

July 8, 2021

Honorable Senator Cindy Friedman  
Honorable Representative John Lawn, Jr.  
Chairs, Joint Committee on Health Care Financing  
Massachusetts State Capitol  
Boston, MA

RE: Senate Bill 756 and House Bill 1311 – Support

Dear Chairs Friedman and Lawn,

The Arthritis Foundation urges your support of Senate Bill 756 and House Bill 1311 when it comes before the Joint Committee on Health Care Financing. This bill would help restore the balance **between an insurer's oversight and the provider's discretion to ensure** Massachusetts patients receive the most appropriate treatment for their condition. Senate Bill 756 and House Bill 1311 seeks to ensure that step therapy protocols are fair, transparent, evidence-based, and best support the health needs of the patient. In addition, Senate Bill 756 and House Bill 1311 establishes standard timeframes for a step therapy exception request.

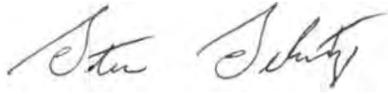
An increasing number of health insurers are step therapy or fail first policies that require patients to try and fail one or more medications before providing coverage for the originally prescribed medications. Rather than taking into account the needs of the individual patient, insurers determine drug sequences based on cost and expectations about potential treatment responses within a generalized patient population.

As a result, step therapy can lead to delays in access to the medications that offer the greatest potential medical benefit to people with arthritis. Arthritis is a chronic, degenerative disease, and delays in treatment can worsen disease progression and even cause permanent damage and disability. In some cases, patients may have no alternate therapy for an extended period of time. If the drug that was initially prescribed was rejected. Accordingly, the standard timeframes established within SB 756 and HB 1311 will help to ensure that patients receive access to their necessary treatments within a reasonable timeframe.

Further, arthritis is a complex disease to treat, and a drug may work well for one person but not for another who has the seemingly same disease profile. Personalized, individual care is critical for people with arthritis. The required fail first drugs may cause adverse reactions or complications to the patient due to side effects or other drugs they may be taking to treat the disease or co-morbidities. There is currently no consistency in how insurers establish and apply fail first protocols.

On behalf of the more than 670,000 people living in Massachusetts with doctor-diagnosed arthritis, the Arthritis Foundation strongly urges your support of Senate Bill 756 and House Bill 1311 to ensure that providers and patients have a say in what would be medically appropriate for treatment.

Sincerely,



Steven Schultz  
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Arthritis Foundation  
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CC: Members, Joint Committee on Health Care Financing

