The Massachusetts Medical Society (MMS) is a professional association of over 25,000 physicians, residents, and medical students across all clinical disciplines, organizations, and practice settings. The Medical Society is committed to advocating on behalf of patients, to give them a better health care system, and on behalf of physicians, to help them provide the best care possible. The Massachusetts Medical Society is pleased to provide its support to H.1069/S.642, An Act Empowering Health Care Consumers. The Medical Society strongly supports greater transparency of health plan formularies and believes this is an important step in facilitating shared decision-making between patients and physicians.

This bill would require that every health insurance provider post the formulary for the health plan on the carrier’s web site in a manner that is accessible and searchable by enrollees, potential enrollees, and providers. It would also require insurers to update the formulary within 24 hours of making changes; and include a standard set of information, especially information with respect to cost sharing and coinsurance. MMS has formal policy calling for such transparency.

*It should be the responsibility of the insurer to provide transparency and full disclosure of formulary medications, acceptable alternatives, covered products and services, co-pays, and restrictions in electronic format to facilitate a less costly, more patient-centered, more expedient, and more satisfying method of pre-authorization.*

*The MMS supports the goal of creating a single, comprehensive, online, EMR-accessible, cross-referenced formulary list arranged by drug category that will allow all stakeholders, including the pharmacy, to clearly show which medication of the same class is approved by each individual patient’s insurance plan. The MMS will advocate that all payors make all their formularies available online to all beneficiaries, and their physicians and pharmacists, in a format that is searchable, updated monthly, and includes categorization by indication.*

*The MMS will advocate for legislation to require that all payors post all their formularies online to all beneficiaries, and their physicians and pharmacists, in a format that is searchable, updated monthly, and includes categorization by indication.*

This issue is important to the Medical Society, as our physician members routinely lament the time they spend determining with a patient the best prescription or course of treatment, which is often deemed moot when they subsequently receive a call from a pharmacy indicating a drug is not contained on the patient’s formulary. At present, physicians often have these initial conversations with a patient in the exam room blind to the specific formulary of the patient, especially in light of the proliferation of different formularies across carriers and plans. Since physicians’ offices often do not learn that a prescription is not
on a formulary until they receive a call from a pharmacy, determinations of “next best options” often occur without the patient present.

In addition, formularies do not only indicate which drugs are covered, but which drugs are covered at which costs to patients. With health plan design trends toward utilizing patient cost-sharing as a means of controlling costs, through high-deductibles, tiering, etc., the prescribing of out-of-pocket drugs, especially for chronic disease management, often must take cost into account. The high cost of prescription drugs is deeply concerning in and of itself, undermining physicians’ ability to provide the best clinical care possible and directly impacting the health of patients. Regardless, transparency for insurance formularies would greatly improve the efficiency of treatment conversations with patients.

In addition to simply indicating which drugs are on a given formulary, and what costs are associated with them, the Medical Society urges amendment to this important idea to also show which drugs on a formulary are subject to a prior authorization. This would allow physicians to anticipate when additional paperwork may be necessary before a patient can receive the prescription medication and could reduce delays in patients receiving important medications. We hear from physicians the frustration of prescribing an urgent drug towards the end of a workday, only to find when the patient arrives at the pharmacy (after the physician office is closed) that a prior authorization is required. For some prescriptions, this can be an annoyance and require a 12-hour delay in medication. For other prescriptions, the delay can result in additional discomfort, or worse, be the barrier that leads a patient to abandon the treatment altogether.

For these reasons, the Medical Society urges a favorable discharge of this bill to promote transparency of drug formularies, which will improve physicians’ ability to treat our patients.