



Alliance for Patient Access

TEXAS CHAPTER

Following COVID-19, Insurers Must Prioritize Patients Over Profits

Jaya Kala, MD, Physician and Parent

When COVID-19 hit, health insurers took unprecedented steps to suspend arbitrary delays, limit authorization paperwork, and even waive co-pays in some instances. Those moves dramatically expanded affordable access to health care, but it shouldn't take a pandemic for insurers to put patients first.

My hope is that these actions are only the beginning of a new era of a more patient-centered approach in insurers' coverage policies. As a physician and a mother, I have seen countless instances of profits dictating insurance practices, ultimately harming patients by limiting their access to care.

I think specifically of when our insurer denied coverage for my son's medication. Sajal, who has Cerebral Palsy, has taken medication since birth to control seizures and spasticity. However, in 2017, I submitted a refill request and was, inexplicably, denied. I spent hours on the phone with pharmacists and argumentative insurance company representatives.

I finally realized that it was the number of individual pills that concerned them, not the dose. I asked if coverage would be approved if he got the same medication but in larger pills. I could then split the pills in half to yield the right dosage; incredibly, their answer was yes. The senselessness of the incident blew my mind. This had nothing to do with safety or patient outcomes. It actually made treatment harder because the crushed tabs often clogged his gastronomy tube.

The challenge that Sajal faced is what's known as non-medical switching. This occurs when an insurance company denies coverage for a physician-prescribed medication, instead forcing the patient toward an alternative drug or formulation that boosts the insurance company's bottom line. This phenomenon underscores how families like mine discover that an insurance company is making decisions that play with our lives for no apparent reason other than, I must assume, profit.

This is not the only time insurance practices have adversely affected my son's health.

A few years ago, denial for his ongoing physical therapy resulted in a worsening of his condition and an injury to his hip. On another occasion, we waited over a year for approval of the elevator he needed to access his bedroom. It was denied because of safety concerns supposedly related to tornados. Keep in mind, we live in Houston, where tornados are hardly a common occurrence. Only after we persisted – after we spent hours complying with the insurers' endless demand for paperwork – did we find a solution.

I offer these examples to highlight how inconsistent and haphazard health insurance coverage and approval can be. Far more than a nuisance, these challenges are a detriment to our health care system and a danger to patients.

If health care is not patient-centered, it hardly deserves to be called "care" at all. Other facets of the health care system should adopt this same mentality, including insurers which must put patient care ahead of their financial gain. Not everyone has a parent or a caregiver with the gumption, time and understanding to

fight through the insurance denial process. In those cases, patients don't just lose out on patient-centered care. Many give up, resigning themselves to no care at all.

COVID-19 has brought health care to the forefront for physicians, patients and policymakers. In 2019, the Texas legislature proposed two bills – SB 580 and HB 2099 – that would have ended non-medical switching for Texans with chronic conditions. This is the type of legislative action I would like to see policymakers support at both the state and federal levels, as they – and we, their constituents – must answer the call for patient-centered care.

Insurers' pandemic responses hint at what health coverage and health care could be like in this country. Now's the time to chase that vision by supporting policies that expand patient-centered care – assuring access, improving care and serving patients of all walks of life.

Jaya Kala, MD, is a Diplomate of the American Board of Internal Medicine in Nephrology. She lives in Houston, Texas.

The Alliance for Patient Access is a national network of policy-minded health care providers advocating for patient-centered care.

AllianceforPatientAccess.org

