

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,

I am writing in support of 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 health care plans.

I have been a practicing medical oncologist in Maryland for more than 30 years. Because of the high cost of prescription medical for oncology patients, my patients frequently use various copay assistance programs to help with out-of-pocket costs including deductibles, coinsurance and copays. However, this type of assistance is not unlimited and frequently exhausted by mid-year.

Copay accumulator (also called accumulator adjustment programs) are a relatively new tool being implemented by health plans which exclude this type of copay assistance from counting towards my patients' deductibles and other out-of-pocket maximum.


This approach is likely to make significantly more difficult for my patients to meet the annual deductibles for their breast cancer care. As more and more of my patients move into high-deductible health plans, my concern is exacerbated. A substantial proportion of commercial health plans have this type of program in their coverage language, and the number of my patients who might be affected is expected to grow.

Patients like mine with breast cancer often require expensive medications and their out-of-pocket costs can be financially untenable. If copay assistance no longer counts towards getting my patients out of their deductible phase in a given year, that means that their insurance will not cover their treatment. In this way, accumulator programs will shift more costs to my patients.

In addition, it can be extremely difficult for my patients comparing their coverage options to evaluate these policies. There is no standard term across the insurance industry for these programs; they can be hidden in plan documents.

It is important that this problem be tackled at the state level. **Please support HB 1360 and my breast cancer patients in Maryland.**

Sincerely,


Carolyn B. Hendricks, MD, FASCO