

My name is Cate Bonacini and I am a 37 year old resident of Takoma Park, MD and a nonprofit professional. I am testifying in support of Maryland House Bill 424. In 2022, I developed long COVID, despite multiple vaccinations. Since then, I have experienced a cascading series of health impacts, including dysautonomia, a seizure disorder, and an arrhythmia. During my recovery, doctors discovered cancer and a new autoimmune disorder.

Managing my health has been a full time job and a wildly expensive one. In one plan year, even with insurance, I spent over \$20,000. This figure includes premiums, my deductible, and co-pays for hospitalizations, prescriptions, ambulances, and doctor's visits. Additionally, I underwent testing, therapies, and visits with providers who did not accept insurance. My husband and I dipped into savings and put off desperately needed home repairs to shoulder the cost. Although doctors recommended I stop working, we could not financially afford to go down to one income. I often find myself struggling to juggle my health with the demands of my job.

I take nearly a dozen medications now, including levothyroxine, metoprolol, and pregabalin. Many of these have been subject to price increases over the last few years.<sup>1</sup> But for the purposes of today's testimony, I want to focus on one pharmaceutical — Skyrizi.

In November 2024, I learned that after nearly a decade in remission, my Crohn's disease has returned. Medications, including biologics, that weren't on the market when I was diagnosed are now the standard course of treatment. My doctor and I carefully weighed three options and decided on one — Skyrizi — precisely because it is the most effective at targeting the kind of Crohn's that I have. I received my first infusion last Thursday and I'm extremely hopeful that I will once again be in remission.

Over the next three months, I will receive two more infusions at an oncology suite at a local hospital. After these loading doses, I will switch to at-home injections every eight weeks. For this first year, that's just under \$180,000. If there's one thing I've learned through my health care journey, it's that care is always more than the retail price. There will be additional out of pocket costs for the oncology center, bloodwork to check liver levels, doctors appointments, and endoscopies and colonoscopies to track disease progression.

I did not start Skyrizi without pause. It's a wildly expensive drug and I know full well that my family will continue to shoulder the costs both directly and indirectly, in addition to what we're already paying for my care. My husband works for an agency impacted by recent federal spending cuts and we don't know what will happen to his job. We're holding our breath, praying that we'll be able to shoulder whatever comes next.

In January 2025, the wholesale acquisition cost (WAC) for a single dose of Skyrizi was listed at \$22,383.49.<sup>2</sup> When it was brought to market in 2019, the WAC was just under \$15,000. This is a

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<https://patientsforaffordabledrugs.org/wp-content/uploads/2021/01/UPDATED-January-2021-Price-Hikes-Data-and-Methods.pdf>

<sup>2</sup> <https://www.skyrizi.com/crohns/cost-and-savings>

nearly \$7,500<sup>3</sup> price increase in a six year period. To be clear, the drug itself has not changed. Just what they're charging for it. As others will surely testify, we all pay for these price jumps in the form of higher premiums and greater cost sharing for our prescriptions.

Skyrizi comes with all of the bells and whistles one could ask for — manufacturer coupons; a dedicated nurse ambassador; an app on my phone with videos, push reminders, and symptom tracking; a branded sharps box; and fancy auto-inject pens. This is to say nothing of their aggressive marketing campaign. Friends on Skyrizi point to these perks as a tradeoff for the cost, but few make the connection between price increases and their rising premiums. A 2023 ICER report shows that Skyrizi is among the drugs with the highest net sales revenue.<sup>4</sup> Is my branded Skyrizi cooler worth next year's higher premiums or the burden on state and federal purchasing programs? If you ask me, absolutely not.

I ask that Maryland House take urgent action to lower prescription drug costs and reign in pharmaceutical profiteering by voting yes on House Bill 424.

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<sup>3</sup> <https://patientsforaffordabledrugs.org/2022/02/03/2022-price-hikes-report-round-2/>

<sup>4</sup> [https://icer.org/wp-content/uploads/2023/04/UPI\\_2023\\_Report\\_121123.pdf](https://icer.org/wp-content/uploads/2023/04/UPI_2023_Report_121123.pdf)