



UNIVERSAL HEALTH CARE
FOUNDATION OF CONNECTICUT

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**Testimony in Support of
House Bill 5361: An Act Limiting Changes to Prescription Drug Formularies and Lists of
Covered Drugs**

**Universal Health Care Foundation of Connecticut
March 3, 2020**

Universal Health Care Foundation of Connecticut thanks the Insurance and Real Estate Committee for the opportunity to submit testimony in support of House Bill 5361: An Act Limiting Changes to Prescription Drug Formularies and Lists of Covered Drugs.

We support this bill because it protects consumers from harmful changes to the availability or affordability of prescription drugs they rely on.

HB 5361 stops negative changes to a private health insurer's prescription drug formulary during a plan year such as:

- Moving a covered drug to a higher cost-sharing tier;
- Removing a drug entirely from the prescription drug formulary (unless the drug has been found to be unsafe).

And it permits positive changes such as:

- Moving a covered drug to a lower cost-sharing tier;
- Adding a drug to the prescription drug formulary; and
- Removing drugs that have been deemed unsafe.

When individuals as well as employers choose a health plan, they often closely examine the drug formulary to inform that choice. In fact, consumers are constantly encouraged to “shop” for a plan that best meets their needs and those of their family. A prescription drug formulary, particularly for those who rely on medication to maintain their health or stay alive, is often a decision-making factor. An insurer should not be allowed to make a detrimental formulary change to a health plan after a consumer or employer has chosen to enroll. A change like this is akin to breaking a contract and is inherently unfair.

Negative drug formulary changes put peoples' health and quality of life at risk. A 2019 study conducted by the Alliance for Patient Access¹ of non-medical switching of prescription drugs found:

- Nearly 40 percent of patients said the new medicine was not as effective as their original
- Almost 60 percent experienced a complication from the new medication
- Nearly one in 10 reported being hospitalized for complications after the switch
- Two-thirds of respondents said the switch impacted their ability to be productive at work
- More than 40 percent said they weren't able to care for their children, spouses or other family members as needed

Changes like this also contribute to unaffordable out-of-pocket costs. Alarming, a study of Connecticut residents who take prescription drugs regularly found 88 percent are worried they won't be able to afford their medicationsⁱⁱ. Worse, 20 percent said they either did not fill a prescription, cut pills in half, or skipped a dose due to concerns about costⁱⁱⁱ.

Of course, pharmaceutical corporations are the main culprit, as they continue to raise prices regularly – often twice a year. Perhaps passing a bill like this may give insurers more negotiating power to push back against mid-year price increases from drug manufacturers – since they will no longer be able to pass the expense onto their customers. Even if that is a naïve hope, something must be done to break this cycle of skyrocketing prescription drug prices. And one thing is certain - Connecticut should stop allowing health insurers to shift these costs to consumers, *after they are locked into a health insurance plan*. This practice amounts to a “bait and switch” as consumers cannot change their plans until the next policy term.

Last year, a similar bill to this one, HB 6096, passed the house with strong bipartisan support with 122 representatives voting in favor and only 22 voting against. This should be the year that this legislation finally makes it over the finish line. Please support HB 5361.

Universal Health Care Foundation of Connecticut's mission is to serve as a catalyst that engages residents and communities in shaping a democratic health system that provides universal access to quality, affordable health care and promotes health in Connecticut. We believe that health care is a fundamental right and that our work is part of a broader movement for social and economic justice.

ⁱ *A Study of the Qualitative Impact of Non-Medical Switching*, February 2019, Alliance for Patient Access https://admin.allianceforpatientaccess.org/wp-content/uploads/2020/01/AfPA_Qualitative-Impact-of-Non-Medical-Switching_Report_Feb-2019.pdf

ⁱⁱ *Connecticut Residents Worried About High Drug Costs – Express Bi partisan Support for a Range of Government Solutions: Data Brief No. 1*, April 2018, Altarum Healthcare Value Hub Consumer Health Experience State Survey, <http://33mos02k3jgi1zuad217yk0o-wpengine.netdna-ssl.com/wp-content/uploads/2018/10/Hub-Altarum-Data-Brief-No.-1-Prescription-Drug-Prices-in-Connecticut.pdf>

ⁱⁱⁱ *Ibid.*