## **Testimony of Christian Thomas, MD**

Chair Elect of the American Society of Clinical Oncology's Clinical Practice Committee Medical Director of Clinical Research, New England Cancer Specialists Medical Oncologist and Hematologist

## In Support of LD 178 – Step Therapy Reform for Advanced Metastatic Cancer

Distinguished members of the committee. My name is Dr. Christian Thomas. I am a Medical Oncologist and Hematologist, Chair Elect of the American Society of Clinical Oncology's Clinical Practice Committee, and the Medical Director of Clinical Research at New England Cancer Specialists. Thank you for the opportunity to speak in strong support of LD 178, which would prohibit health insurers from requiring patients with advanced metastatic cancer to undergo step therapy—forcing them to fail on a prescribed medication before gaining access to other FDA-approved treatments.

I have dedicated my career to ensuring that patients receive timely, personalized, and effective cancer care. However, step therapy policies undermine this mission by placing barriers between patients and the treatments that their doctors have determined are best for them.

One of the most frustrating aspects of step therapy is that the dictated "first-step" drug is often more expensive and less effective than the treatment originally prescribed by the oncologist. This makes no sense from a clinical perspective and can exacerbate both the medical and financial burdens on patients. Cancer is not a one-size-fits-all disease, especially at the advanced metastatic stage. Each patient's cancer behaves uniquely, requiring highly tailored treatment plans. By dictating the type and order of treatments through step therapy, insurers strip physicians of the ability to make these critical, individualized decisions.

For my patients, delays or deviations from their care plan due to step therapy can mean disease progression, worsened prognosis, and even death. We cannot afford to wait for a drug to "fail" before trying what is known to work better. These delays are unacceptable in a fight where every day matters.

As the Medical Director of Clinical Research at New England Cancer Specialists, I work closely with our partners at the Dana-Farber Cancer Institute to bring leading clinical trials to patients here in Maine. Clinical trials offer innovative treatment options that could extend or improve quality of life for patients with limited options. However, step therapy works against the choice and access that I believe all patients deserve. It creates barriers that prevent patients from receiving the full benefit of advancements in oncology research.

I am also deeply concerned about the financial toxicity of cancer treatment. As an advocate for both patients and physicians, I have worked to keep the cost of care low without compromising quality. Step therapy often has the opposite effect—it increases costs due to higher medical utilization when patients fail on inadequate treatments, leading to complications and longer hospital stays.

LD 178 represents an essential step toward protecting patients from these harmful policies. It will allow physicians like myself to focus on providing the right care at the right time, without the interference of rigid, and perhaps, profit-driven protocols. This bill empowers doctors and patients to make the best treatment choices together—choices based on medical need rather than financial considerations dictated by insurers.

I respectfully urge this committee to support LD 178. On behalf of my patients, colleagues, and families affected by cancer across Maine, thank you for your time and attention. I am happy to answer any questions you may have.

Thank you.

Christian Thomas New England Cancer Specialists LD 178

Unable to attend in person due to travel. Submitting the attached testimony in support of LD178

Christian Thomas, MD