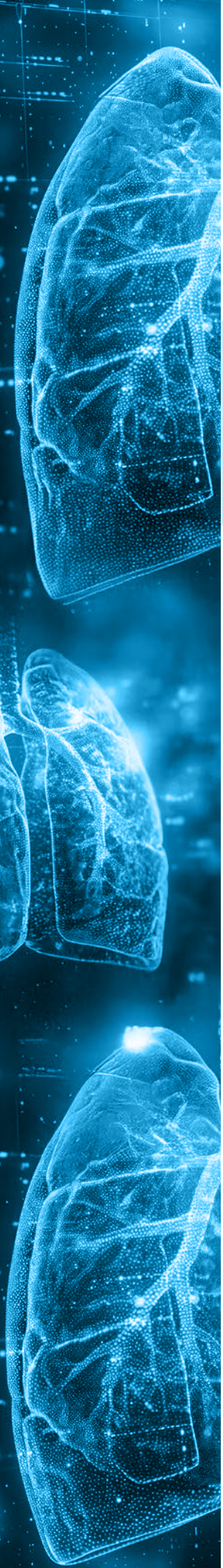


Respiratory Therapy Access Working Group

2025 MEETING SUMMARY

The Alliance for Patient Access' Respiratory Therapy Access Working Group convened on September 12-13, 2025 in Washington, DC to discuss emerging access challenges. Clinicians from across the country described how insurer-imposed barriers threaten quality of care and patient outcomes.

UTILIZATION MANAGEMENT

Prior Authorization and Reauthorization

Clinicians expressed frustration over health plans' consistent request for prior authorization but lack of knowledge regarding respiratory treatments and their various functions. In respiratory, even changing the mode of administration requires a brand new prior authorization request.

Reauthorization also poses a barrier to effective treatment. For patients with chronic respiratory diseases, insurers request reauthorization of medication they will need long term. One clinician said, "This condition will never go away, so why do they keep putting patients and doctors through this?" Participants agreed that if a patient's condition is well-managed, reauthorization is unnecessary and runs the risk of coverage denial.

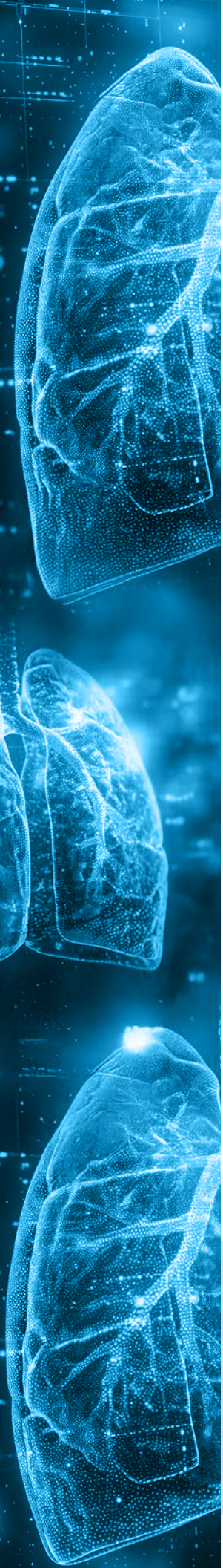
Step Therapy

Meeting participants agreed that step therapy is an ongoing barrier to access. Patients are forced to try and fail other treatments before they can receive their prescribed medication, which undermines clinician expertise. One clinician said, "Insurance doesn't allow for us to make decisions that are best for our patients." This roadblock can also lead to worsening symptoms for respiratory patients.

Non-medical Switching

Non-medical switching remains a widespread issue in respiratory health. A clinician recounted a time when their patient was switched from one medication to another that wasn't approved for their condition. The anecdote revealed a consensus among clinicians that insurers make decisions based on cost and not what's best for patients.

PHARMACY BENEFIT



MANAGERS

Meeting participants discussed the challenges they faced with the growing impact of pharmacy benefit managers, or PBMs. Originally created to process claims and set reimbursement rates, PBMs have developed to become more involved in clinical decisions. Clinicians shared how decisions made by PBMs often impede proper care for patients and undermine their clinical expertise. These roadblocks created by PBMs are costly for patients with chronic respiratory conditions.

BARRIERS TO ACCESSING BIOLOGICS THERAPY

Biologics have changed the way clinicians can tailor treatments to respiratory patients. However, clinicians expressed the roadblocks they face when trying to prescribe them. Biologics are more expensive than traditional methods and can incur extra cost and paperwork. "It's an unfunded mandate when you have to hire additional staff to do the prior approval for you," said a clinician. Because of their expensive nature, they are often excluded from insurer formularies.

BARRIERS TO COPD TREATMENT

Despite COPD being the third leading cause of death worldwide, clinicians discussed the lack of awareness surrounding it. One clinician said, "Think of the diagnosis as step one. Step two would be getting the word out there." Meeting participants agreed that education and awareness are vital to diagnosing and treating COPD earlier. However, the other half of the battle is access to treatments. Patients with COPD struggle to get the medication and non-pharmacological treatments they need. It's critical that policymakers prioritize COPD as a public health issue.

NEXT STEPS

Meeting participants were eager about the opportunity to use their clinician voice on behalf of their patients. Participants offered ideas for new educational resources and expressed interest in legislative engagement.

GET INVOLVED

To learn more about AfPA's Respiratory Therapy Access Working Group, visit
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or contact Isabelle Logsdon at
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