



March 16, 2017

The Honorable Ann Rivers
Senate Health Care Committee
435 J.A. Cherberg Bldg.
P.O. Box 40466
Olympia, WA 98504

The Honorable Eileen Cody
House Health Care & Wellness Committee
257A John L. O'Brien
P.O. Box 40600
Olympia, WA 98504

Dear Chair Rivers and Chair Cody:

On behalf of the Epilepsy Foundation and our affiliate in Washington, Epilepsy Foundation Northwest, we urge you to support Senate Bill 5160 and House Bill 1211. These bills would prevent insurers from changing the terms of health plans, as they relate to prescription drug coverage, mid-year. Without this bill, health plans are free to end or change coverage for a particular medication mid-year, leaving beneficiaries with higher out-of-pocket costs or no coverage at all for a therapy. This is exceptionally concerning for individuals with epilepsy because epilepsy medications are not interchangeable and they rely on them to maintain seizure control.

The Epilepsy Foundation is the leading national voluntary health organization that speaks on behalf of more than 3 million Americans with epilepsy and seizures. We foster the wellbeing of children and adults affected by seizures through research programs, educational activities, advocacy, and direct services.

Epilepsy is a medical condition that produces seizures affecting a variety of mental and physical functions. Approximately 1 in 26 Americans will develop epilepsy at some point in their lifetime. For the majority of people living with epilepsy, epilepsy medications are the most common and most cost effective treatment for controlling and/or reducing seizures, and they must have meaningful and timely access to physician-directed care. Epilepsy medications are not interchangeable and treatment of epilepsy is highly individualized. There is no "one size fits all" treatment option for epilepsy, and the response to medications can be different for each person. Maintaining seizure control with minimal side effects requires careful evaluation and monitoring by physicians and their patients. To change, limit, or deny access to medications could be extremely dangerous.

SB 5160 and HB 1211 would be an important protection for health care consumers. Individuals select a plan based on the coverage details and it is unfair that insurers can unilaterally change provisions of a plan throughout the year. Insurers express the need to change coverage for medications mid-year to accommodate for changes in the market; however, these costs should not be passed onto the beneficiaries who have contracted to purchase a plan based on specific terms. Beneficiaries cannot change plans mid-year based on these coverage changes by insurers.

This issue is particularly important to the epilepsy community because people living with epilepsy who have their medications switched, or who experience a delay in accessing their medication, are at a high risk for developing breakthrough seizures and related complications including death. Limits to physician-directed care can also significantly increase medical costs related to preventable seizures, along with lost wages and productivity, not just for the individuals living with epilepsy but also their families and communities.

The Epilepsy Foundation and the Epilepsy Foundation Northwest urge you to support SB 5160 and HB 1211. Please do not hesitate to contact Angela Ostrom, Chief Legal Officer & Vice President Public Policy, at 301-918-3766 or aostrom@efa.org with any questions or concerns.

Sincerely,



Geoff Ball
Executive Director
Epilepsy Foundation Northwest



Philip M. Gattone, M.Ed.
President & CEO
Epilepsy Foundation