these practices, allow charities to be charitable, and ensure that vulnerable patients have access to the care they need. **Contact Sen. Kevin Cramer’s office to co-sponsor.**

**ASK 2: *Please sponsor/co-sponsor legislation that streamlines access to life-saving medication.***

- Even a brief delay or disruption in access to appropriate therapy for pulmonary hypertension can result in irreversible decline and death.
- The ***Safe Step Act*** (H.R. 2279, Senate introduction later in September) places reasonable limitations on step-therapy requirements in the case of high-risk health conditions such as PH.
- The ***Improving Seniors’ Timely Access to Care Act*** (H.R. 3107, seeking Senate sponsors) would standardize prior authorization practices in Medicare Advantage, in order to reduce unnecessary delays in care and improve oversight and transparency of these practices.

**ASK 3: *Please fund a pulmonary hypertension awareness and epidemiology program at the Centers of Disease Control and Prevention.***

- PH patients are often not diagnosed for many years until the condition has reached a catastrophic stage at which point available therapies are less effective.
- A CDC program focused on PH awareness and epidemiology would save lives and save the American healthcare money on avoidable adverse medical outcomes.
- The House and Senate Appropriations Committees have both included strong report language supporting this type of program in the past, but CDC has indicated that they will only launch the program if Congress provides dedicated funding.
- PHA already has existing programs in these areas (medical education, registry, PSA and billboard campaigns.) We believe a relatively small amount -- \$750,000 -- would be enough to respond to current, emerging opportunities.

## Summary of Legislation PHA is Working to Advance in the Senate

### ***Safe Step Act***

(H.R. 2279, pending in Senate)

#### **Congressional champions:**

Rep. Raul Ruiz (D-CA); Rep. Brad Wenstrup (R-OH)

Sen. Doug Jones (D-AL); Sen. Jacky Rosen (D-NV); Sen. Lisa Murkowski (R-AK);

Sen. Bill Cassidy (R-LA)

**Summary:** The *Safe Step Act* (H.R. 2279) places reasonable limitations on step-therapy requirements in the case of high-risk health conditions such as PH. The bill requires group health plans to provide an exceptions process for any medication step therapy requirement and to be responsive to exception requests within one to three days depending on urgency. It also requires that plans authorize coverage for the prescribed drug if:

- The alternate drug has been ineffective in the past or is expected to cause harm
- The alternate drug is not in the best interest of the beneficiary due to functional ability or adherence concerns
- The beneficiary is already stable on an alternate therapy

**Status:** 83 co-sponsors in House of Representatives; soon to be introduced in the Senate. Please become an original co-sponsor.

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### ***Improving Seniors' Timely Access to Care Act***

(H.R. 3107, seeking Senate sponsors)

**Congressional champions:** Rep. Suzan DelBene (D-WA); Rep. Ami Bera, MD (D-CA); Rep. Mike Kelly (R-PA); Rep. Roger Marshall, MD (R-KS)

**Summary:** The *Improving Seniors' Timely Access to Care Act* (H.R. 3107) proposes streamlining and standardizing prior auth practices in Medicare Advantage, in order to reduce unnecessary delays in care and improve oversight and transparency of these practices. The legislation proposes:

- Creating an electronic prior authorization program including the electronic transmission of prior authorization requests and responses and a real-time process for items and services that are routinely approved;
- Improving transparency by requiring plans to report to CMS on the extent of their use of prior authorization and the rate of approvals or denials;
- Requiring plans to adopt transparent prior authorization programs that are reviewed annually, adhere to evidence-based medical guidelines, and include continuity of care

for individuals transitioning between coverage policies to minimize any disruption in care;

- Holding plans accountable for making timely prior authorization determinations and to provide rationales for denials; and
- Prohibiting additional prior authorization for medically-necessary services performed during a surgical or invasive procedure that already received, or did not initially require, prior authorization.

**Status:** Introduced in the House of Representatives in June; seeking Senate sponsors.

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### ***Charitable Assistance Legislation***

Congressional Champions: Sen. Kevin Cramer (R-ND), Rand Paul (R-KY), Doug Jones (D-AL)

Summary: This pending legislation requires health plans to accept third-party payments on behalf of patients from reputable non-profit charities and to apply those payments to the individual's deductible and out-of-pocket maximum.

**Status:** Pending introduction in the Senate, please become an original co-sponsor.