

## **2022 Meeting Summary**

The Alliance for Patient Access hosted its annual Neurological Diseases Working Group meeting on April 30, 2022. Clinicians, advocates and other stakeholders convened to discuss policies affecting people living with neurological conditions, including Alzheimer's and dementia and movement disorders.

### **Utilization Management**

Members affirmed that pairing patients early with the best medications to address their conditions is best practice for treatment. However, members said, payers' utilization management tactics distract providers, delay patients' access to medications and could prolong symptoms and suffering.

#### **Step Therapy**

Clinicians expressed concern that insurers' step therapy, or "fail first" policies, are delaying or limiting access to appropriate neurological care. One noted that these particularly impact patients who switch insurance companies during their course of treatment, as they're often forced to repeat the "fail first" procedure.

#### **Prior Authorization**

Clinicians unanimously said that prior authorization policies are a significant hurdle to getting patients on needed medications. This, one clinician noted, is especially challenging in long-term care facility settings, as prior authorization must be undertaken to prescribe resident patients medications outside the facility's formulary. Some raised concern that prior authorization requirements are exacerbating provider burnout.

#### **Re-Authorization**

Several clinicians said re-authorization practices impinge treatment for patients with ongoing conditions. One invoked a patient with epilepsy as an example. The patient, he stated, responded very well to a certain medication, having no new seizures. Every January, re-authorization has been required for the patient's medication. Last year, delays with the insurance company left the patient without her medication for nearly two months.

#### **Specialty Tiers**

Members explained that health plans sometimes deny patients coverage of new-to-market, FDA-approved medications on grounds that the medication's efficacy hasn't been well established. Even in instances when plans approve specialty tier medications, one member noted, it's still unaffordable to many patients.



# Care for Patients with Alzheimer's and Dementia

Members discussed recent decisions by the Centers for Medicare & Medicaid Services to restrict coverage for Alzheimer's-modifying therapies, particularly for medications approved through the FDA's accelerated approval pathway. Per the new restrictions, patients can only access these therapies by enrolling in clinical trials.

Members raised concerns about patients' treatment options now and in the future because of these restrictions. Concern was also raised that the CMS decision could limit the physician-patient relationship.

Clinicians also discussed two other factors impacting care for patients with Alzheimer's and dementia: polypharmacy and residence in long-term care facilities. For older patients in particular, using a single innovative medication can be simpler and more effective than using multiple medications in combination, one clinician noted. Another noted that Alzheimer's and dementia patients residing in long-term care facilities are at greater risk of loneliness. depression and hypoactivity, and as a result, experience cognitive decline much more quickly than should be expected.

#### **Needs Assessment**

ICD-10 coding challenges, the Beers criteria, and CMS Star Ratings were also noted as having an impact on patient access. Clinicians in attendance indicated interest in advocating on these issues.

# Next Steps & Getting Involved

The working group discussed plans for producing educational materials in the coming year to expand public awareness and outreach.

To learn more about AfPA's Neurological Diseases Working Group's advocacy efforts and membership, contact Elizabeth Simpson at esimpson@ allianceforpatientaccess.org.

