



Kristi Mathieson

26 Haley Road
Kittery, ME 03904
Cell: (603) 969-7496

Kristi.Mathieson@legislature.maine.gov

HOUSE OF REPRESENTATIVES

2 STATE HOUSE STATION
AUGUSTA, MAINE 04333-0002

(207) 287-1400

TTY: MAINE RELAY 711

Testimony of Representative Kristi Mathieson presenting

LD 178, An Act Regarding Coverage for Step Therapy for Advanced Metastatic Cancer *Before the Joint Standing Committee on Health Coverage Insurance and Financial*

Good morning, Senator Bailey and esteemed colleagues on the Health Coverage Insurance and Financial Services Committee. I am Representative Kristi Mathieson representing House District 151, which is Kittery. Thank you for your time today. It is my honor to present to you **LD 178, An Act Regarding Coverage for Step Therapy for Advanced Metastatic Cancer.**

We all have a loved one's story, or possibly our own personal story, around cancer. I lost two dear friends both at very early ages to cancer. One passed from breast cancer and one from lung cancer. Metastatic breast cancer is extremely difficult. Period. It's important not to sugarcoat this, these women deserve to be completely seen and heard, including the dark painful and uncomfortable feelings that come with this diagnosis. They need support and to not fight to receive medically necessary, provider prescribed care.

Step therapy, also known as "fail first" therapy, requires patients to try and fail on treatments before accessing the medication originally prescribed by a doctor. This approach is particularly harmful for metastatic breast cancer (MBC) patients because it delays effective treatment (reducing patients chances of survival and quality of life), increases suffering and side effects from ineffective treatments, ignores the expert provider's treatment recommendations and adds additional stress to an already extremely stressful time.

LD 178 is simple: it prohibits step, or "fail first," therapy for the diagnosis of metastatic breast cancer.

Why is this bill needed?

While metastatic cancer can't be cured, it can be treated. Treatment focuses on extending life and maintaining quality of life.

District 151: Kittery

Some stats around metastatic cancer:

- Metastatic or stage IV cancers represented 18% of all estimated diagnoses but 48% of all estimated cancer-related deaths within 5 years.¹
- A recent study determined that even a four-week delay of cancer treatment is associated with increased mortality, and more than half of clinicians report difficulty obtaining approval for prescriptions of their requests.²
- A recent study examining commercial insurers' use of step therapy for specialty drugs found that only about one third of protocols aligned with clinical guidelines.³
- A recent Avalere analysis shows that after a full plan year, payer costs were 37% higher in the scenario with step therapy and a negative outcome compared to the scenario with no step therapy.⁴

Why does this bill include associated conditions?

An associated condition is defined as the symptoms or side effects associated with advanced, metastatic cancer or its treatment and which, in the judgment of the health care practitioner, further jeopardizes the health of a patient if left untreated. Unfortunately, all treatments have some side effects that have to be managed. Often metastatic breast cancer metastases in the bones so bone strengthening drugs are used to help prevent bone fractures and reduce bone pain. Additional side effects that would require medication can include nausea, neutropenia, diarrhea, depression and pain. Often, these medications have step protocols that require the patient to try a preferred medication over the most effective and appropriate treatment.

The AMA noted the presence of comorbidities, potential drug to drug interactions or patient intolerance to certain treatments often necessitate the selection of a specific course of treatment, as opposed to following a prescribed step protocol. Most step therapy protocols rely on generalized information about the patient and their treatment, as opposed to considering unique patient experiences, previous responses and comorbidities.

I ask you to support LD 178 to ensure patients dealing with this difficult diagnosis receive medically necessary and effective treatments. It is so important when treating these patients as delays or deviations can be deadly.

Thank you for your time. I am happy to take questions, but those following my testimony will very likely be able to answer the medical questions better than myself.

¹ <https://aacrjournals.org/cebpa/article/29/5/895/72197/Projected-Reductions-in-Absolute-Cancer-Related>

² www.acponline.org/sites/default/files/acp-policy-library/policies/step_therapy_nonmedical_switching_prescription_drugs_policy_2020.pdf

³ <https://pubmed.ncbi.nlm.nih.gov/34724434/>

⁴ <https://avalere.com/insights/step-therapy-can-lead-to-higher-oop-costs-for-crohns-disease-patients>