



The Nation's Advocacy Voice for In-Office Infusion

3307 Northland Dr, Ste 160 ▪ Austin, TX 78731  
www.infusioncenter.org ▪ info@infusioncenter.org

Maryland Senate  
Finance Committee  
11 Bladen Street  
Annapolis, MD 21401

February 6, 2025

**Re: Support for SB 357**

Dear Committee Members:

On behalf of the National Infusion Center Association (NICA), which represents infusion therapy providers across Maryland, we write to express our strong opposition to SB 357. This bill would expand the authority of the Maryland Prescription Drug Affordability Board (PDAB) to impose Upper Payment Limits (UPLs) on certain drugs across all state-regulated health plans. If enacted, this policy would jeopardize the financial stability of infusion therapy providers and, more importantly, restrict patient access to critical, life-sustaining treatments.

NICA is a nonprofit organization formed to support non-hospital, community-based infusion centers caring for patients in need of infused and injectable medications. To improve access to medical benefit drugs that treat complex, rare, and chronic diseases, we work to ensure that patients can access these drugs in high-quality, non-hospital care settings. NICA supports policies that improve drug affordability for beneficiaries, increase price transparency, reduce disparities in quality of care and safety across care settings, and enable care delivery in the highest-quality, lowest-cost setting.

Infusion therapy providers operate under a buy-and-bill model, meaning we must purchase medications upfront from manufacturers or wholesalers before seeking reimbursement from insurers. If UPLs are expanded and reimbursement rates fall below acquisition costs, providers will be forced to absorb financial losses on every treatment administered. This untenable situation would likely result in clinic closures, service reductions, and significant barriers to care for patients with chronic and complex conditions such as autoimmune disorders, neurological diseases, and rare genetic disorders.



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Ensuring access to high-quality infusion therapy is essential to the health and well-being of Maryland patients. By voting no on SB 357, you will help protect the viability of provider practices and prevent unnecessary disruptions to care. We urge you to oppose this bill and preserve access to infusion therapy for the thousands of Marylanders who depend on it.

Thank you for your consideration. We appreciate your leadership on this important issue and welcome the opportunity to discuss this matter further.

Sincerely,

A handwritten signature in black ink that reads "Brian Nyquist". The signature is written in a cursive, flowing style.

Brian Nyquist, MPH  
President & CEO  
National Infusion Center Association



Maryland Senate Finance Committee  
11 Bladen St  
Annapolis, MD 21401

January 15th, 2025

Re: Support for SB 357

Dear Committee Members,

On behalf of the Infusion Access Foundation, which represents patients across Maryland who rely on infusion therapy to manage chronic and life-threatening conditions, we write to express our strong opposition to SB 357. This bill would expand the authority of the Maryland Prescription Drug Affordability Board (PDAB) to impose Upper Payment Limits (UPLs) on certain medications across all state-regulated health plans. If enacted, this policy would threaten access to essential treatments for thousands of vulnerable Maryland patients.

The Infusion Access Foundation is a nonprofit advocacy organization dedicated to protecting access to infusions and injections. We support patients across all disease states and advocate for expanding access to the therapies that help patients live their best, healthiest lives. In conjunction with our grassroots advocacy work, we advocate for individual patients who face significant barriers to care.

Many of the patients we represent live with complex autoimmune diseases, neurological conditions, genetic disorders, and other serious illnesses that require regular infusion therapy to maintain their health and quality of life. Infusion providers purchase these medications upfront before seeking reimbursement from insurers. If UPLs result in reimbursement rates below the actual cost of acquiring and administering these treatments, providers may be forced to reduce services or shut down, leaving patients with limited or no access to the care they need.

For many patients, infusion therapy is not optional—it is lifesaving. Restricting access to these medications could lead to disease progression, hospitalizations, disability, and significant declines in health outcomes. Maryland should be working to expand access



# Infusion Access Foundation

to high-quality, specialized care—not implementing policies that could force providers out of business and leave patients without viable treatment options.

We urge you to vote no on SB 357 to ensure that Maryland patients can continue receiving the care they depend on. Thank you for your time and commitment to protecting patient access to essential therapies. We welcome the opportunity to discuss this critical issue further.

Sincerely,

Alicia Barron, LGSW  
Executive Director  
Infusion Access Foundation