



Attn: Director NV P&T Committee
State of Nevada Medicaid Drug use Review Board
rxinfo@dncfp.nv.gov

Dear Nevada Medicaid Drug use Review Board:

On behalf of the Hundley Foundation, we urge you to ensure open access to all seizure rescue medications on the state Medicaid preferred drug list. Epilepsy medications are not interchangeable, and treatment of epilepsy is highly individualized. Limiting access to lifesaving medications and interrupting proven treatment regimens due to drug formulary changes can result in harmful changes to patient therapies that are far costlier to the Medicaid program in the long run, and critically, further tax already scarce health care resources.

The Hundley Foundation is a voluntary health organization that speaks on behalf of approximately 31,600 Nevadans living with epilepsy. We foster the wellbeing of children and adults affected by seizures through educational activities, advocacy, and direct services. Approximately 1 in 26 Americans will develop epilepsy at some point in their lifetime. For people living with epilepsy, timely access to appropriate, physician-directed care, including access to epilepsy medications, is a critical concern. Epilepsy medications are the most common and cost-effective treatment for controlling and/or reducing seizures. To delay, change, limit, or deny access to medications could be extremely dangerous and lead to avoidable hospitalizations and doctors' visits.

The Hundley Foundation supports open access to epilepsy rescue medications and oppose any formulary changes that would restrict access, and to any policies that would require multiple failures or prior authorization before physician-directed medications can be secured. Failure to have access to the appropriate medication can result in increased or breakthrough seizures, injury, accidents, additional medical and hospitalization costs, loss of earnings, and can even cause unexpected death. The mortality rate among people with epilepsy is two to three times higher than the general population and the risk of sudden death is 24 times greater.

The very health and wellbeing of most individuals with epilepsy is dependent, to a great extent, on their anti-seizure medications. Thus, people with epilepsy and their medical providers are very concerned about the availability and access to anti-seizure medications – especially during this public health emergency. This is due to the unique nature of epilepsy and the different response to each medication. This is why many states and the federal Medicaid program provide for access to all epilepsy medications.

Selection of the appropriate medication to prevent seizures is determined by a number of variables, including type of seizure, seizure frequency, age, gender, and other health conditions. Determining the right medication or seizure rescue medication for a particular person may require trial-and-error, along with close observation of blood levels and side effects. For these reasons, physicians and their patients need to be assured that the full array of treatment options is available without onerous utilization management protocols, including alternative formulations of a drug such as extended release versions that are particularly important for disease management and patient compliance among the individuals with multiple and complex chronic conditions. The treating physician is in the best position to make the judgement about which medication is most appropriate for the individual patient.

By allowing the treating health care provider to make an individualized health care decision based on a professional clinical assessment, individuals living with epilepsy and seizures may be able to avoid placing a further strain on health care resources that are already taxed.

Individuals living with epilepsy may experience life-threatening seizures at any moment and need access to emergency seizure medication. For most people, conventional medication that can be taken orally are effective in controlling seizures. However, some individuals are susceptible to prolonged, cluster, or status seizures, which may last longer than five minutes and can lead to serious injury and even death. For these individuals, a physician may prescribe emergency seizure medication to be administered on an emergency basis. As with anticonvulsants, seizure rescue medications are not one size fit all. Nevadans should have access to the full range of treatment options available – including seizure rescue medication.

The Hundley Foundation supports open access to physician-directed care. Policies intended to restrict access unnecessarily prolong ineffective treatment and prevent individuals from immediately starting treatment that their physicians, who provide care based on their expert knowledge and experience, think is best. We urge you to provide open access to seizure rescue medications on the state's preferred drug list.

Sincerely,

Shannon Abdul-Wahab



CEO
Hundley Foundation

Brett Hundley



Chairmen,
Board of Directors
Hundley Foundation

Danielle Marano



President,
Board of Directors
Hundley Foundation