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Letters to the Editor
Times Union
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To the Editor:

Dr. Scott Snapper’s impassioned call for Governor Cuomo to sign legislation to limit health plans’ use of step therapy policies (“Insurers hurting patients,” August 30, 2016), would have us believe that doctors’ prescribing decisions are always based on what is therapeutically best for each individual patient. However, he doesn’t mention those prescribing decisions are often influenced by pharmaceutical manufacturers’ incentives that frequently result in patients being prescribed new drugs over equally effective generics. Also missing from his commentary is any disclosure that from 2013 through 2015, Dr. Snapper himself received nearly \$879,500 from various pharmaceutical companies for consulting and payments associated to research, according to the Centers for Medicare and Medicaid Services’ Open Payments Data.

Programs such as step therapy often do help with much needed cost saving on ever rising drug prices. With prescription drug spending in 2014 increasing more than 12 percent, cost is a concern. But ensuring quality and safety for consumers is of equal concern. “Newest” doesn’t necessarily mean “safest” and documented cases show heavily promoted drugs rushed to market were later pulled due to adverse effects.

Step therapy can act as a safeguard in insuring clinically appropriate regimens are covered and curtailing abusive prescription utilization. In disputes about what treatment is truly best for a given patient, there are federally mandated exception procedures that can and do override the step therapy policy. The bill before the governor would undermine these policies, giving prescribers carte blanche to determine what drugs are in the best interest of the patient, without adequately defining “best interest.” The concern is the best interest of the patient may too often be subject to which drugs a doctor is being paid to promote.

Sincerely,


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