

Submitter: Jenn Shain

On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB4149

Pharmacy benefit managers are dangerous and need to be regulated. I preform medication prior authorizations for a psychiatric clinic and I would like to share with you an event where a PBM practiced medicine by forcing a patient to use a medication that is not indicated for their diagnosis. Ultimately causing a delay in care and exacerbating the patient's condition.

The patient was diagnosed with Tardive Dyskinesia and only 2 drugs are approved by the FDA to treat it: Austedo & Ingrezza. According to the plan's formulary, Austedo was preferred but still required a prior authorization due to the cost. A PA was submitted and denied because the PBM wanted the patient to try and fail Tetrabenazine. This was not listed on their website as part of the criteria, nor is Tetrabenazine appropriate for this diagnosis, as it is not indicated for TD.

We submitted an appeal, informing the reviewers that Tetrabenazine is not an FDA approved indication and that their formulary states Austedo is preferred. They continued to deny the appeal and stuck by their decision. The patient was forced to take the Tetrabenazine while their symptoms got worse. Once the patient "failed" the medication, the plan finally approved the Austedo. Once established on the correct medication, it was effective and the patient's symptoms have significantly improved.

This is just one example of many frustrating situations. Insurance companies and their PBMs have far too much power and will always prioritize profits over patient care. Ultimately making patients sicker and burning out healthcare workers. Please support HB 4149.