

TESTIMONY – STATE NON-MEDICAL SWITCHING LEGISLATION **Pennsylvania General Assembly**

House Consumer Affairs Committee Consideration of HB.853 **Speaker:**

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February 18, 2020

Disclosure: I have no disclosures to make regarding my testimony submitted here today. The Global Healthy Living Foundation accepts grants and charitable contributions from pharmaceutical companies, the government, private foundations and individuals. The organization has received scientific briefings from pharmaceutical companies, as well as from our independent medical advisory board.

Good Morning Mr. Chairman and Committee Members.

My name is Tien Sydnor-Campbell. I'm a volunteer patient advocate and member of the Global Healthy Living Foundation's 50-State Network. I have been a resident of Philadelphia for 19 years. My legislators are Representative Stephen Kinsey and Senator Sharif Street. I want to thank you for allowing me to submit testimony today in support of the passage of House Bill 853 which will reform the insurance practice called "non-medical switching".

I have been living with rheumatoid arthritis for nearly a decade. Rheumatoid arthritis, or RA, is an inflammatory autoimmune disease that causes inflammation, pain in the joints and also affects the eyes, heart and lungs. It is the most common form of autoimmune arthritis and it affects more than 1.3 million Americans, including thousands of fellow Pennsylvanians, every day.

For the last three years, I have been able to successfully treat my condition with the same medication. Before that, for years, I sequentially tried different complex biologic medicines, which are designed to reduce inflammation and prevent long term joint damage. Everyone responds to these medicines differently and despite best efforts, my pain was always with me. Ultimately, the pain I experienced pushed me into early retirement and forced me to give up things I love, like swimming, biking and competing in another triathlon.

RA has impacted my life in other ways, too. As a medically-retired psychotherapist who specialized in traumatic pain management, I was acutely aware of the mental and emotional toll chronic pain can take. I, too, experience increased anxiety and depression about what's happening to my body.

For chronic disease patients and their providers, it can take countless hours, months or sometimes years to find the right treatment plan that works. That's why it's vital during the





annual enrollment season for chronic disease patients to carefully evaluate health plans to pick the plan that best covers their conditions and medications that they can afford. Once the contracts are signed, patients are then responsible for our copays, deductibles, and premiums. Unfortunately, the insurance companies are not under the same obligation.

When patients like me finally find a treatment plan that effectively reduces our pain and allows us to live as close to normal as possible, it is scary and alarming to receive letters from our health plans telling us that we are either required to make a change to our treatment plan or pay more out-of-pocket for our current prescription simply because they changed their formularies. It is particularly upsetting and, I think, unethical, when a formulary is altered in the middle of a plan year. I can't leave my contract, but the insurance company can change its obligation to me at will. This scenario happened to me this past year but, thankfully, due to my physician's intervention and the submission of extra paperwork to declare that it was medically necessary for me to remain on my drug, I was able to. Others haven't been as fortunate..

The bill under consideration, HB 853, is about protecting patients. It guarantees that health care treatment is focused on the patient, not the profit. GHLF and I hope that you will consider people living with complex autoimmune diseases, like myself, when voting for HB 853.

Thank you for your time and attention.



