

March 5, 2020

Chair, Delegate Shane Pendergrass
House Committee on Health and Government Operations
Maryland House of Delegates
6 Bladen Street
Annapolis, MD 21401



Dear Chair Pendergrass and Honorable Members of the House Committee,

The Association for Clinical Oncology (ASCO) is pleased to **support HB 1360: Health Insurance – Out-of-Pocket Maximums and Cost-Sharing Requirements – Calculation** which would prohibit health carriers in the state from utilizing co-pay accumulator programs within their plans. ASCO is a national organization representing physicians who care for people with cancer. With nearly 45,000 members, our core mission is to ensure that cancer patients have meaningful access to high quality cancer care.

ASCO is committed to supporting policies that reduce cost while preserving quality of cancer care; however, **it is critical that such policies be developed and implemented in a way that does not undermine patient access.** Copay accumulator programs target specialty drugs for which manufacturers often provide copay assistance. With a co-pay accumulator program in place, a manufacturer's assistance no longer applies toward a patient's co-pay or out-of-pocket maximum. This means that patients will experience increased out of pocket costs and take longer to reach required deductibles. **By prohibiting these funds from counting toward patient premiums and deductibles, co-pay accumulators negate the intended benefit of patient assistance programs and remove a safety net for patients who need expensive specialty medications but cannot afford them.**

While co-pay accumulator programs are described as a benefit for patients, these programs in effect prevent patients from reaching their deductibles sooner while increasing cost-sharing for patients. These programs lack transparency and are often implemented without a patient's knowledge or full understanding of their new "benefit." Increases in out of pocket costs for the patient can result in significant adverse impacts on patient finances, which contributes to medical bankruptcies and disproportionately affects low-income populations. In this manner **co-pay accumulator programs could jeopardize outcomes, as patients may decide to forego or discontinue treatment or seek different treatment for non-medical reasons.** If a patient does forego care, this could lead to poorer health outcomes and potentially higher costs to the health care system.

ASCO is encouraged by the steps that HB 1360 takes toward eliminating co-pay accumulator programs in Maryland and we therefore urge the committee to pass the measure. For a more detailed understanding of our policy recommendations on this issue, we invite you to read the [ASCO Policy Brief on Co-Pay Accumulators](#) by our affiliate, the American Society of Clinical Oncology. We welcome the opportunity to be a resource for you. Please contact Allison Rollins at ASCO at allison.rollins@asco.org if you have any questions or if we can be of assistance.

Sincerely,

A handwritten signature in black ink that reads "Monica Bertagnolli, MD". The signature is written in a cursive style.

Monica Bertagnolli, MD, FACS, FASCO
Chair of the Board
Association for Clinical Oncology