

Fact Sheet: Non-Medical Switching

Background:

Non-Medical Switching (NMS) occurs when a patient is required to switch from one medication to another for reasons unrelated to their health, safety, or treatment needs. These decisions are often made by insurance companies, Pharmacy Benefit Managers (PBMs), or other third parties rather than the patient's healthcare provider. Non-Medical Switching can happen when an insurance plan changes which medications it prefers to cover or when a patient changes insurance plans.

In short, Non-Medical Switching is intended to reduce costs, but it may not always consider what is best for an individual patient.

Non-Medical Switching can be harmful to patients.

People living with autoimmune and autoinflammatory conditions often work closely with their healthcare providers to find a treatment plan that helps manage their symptoms and maintain their quality of life. Finding the right medication can take time and may involve trying multiple treatments before finding one that works. When patients are switched to a different medication for non-medical reasons, it can disrupt a treatment plan that is already working. Some patients worry that changing medications may lead to worsening symptoms, disease flares, treatment interruptions, or additional healthcare costs. While decisions about coverage are often made for large groups of patients, treatment plans should be based on individual patient needs. What works for one patient may not work for another. Patients deserve treatment decisions that are based on their health, not financial considerations.



What can be done?

Patients and caregivers can share their experiences so policymakers and healthcare leaders better understand how Non-Medical Switching affects access to treatment and quality of life. Staying informed about Non-Medical Switching policies helps patients advocate for protections that preserve continuity of care and support patient-centered treatment decisions. Connecting with AiArthritis is another way to stay engaged, amplify patient voices, and ensure people living with autoimmune disease are represented in healthcare policy discussions. Your experiences matter and can help shape policies that put patients first. We don't represent the patient voice, we are the voice.

In conclusion

Non-Medical Switching is often used as a cost-saving strategy, but it can have real consequences for patients whose treatments are working well. Changes made for non-medical reasons may disrupt care and create uncertainty for patients managing chronic illnesses. Patients deserve treatment decisions that are made with their healthcare providers and based on their individual needs. By sharing their experiences and staying informed, patients can help advocate for policies that protect access to effective treatments and keep patient health at the center of healthcare decisions.

Hear from our patients!

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