



**Alliance for
Patient Access**

May **, 2026

The Honorable Mike Johnson
Speaker, House of Representatives
568 Cannon House Office Building
Washington, DC, 20515

The Honorable Hakeem Jeffries
Minority Leader, House of Representatives
2433 Rayburn House Office Building
Washington, DC 20515

The Honorable John Thune
Majority Leader, Senate
511 Dirksen Senate Office Building
Washington, DC, 20510

The Honorable Charles Schumer
Minority Leader, Senate
322 Hart Senate Office Building
Washington, DC 20510

Re: Support for the Safe Step Act – H.R. 5509 / S. 2903

Dear Speaker Johnson, Majority Leader Thune, Minority Leader Jeffries and Minority Leader Schumer:

On behalf of the Alliance for Patient Access (AfPA), we are writing in support of the Safe Step Act (H.R. 5509/S. 2903). This legislation will protect the clinician-patient relationship by establishing a clear and timely exceptions process for step therapy protocols in employer-sponsored health plans, ensuring patients have a pathway to access the treatments their clinicians have determined are most appropriate for them.

Founded in 2006, AfPA is a national network of policy-minded health care providers who advocate for patient-centered care. AfPA supports health policies that reinforce clinical decision making, promote personalized care and protect the clinician-patient relationship. Motivated by these principles, AfPA members participate in clinician working groups, advocacy initiatives, stakeholder coalitions and the creation of educational materials.

Step therapy is a health insurance utilization management tool used to dictate a specific course of care when accessing prescribed medicines. Sometimes referred to as “fail first,” step therapy protocols require patients to try and fail on one or more insurer-preferred medications before a patient can access the medication prescribed by their health care provider. The step therapy process requires patients to work through health plan-preferred medications with the goal of maximum insurer cost savings. This leads to delays in accessing other treatments and can prevent patients from getting the medications prescribed to them by their clinician. Delays in care may produce negative health outcomes and increase the burden on both patients and clinicians.

A recent American Journal of Managed Care study including over 500 physicians across the country found that 79% reported step therapy as a major or significant barrier to clinical and patient care, and 73% of physicians favored requiring step therapy be based on science.¹ More than half (52%) of the physicians reported spending between 6 to 21 hours per week on paperwork related to health insurance utilization management, 67% had experienced burnout at some point in their career, and 64% indicated that utilization management practices such as step therapy had been a contributing

¹ <https://doi.org/10.37765/ajmc.2024.89626>

factor to burnout. These findings indicate that utilization management practices such as step therapy have a significant detrimental impact on physicians and the patients they care for.

Individual states have taken the lead in protecting patient access for the insurance plans they regulated. Currently, 40 states have enacted step therapy reform legislation to protect patients and providers from inappropriate step therapy protocols.² However, self-insured employer health plans are exempt from state law under the Employee Retirement Income Security Act (ERISA). Because most Americans receive their insurance through their employer, a critical gap in patient protections remains at the federal level. The Safe Step Act would close this gap by establishing a meaningful step therapy exceptions process for the employer-sponsored plan segment.

The Safe Step Act would improve patient access through the establishment of a clear and accessible exceptions process that ensures patients and providers understand how to secure an exemption from formulary step requirements. Importantly, the legislation would require exception requests to be granted in a timely manner when the formulary-preferred medicine:

- (1) has previously been tried and found ineffective for the patient;
- (2) is expected to be ineffective and delaying care risks serious harm;
- (3) is contraindicated or is likely to cause an adverse reaction for the patient;
- (4) is expected to prevent the patient from performing daily activities or fulfilling work responsibilities; or
- (5) when the patient is already stable on a medication.

The Safe Step Act improves patient access while still allowing employer health plans to use appropriate step therapy. However, by requiring a clear and timely exceptions process grounded in patient-specific clinical circumstances, the legislation would reduce unnecessary delays in care, ease the administrative burden on patients and providers, and support a patient-centered system of care.

On behalf of patients across the country and the Alliance for Patient Access, we urge your support for the Safe Step Act (H.R. 5509/S. 2903), to reform step therapy protocols in employer-sponsored health plans and ensure patients can have timely access to the treatments they need.

Sincerely,

[Clinician signers here]

² <https://steptherapy.com/step-therapy-legislation-by-state/>