

End the Practice of Non-Medical Switching: Support SB 160

Background

Non-medical switching occurs when insurance companies change their list of covered medications in the middle of a plan year, forcing patients to switch from the medication that their physician prescribed to a different, insurer-preferred drug for reasons unrelated to the patient's medical needs.

This practice interrupts stable treatment plans, particularly for patients with chronic or complex conditions, where physicians may have spent years tailoring a specific medication regimen to manage their health safely and effectively.



Problem



Non-medical switching disrupts patient care and jeopardizes patient safety.

Forced changes to medication can lead to ineffective treatment or harmful reactions, resulting in complications and avoidable hospital visits. While insurers claim savings, the downstream medical costs and risks to patients are significantly higher. Patients are locked into their plans, while insurers can change coverage mid-year without accountability.

Solution



Senate Bill 160 would protect patients by preventing insurers from changing medication coverage mid-year for non-medical reasons, ensuring treatment stability and reducing avoidable healthcare costs.

We urge your support to end this harmful practice and safeguard patient care.

