

Position Statement on Step Therapy and Therapeutic Switching

The Western Pain Society (WPS) has been monitoring the impact of insurer use of step therapy and therapeutic switching and is concerned about the impact of these policies on people with pain and the healthcare professionals that take care of them.

Background

Step therapy - Requires alternate medications, which in some cases includes over the counter medication, be taken before the physician recommended medication is approved for reimbursement. Patients are required to fail numerous other treatment options before the insurer will grant the patient access to the treatment option that was originally prescribed by the patient's physician. This protocol exists in order that cheaper and effective medication be tried before an expensive alternative. Examples include the use of gabapentin before pregabalin or amitriptyline before duloxetine is approved. Step therapy may set the stage for forced "off-label" use of medications. This policy can increase costs for the insurer by delaying care.

Therapeutic switching (or "therapeutic substitution") - The insurer substitutes less expensive medications or alternate medications. These are not the medications prescribed by the doctor and the patient is not aware of the change until he or she arrives at the pharmacy to pick up their medication. These medications may have more side effects and be less effective for the person with pain. Pharmacists' and doctors' offices are put in the unfortunate predicament of confronting insurers in order to provide the patient with the treatment that they prescribed. This is different than "therapeutic interchange," where exchanges are in accordance with previously established and medical staff-approved written guidelines or protocols, within a drug formulary system.

According to the Institute of Medicine's recent report titled, *"Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education, and Research"* 116 million Americans report having chronic pain. Many of these people have endured significant distress in finding appropriate treatment for their pain. Once an effective course of therapy for their pain is found, there is often a limitation placed by insurers on the patient's ability to access this treatment or the length of availability of this treatment.

Step therapy and therapeutic switching occurs in order to save money but without full knowledge of the patient's case and possible other conditions and/or drug interactions that may have factored into the provider's choice of medicine. While offices must contact the insurer to advocate for the pain management option they prescribed, the patient is forced to wait without the recommended medication and/or treatment until the matter is resolved.

Position

The Western Pain Society finds these insurer policies unacceptable and endorses legislative and regulatory policies that put prescribing power back in the hands of the healthcare providers in charge of a patient care. We recognize that insurance companies are trying to cut costs and avoid unnecessary medical interventions, but we must support the healthcare provider's judgment in their patient's care. The Western Pain Society supports the American Medical Association's official statement on this issue:

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...[T]he AMA accepts the concept of therapeutic *interchange*; i.e., the authorized exchange of therapeutic alternates in accordance with previously established and medical staff-approved written guidelines or protocols, within a drug formulary system. ...[T]he AMA clearly differentiates therapeutic interchange from therapeutic *substitution*; i.e. the act of dispensing a therapeutic alternate for the drug product prescribed without prior authorization of the prescriber, and reaffirms its strong opposition to therapeutic substitution in any patient care setting.¹

It is essential that patients receive the drug treatment prescribed by their healthcare providers and do not suffer the needless consequences often caused by step therapy and therapeutic switching or substitution. We ask that insurance companies remove roadblocks and obstacles that prevent people with pain from receiving the appropriate and necessary pain management and treatment options they are prescribed.

The Western Pain Society was founded by John Bonica in 1974, as a result of the first meeting of the International Association for the Study of Pain. The Western Pain Society is a regional society of the American Pain Society (APS). The WPS is the largest society representing 13 western states: Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming.

Our mission is:

- To promote the education of its membership on the subject of pain.
- To encourage research and discussion of causes for and treatment of pain.
- To support the American Pain Society's establishment of standards for the treatment of pain.

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