

5 Principles of Good Insurance Coverage

Debilitating headache disorders and migraine disease affect 40 million Americans. When health plans empower those people to manage their disease, everyone benefits – patients, families, communities, workplaces and the health care system at large.

Effective insurance coverage meets at least five important criteria.



Empowers Clinicians.

When health plans restrict prescribing or require patients to see a specialist before accessing a particular treatment, patients face unchecked symptoms and risk disease progression. The alternative? Coverage reflecting science-based medical guidelines enables providers to offer the most personalized, most effective treatment possible.

Empowered clinicians have the autonomy to offer timely, quality care to patients with headache disorders.



Covers all Treatment Options.

Many people living with headache and migraine have found relief combining medications or using non-pharmacologic treatment devices. Whether it's adding a botulinum toxin to a CGRP inhibitor, or adding in a device to traditional medication, a multifaceted approach can be effective.

Comprehensive coverage includes both pharmacologic and non-pharmacologic, acute and preventive, single and combination therapy, allowing more patients to control symptoms and manage their disease.



Makes Treatment Accessible and Affordable.

New or more costly drugs are routinely placed on specialty tiers and saddled with high out-of-pocket requirements that make treatment inaccessible. Keeping treatment options out of reach can also result in costly ER visits, evidenced by the fact that migraine patients are the fourth highest users of the emergency room.

With health plans that make treatment accessible, patients are equipped to stay on top of their disease. Due to the uncertainty of the disease and potential attack triggers, telehealth should be available to patients as a mode for treatment, that way the health care system spends less on doctor visits, specialty care check-ups and ER trips.



Allows for Timely Treatment.

Overly burdensome utilization management delays treatment for patients and ends up costing more in the long run. Step therapy, or “fail first,” requires patients to try as many as eight insurer-preferred therapies before covering their prescribed medication. The process can take weeks, months or even years.

When patients are forced to try and fail multiple medications, they lose time and can face unchecked and debilitating symptoms.



Offers a Straightforward Appeals Process.

Appealing a denial by the insurance company can take patients and providers weeks or months. Even then, coverage is not guaranteed. The extensive paperwork battle creates gaps in care during which patients’ disease may progress.

A clear appeals process with a reasonable and defined timeline can help simplify the process for both patients and providers – and get patients the treatment they need when they need it.

With good insurance coverage, everyone wins.

By allowing patients and providers to successfully manage headache disorders, optimal insurance coverage also supports the physician-patient relationship, boosts productivity, reduces costly ER visits and improves patients’ quality of life. Every patient deserves adequate and accessible coverage.



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