

Florida Allergy, Asthma & Immunology Society

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A Florida Allergy, Asthma & Immunology Society Position Statement regarding:

ASSURING PATIENT ACCESS TO SUBCUTANEOUS ALLERGEN IMMUNOTHERAPY

Allergists/Immunologists care for many patients who carry a heavy burden of allergic disease. Subcutaneous allergen immunotherapy--also known as allergy shots--is a long-standing, highly effective, and clinically proven therapy that decreases symptoms for patients suffering with allergic rhinitis, allergic asthma, eye allergies, and life-threatening insect allergies.¹ Immunotherapy can prevent the development of new allergies, and in children it can halt the progression from allergic rhinitis to asthma. It is life-saving for those with insect sting allergies and can substantially reduce the likelihood for subsequent life-threatening reactions. Allergen immunotherapy is the *only* disease-modifying treatment for allergic disease and has been shown to significantly reduce health care costs.²

The *Florida Allergy, Asthma, & Immunology Society* (FAAIS) is concerned about reports of increasingly restrictive coverage limits on allergen immunotherapy being imposed by some health insurance providers. For immunotherapy to be maximally effective, patients must be treated with all the allergens that they are allergic to, in the region where they live. Consequently, patients with a greater number of allergic sensitivities will require a greater number of immunotherapy extract doses per year. Overly restrictive insurance coverage limits on the doses allowed per year will ultimately require some clinically relevant allergens to be left out of a patient's immunotherapy extract. According to the national Practice Parameters on Allergen Immunotherapy with joint recommendations by the *American College of Allergy, Asthma, & Immunology* (ACAAI) and the *American Academy of Allergy, Asthma, & Immunology* (AAAAI), "The omission of clinically relevant allergens from an allergic patient's allergen immunotherapy extract contributes to the decreased effectiveness of allergen immunotherapy."¹

While FAAIS applauds measures to curb healthcare costs, we have serious concerns that excessive reductions in coverage for immunotherapy will present significant obstacles to appropriate care and suboptimal treatment for those suffering from serious allergic diseases.

Regarding cost containment measures, allergen immunotherapy has been demonstrated to reduce health care costs. A pivotal study involving analysis of 12 years of Florida Medicaid claims (1997-2009) showed that over an 18-month period, children with allergic rhinitis who received allergen-specific immunotherapy incurred 42 percent *lower* per-patient health care costs than those who did not receive allergen-specific immunotherapy—a savings of \$3,865 per patient.² Since immunotherapy has been shown to substantially decrease health care costs, deterring or restricting access to this critical therapy will likely lead to increased health care utilization and rising medical costs.

In summary, allergen immunotherapy is an extraordinarily important and well-established treatment that can also reduce health care costs. Based on superior outcomes and reduced costs, FAAIS opposes overly-restrictive insurance coverage limits for allergen immunotherapy that will deprive patient access to this vital therapy. FAAIS strongly urges health insurance providers to work with allergy specialists on the state and national levels to assure that appropriate use of allergen immunotherapy remains available to the patients who need it most.

1. Cox, Linda, Harold Nelson, and Richard Lockey. "Allergen immunotherapy: a practice parameter third update." *Journal of Allergy and Clinical Immunology* 127.1 (2011): S1
2. Hankin, Cheryl S. et al. Allergy immunotherapy: Reduced health care costs in adults and children with allergic rhinitis. *Journal of Allergy and Clinical Immunology*, 2013. Volume 131, Issue 4, 1084 – 1091.

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