

Testimony of Chiara Battelli, MD

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

Thank you for the opportunity to talk about the merits of LD 178. My name is Dr. Chiara Battelli, and I am the President of New England Cancer Specialists (NECS) as well as a medical oncologist focused on Breast Cancer. On behalf of the oncologists at NECS, and our Center for Breast Health, I submit my testimony.

We serve patients battling advanced metastatic cancer across our communities. We are here to express our strong support for this bill, which seeks to prohibit health plans from requiring patients with advanced metastatic cancer to fail a prescribed drug before gaining access to another FDA-approved medication.

Step therapy, commonly referred to as "fail-first," forces patients to try and fail on a preferred, often generic, drug before insurers will cover the medication initially prescribed by their oncologist. While this policy aims to control costs, it does so at the expense of patient care, putting lives at greater risk by delaying access to effective, timely treatment. Moreover, this "fail-first" therapy may cause unnecessary toxicity before using a drug that potentially has less side effects.

The Unique Needs of Advanced Metastatic Cancer Patients

Advanced metastatic cancer is not a condition where standardized, one-size-fits-all treatment protocols are appropriate. Metastatic breast cancer, for example, is an aggressive disease with a stark prognosis when inefficiently managed. While early-stage breast cancer boasts a five-year survival rate of 99%, that rate plummets to just 30% for stage four metastatic cases. However, when unencumbered by step therapy, we have seen remarkable outcomes and improvements to quality of life for metastatic patients. Treatment decisions must be personalized and based on the expertise of oncologists and the needs of each patient.

Delays in appropriate care due to step therapy protocols can be unbearable emotionally for a patient who is counting days with loved ones. The physical impact of the delay can be catastrophic. For a patient whose disease may be progressing rapidly, failing a drug that insurers prefer could lead to irreversible damage or worse—death.

The Burden on Patients and the Healthcare System

Step therapy not only harms patients by delaying necessary care but also places an emotional and physical toll on families. Additionally, evidence shows that these protocols can increase

overall costs to insurers by as much as 37% due to the complications and higher medical utilization that result from inadequate treatment.

Our patients deserve fair and timely access to the treatments that can best manage their condition. They should not be subjected to delays caused by policies designed to control costs without regard for their individual medical needs.

The Importance of LD 178

LD 178 will ensure that patients with advanced metastatic cancer can access the most appropriate medications without having to fail other treatments first. By passing this bill, Maine will join a growing number of states that recognize the importance of eliminating harmful step therapy practices for patients with life-threatening conditions.

As physicians, we take an oath to do no harm. In no way is step therapy for the benefit of patients.

As oncologists, we see the struggle of living with cancer and the tragedy of metastatic disease each day. We urge this committee to pass LD 178 to give physicians the ability to personalize medicine based on the best available therapies, and protect the lives of those living with advanced metastatic cancer. These patients and their families have no time to waste.

Thank you for your consideration. I am available to answer any questions you may have.

Chiara Battelli
New England Cancer Specialists
LD 178

Due to travel, I am unable to testify in person. Please accept the attached testimony in favor of LD 178.