



Global Healthy Living Foundation
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Darren Rogers
President/CEO
BCBS TX
1001 E. Lookout Dr.
Richardson, TX 75082

Dear Mr. Rogers:

I am writing to you today from the Global Healthy Living Foundation (www.GHLF.org), a 501(c)(3) non-profit dedicated to improving the quality of life of people living with chronic disease. I speak on behalf of the more than 50,000 members of CreakyJoints.org, the GHLF's arthritis patient support and advocacy network and largest patient constituency.

Nearly 75 percent of our members have Rheumatoid Arthritis, and I would like to specifically address their concerns regarding PRIME's "fail first" policy, or step therapy, regarding the use of biologics in the treatment of this debilitating disease. We urge you to consider the effects of this practice, which will affect BlueCross BlueShield plans in Texas, on patients and PBM's alike.

Biologics, as you know, have changed the world for people with Rheumatoid Arthritis, but not all biologics work for everyone. We receive comments from members across the country, including Robin C. from San Antonio, who describes her experiences with a biologic as miraculous. "I finally have my life back," she said in an unsolicited message received recently.

If I understand your policy correctly, future patients like Robin covered by BlueCross BlueShield of Texas will not have the opportunity to decide, with their physician, the best course of treatment. They will instead be forced to fail on adalimumab (Humira®) before a possibly more effective treatment can be employed. Our medical advisory board, consisting of rheumatologists and other healthcare providers from around the country, regularly inform us of the fact that the effects of each drug vary for the individual, and it is the informed physician-patient relationship which ought to prevail for the best medical outcome.

You can understand how our members may interpret your policy as arbitrary, uncaring and needlessly intrusive in this doctor-patient relationship. Of course, we understand and support efforts to cut costs in today's economic climate. One of our most frequent requests from members is advice on how they can reduce their medical costs, including spiraling deductibles and co-pays, as well as Medicare's donut hole. However, Rheumatoid Arthritis requires early and aggressive treatment or else risks incurring irreversible joint damage and mobility loss that will both reduce the patient's quality of life and cost insurers more in long-term care. This long-term

view of healthcare delivery negates any initial savings gleaned from restricting access to the physician-chosen biologic through a “fail first” policy.

Thus, we do not believe compassion and economy are mutually exclusive on the treatment spectrum. I think each of our organizations sees the world similarly. We both see people in pain, and we allocate our unique assets to help alleviate their pain, being as compassionate and as efficient as possible. The per capita expense of a patient on a particular biologic chosen by a physician, for example, while higher than some medications, is mitigated by the small patient population, and the *proven efficacy* of the biologic treatment protocol. This is the protocol that has dramatically reduced long-term care costs, providing savings that can only be measured exponentially.

For short- and long-term cost effectiveness and patient quality-of-life, we respectfully request that you reconsider your decision. We also are willing to work with you further to achieve an outcome that satisfies your business objectives, as well as patient needs.

Sincerely,



Seth D. Ginsberg
President
Global Healthy Living Foundation

Cc: Dr. Eduardo Sanchez – VP, Chief Medical Officer
Tom Tran – Divisional VP, Pharmacy Programs

