Principles for Promoting Patient-Centered Health Care



Let My Doctors Decide Action Network's (LMDD Action Network) is working to promote patient-centered health care by advocating for policies to eliminate the high costs, access barriers, and harmful restrictions that keep patients from accessing their doctor-recommended treatment plans. We urge lawmakers to eliminate third-party access barriers and ensure health equity, as outlined in our policy principles.

EMPOWER PATIENT-DOCTOR DECISION MAKING

Far too often in our health care system, patients must clear hurdles, dodge obstacles, and perform unnecessary tasks to access doctor-prescribed treatments. Unfortunately, business decisions made in corporate headquarters, including insurers, pharmacy benefit managers (PBMs), and alternative funding program (AFP) vendors, are causing immeasurable and needless harm to patients and families.



We believe decision making about treatments for chronic, rare, and other complex medical conditions must be left up to patients and their trusted health care professionals, not insurance companies or other corporate entities.

2 ELIMINATE THIRD-PARTY BARRIERS

Rising out-of-pocket costs and delays in approval for critical care and wellness have detrimental – and completely avoidable – effects on patients and the broader health care system. Third party vendors pushing AFPs manipulate lack of coverage for medications and exploit loopholes in patient assistant programs to siphon funds intended for low-income patients.

AFPs, copay accumulators, prior authorization, rebate walls, and other access barriers impede patient access to doctor-prescribed medicines. Their tactics force patients and their health care providers to navigate complex, time-consuming drug coverage mazes and take advantage of programs that are built to assist underserved communities.



We strongly urge lawmakers to enact policies that curb the increasing activity of these harmful practices. We must protect the ability for patients and doctors to be the ultimate medical decisionmakers for individualized plans without preventable obstacles.

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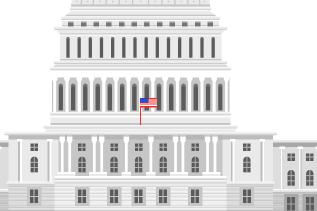
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ENSURE HEALTH EQUITY THROUGH ACCESS

Business tactics should never undermine doctor's orders when it comes to patients' access and timing of treatment – yet that's the reality most Americans face today. Practices such as step therapy and prior authorization lead to delays in treatment (or worse, outright denials), tangle the system, and subvert what should be straightforward, equal access to quality care.

According to Let My Doctors Decide survey research, more than 70% of patients are concerned business tactics, like prior authorization policies, can override doctors' recommendations by allowing insurance companies to control treatment decisions. That's before third parties profit off other schemes, such as rebate walls, copay assistance, and patient assistance programs.

The impact of these practices disproportionately affects minority and low-income status patient populations.



We call on policymakers to adopt changes at the federal and state levels to help ensure health equity through access to patient-centered care. While this requires that lawmakers, industry leaders and stakeholders play their part, it's clear that insurance barriers have a direct impact on the ability of all Americans - and, in particular, underserved communities - from accessing the care that they need.

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Let My Doctors Decide Action Network 501(c)(4) brings together patient advocates, providers, experts, and other health care leaders to advance meaningful policy reforms to eliminate unnecessary health care access barriers.

We believe patients and their trusted providers should be empowered to make treatment and other care decisions, without restrictions imposed by insurance companies, their PBMs, and other third-party entities that interfere with the doctor-patient relationship.



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