

COMMISSION ON STEP THERAPY PROTOCOLS
Minutes of Virtual Meeting Held June 12, 2025

Call to Order

Kevin Beagan, Deputy Commissioner of the Health Care Access Bureau, presided over the Third Meeting of the Commission on Step Therapy Protocols (Commission) held virtually on June 12, 2025, beginning at 10:00 AM EST. Kevin called the meeting to order and introduced the following agenda items:

Agenda

1. Welcome
2. Approval of Minutes
3. Step Therapy Data Collection Tool
4. Continuity of Coverage Plans
5. Other Matters
6. Adjournment

1. Welcome - Attendees

Commission Members	Member Information
Nancy Ryan	Designee of Executive Director David Seltz of the Health Policy Commission (OPP)
Kimberly Lenz	Designee of Assistant Secretary for MassHealth Michael Levine
Caitlin Sullivan	Designee of Executive Director Lauren Peters of the Center for Health Information and Analysis
Cheryl Bartlett (Late Arrival, Departed 10:29 AM)	A representative of the Massachusetts Public Health Association
Paul Jones	A representative of Blue Cross and Blue Shield of Massachusetts, Inc.
Sarah Chiaramida	A representative of the Massachusetts Association of Health Plans, Inc.
Darlene Sawicki, CNP	A licensed clinician, other than a physician who has prescribing authority under the scope of her license (MGH)
Marc Hymovitz (Late Arrival)	A representative of a patient advocacy organization (ACSCan)
Clinton Pong (Late Arrival)	A licensed physician in the Commonwealth (PCP, Family Practice)

Commission Members Not in Attendance	Member Information
Eileen McAnneny	A representative of an employer organization

Guests	Guest Information
Rebecca Butler	Counsel to the Commissioner, Division of Insurance
Rita Gallo (Meeting Minutes)	Health Analyst, Bureau of Managed Care, Division of Insurance

2. Approval of Minutes

Motion to Approve the Minutes of the Second Meeting of the Commission, Held May 22, 2025

- Introduced by Darlene; seconded by Caitlin; no discussion requested
- Motion passed unanimously by all Commission members in attendance:

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Voting Member Name	Yes	No	Other
Kevin Beagan	X		
Nancy Ryan	X		
Kimberly Lenz	X		
Caitlin Sullivan	X		
Cheryl Bartlett			No Vote; Late Arrival
Paul Jones	X		
Sarah Chiaramida	X		
Marc Hymovitz			No Vote; Late Arrival
Clinton Pong			No Vote; Late Arrival
Darlene Sawicki, CNP	X		

Upon approval of the Minutes, Kevin proceeded with the Agenda.

3. Step Therapy Data Collection Tool

Kevin presented the current version of the Step Therapy Data Collection Tool (Tool) onscreen and introduced the following topics for discussion, incorporating questions raised by Kim in the prior Commission meeting:

1. Reporting data by provider specialty vs. drug type:
 - Several Commission members expressed a preference for reporting by provider specialties, as it is consistent with current reporting methodologies to other agencies and would not require additional programming to implement.
 - Commission members generally agreed that neither methodology was ideal in terms of clarity and that the Division should provide clear guidance to carriers.
 - Kim indicated that Medicaid reporting does not currently utilize either category for reporting, and she is, therefore, amenable to the best solution for carriers generally.
 - Kim also asked how carriers would report on a provider that is double certified based on how the provider was captured in the carrier's system.
 - Sarah proposed that carriers refer to the exception request form as the single source of truth.
 - While Commission members indicated they might be in favor of this approach, they also noted that the exception form would need to be modified to capture provider specialty.

Motion to Recommend that Carriers Report Step Therapy Data on the Data Collection Tool Based on Provider Specialty, as Reflected on the Modified Step Therapy Exception Request Form

- Introduced by Darlene; seconded by Cheryl;
- Motion passed by a majority of Commission members in attendance:

Voting Member Name	Yes	No	Other
Kevin Beagan	X		
Nancy Ryan	X		
Kimberly Lenz			Abstained.
Caitlin Sullivan	X		
Cheryl Bartlett	X		
Paul Jones	X		
Sarah Chiaramida	X		

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Voting Member Name	Yes	No	Other
Marc Hymovitz	X		
Clinton Pong	X		
Darlene Sawicki, CNP	X		

2. Reporting denied exception requests and appealed decisions:

- Kim expressed concerns regarding overreporting of exception denials if both the initial denial and the final appeal are reported for the same exception request.
- Kevin indicated that the Division generally instructs carriers to report such data based on final determinations but indicated that the Division will make this requirement clear in the Guidance to carriers.
- Kim also requested clarification for internal vs. external appeals.
- Both Kevin and Nancy indicated that it is generally understood in the insurance industry that “internal appeal” refers to an appeal handled by or on behalf of carrier personnel, while “external appeal” refers to an appeal submitted subsequently to the Office of Patient Protection (OPP) for additional review.
- Nancy indicated that, while OPP does not track external appeals of step therapy exception requests specifically, the OPP would be willing to validate data reported on the Tool against its external appeal records for carriers.

3. Reporting based on drug approval criteria vs. medical necessity guidelines:

- Kim questioned how step therapy exceptions are to be reported if the basis of the request is encompassed within the drug approval criteria.
- Sarah indicated that her organization has a similar reporting issue.
- Kevin asked that consideration be given to communicating any distinctions to carriers.

Motion to Approve the Data Collection Tool

- Introduced by Caitlin; seconded by Nancy;
- Motion passed unanimously by all Commission members in attendance:

Voting Member Name	Yes	No	Other
Kevin Beagan	X		
Nancy Ryan	X		
Kimberly Lenz	X		
Caitlin Sullivan	X		
Cheryl Bartlett			No Vote; Early Departure
Paul Jones	X		
Sarah Chiaramida	X		
Marc Hymovitz	X		
Clinton Pong	X		
Darlene Sawicki, CNP	X		

Kevin indicated that he would send the Tool to carriers and propose a reporting cadence to begin in May 2026, which would provide the Commission with an opportunity to review the information before the June 2026 meeting. Kevin also indicated he would work with Paul and Sarah (on behalf of MAHP members) regarding the requirements for reporting year 2024 to be discussed at the September and December 2025 Commission meetings.

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4. Continuity of Coverage Plans

Kevin shared the continuity of coverage plans collected from carriers since the prior Commission meeting with the goal of apprising Commission members of this information and allowing them an opportunity to provide comment, which the Division will pass on to carriers. Kevin indicated that he will add this to the agenda for the next Commission meeting.

5. Other Matters

Kevin invited Commission members to introduce topics that the Division might work on with carriers to include in the process.

- Caitlin asked if obtaining turnaround times for any of these processes would add value. Kim indicated that her prior authorization unit has ops metrics that she will forward to Kevin, which might be useful to the Commission.
- Clinton indicated that patients would be interested to see the turnaround times and suggested:
 - Transparency in drug cost:
 - Patients might obtain prior authorization for a particular drug, but not fill the prescription due to prohibitive cost, and this may impact reporting.
 - Some patients are sidestepping providers altogether, obtaining drugs through third parties, such as HIMs or HERs or compounding pharmacies.
 - Kevin indicated that the Division is also concerned with transparency, especially in light of new Pharmacy Benefit Manager (PBM) regulation.
 - Documentation of adverse drug events:
 - It would be efficient for providers to be able to verify independently any adverse drug events identified by patients without the patient being present.
 - This would be particularly helpful when patients transition from one plan to another.
 - Darlene indicated that self-reported patient data could contain misinformation and cautioned against it.
 - Kim indicated that there are some improvements PBMs might be able to make in this area, but there are limitations due to data and privacy requirements.
- Darlene indicated that transparency in process would be helpful to patients, who often call repeatedly for status.
 - Nancy indicated that requirements for turnaround times are well-documented in the law, but indicated that members who submit external appeal request express to OPP that they've repeated the same steps multiple times. Nancy suggested collecting carrier communications to members explaining the process.
 - Clinton suggested a tracking mechanism for patient use, similar to tracking package delivery online. Other Commission members responded favorably to the suggestion.

Kevin indicated that between now and the September meeting, the Division will be developing PBM requirements and issuing the first PBM licenses in January 2026. The Division will also be collecting and reviewing PBM contracts and may have information to share with the Commission at the September meeting.

6. Motion to Adjourn Meeting

- Introduced by Paul; seconded by Kim; no discussion requested
- Motion passed unanimously, and Kevin closed the meeting at 10:55 AM EST.

Voting Member Name	Yes	No	Other
Kevin Beagan	X		
Nancy Ryan	X		
Kimberly Lenz	X		

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Voting Member Name	Yes	No	Other
Caitlin Sullivan	X		
Cheryl Bartlett			No Vote; Early Departure
Paul Jones	X		
Sarah Chiaramida	X		
Marc Hymovitz	X		
Clinton Pong	X		
Darlene Sawicki, CNP	X		

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