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March 3, 2020

Dear Members of the House Health and Government Operations Committee,

My name is Rebecca King and I am the Northeast Director of Education and Healthcare Relations for the Multiple Sclerosis Association of America (MSAA) – a 501c3 focused on the mission of improving lives today within the greater MS community in Maryland and nationwide.

Celebrating our 50th anniversary this year, MSAA has established an excellent record of fair and balanced public positions on various MS issues and prioritizing the needs of the patient and their care partners. As a leading resource for the entire MS community, and dedicated to improving lives through vital services and support, we are strong advocates for lowering sky-rocketing drug costs that many individuals living with chronic diseases, like MS, are facing.

I am writing you today in support of HB 1360, which will protect vulnerable populations, like the MS community, from enduring additional financial burdens as a result of today's complex healthcare market. According to a 20-year analysis published by Oregon State University, a significant portion of common medications used to treat MS have more than doubled their market price resulting in prescription costs to reach \$100,000 or more. Copay cards from drug manufacturers can not only have a significant impact on an individual's economic viability, but also provide opportunity for patients to shift their focus on other meaningful areas of life such as work and contributions to their community.

Copay accumulator programs that are now trending across the country deplete any financial assistance that copay cards can provide to lower- and middle-income families. In return, patients on expensive drug therapies are forced to either adjust their treatment plans or forgo filling their prescriptions entirely. No one should have to choose buying food for their family, or paying to heat their home in the winter, over life-saving drug therapy plans.

When patients are forced to ration their drug therapy treatments, the results can be costly for both their health and the economy. Medication adherence can be challenging for any chronic condition, but even more so for those who depend on their drug therapies to increase their daily quality of living by keeping severe symptoms at bay. Non-adherence can lead to an increase in emergency department visits and hospital stays and is 100 percent preventable. A review published in the Annals of Internal Medicine estimates that non-adherence can cost the healthcare system anywhere between \$100 and \$289 billion annually.

At MSAA, we believe that we share a common goal – to lower the financial healthcare burden on families nationwide. While we have made tremendous strides in developing new drug therapy regimens over the past two decades, the benefit is lost if patients with MS cannot afford to access those medications. Copay accumulator programs create just another barrier to critical access to treatment for anyone living with a chronic illness.



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Passing HB 1360 will not only improve the lives of the MS community residing in the great state of Maryland but establishing state legislation that protects patients will ultimately influence these decisions at the national level.

If you have any questions, I would be more than willing to provide further insight into our concerns about the impact that copay accumulator programs may have on access to care for MS patients. I can be reached at (800) 532-7667, x144 or rking@mymsaa.org. Thank you for your time and considering our written testimony.

Respectfully,

Rebecca King

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