National
Multiple Sclerosis
Society

The Honorable Shane Pendergrass
The Honorable Joseline Peña-Melnyk
House Health and Government Operations Committee

Re: House Bill 0167 Support

Dear Chair Pendergrass & Vice-Chair Peña-Melnyk:

I am writing today on behalf of the National Multiple Sclerosis Society (the Society) regarding House Bill (HB) 0167. The National MS Society supports HB 0167, which addresses copay accumulator programs that impact access to health care for people living with multiple sclerosis. We respectfully ask the Health and Government Operations Committee to favorably report HB 0167.

Multiple sclerosis (MS) is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and body. Recent studies estimate nearly 1 million in the United States are living with MS. Symptoms vary from person to person and range from numbness and tingling to walking difficulties, fatigue, dizziness, pain, depression, blindness and paralysis. The progress, severity and specific symptoms of MS in any one person cannot yet be predicted, but advances in research and treatment are leading to better understanding and moving us closer to a world free of MS.

MS is an expensive disease to live with and treat, impacting the healthcare system, health plans and of course, families affected by MS. A person with MS spends three times as much out-of-pocket than the average person in employer plans. Disease modifying treatments (DMTs) are approximately 75% of the cost of treating MS. Early and ongoing treatment with a disease modifying medication is the best way we know to slow the progression of MS, prevent the buildup of disability and protect the brain from damage due to MS. While there are over 20 DMTs available, they are not interchangeable and we do not yet know which medication will work best for each person.

These medications are very expensive, and people with MS often face a high deductible and later co-insurance—meaning they are often responsible for thousands of dollars in out-of-pocket costs. This poses a significant challenge in their ability to access these lifechanging medications.

Copay accumulators (or accumulator adjustment programs) began from the belief that drug manufacturers' patient assistance programs are discouraging patients and their doctors from choosing generics or less-costly prescription drug alternatives. These programs are used to prohibit prescription drug coupons or other forms of prescription drug manufacturer assistance from applying towards a patient's annual deductible or out-of-pocket maximum amounts.

In MS, copay accumulators make it more difficult for people to get the healthcare they need. As many as 40% of people living with MS rely on copay assistance programs to maintain access to their disease-modifying therapy. With the implementation of copay accumulator programs, people with MS are experiencing higher cost burdens as they struggle with unexpected expenses during their deductible period. It is well-known that people with chronic and high-cost conditions like MS face significant financial hardship each year until their deductible has been met and the full relief of their health insurance kicks in. This financial hardship existed prior to the current pandemic, but has certainly worsened due to the economic impact of COVID-19. Copay accumulator programs add to this financial hardship, as preventing copay assistance from applying to a person's deductible means it takes them longer to reach the end of the deductible period. Because patients are responsible for 100% of their health care costs until the deductible is satisfied, prolonging the deductible period can put other medical needs—such as doctors' visits, rehab therapies, MRIs, or other medications—financially out-of-reach. As one Maryland resident living with MS who recently lost his job stated:

"Co-pay assistance is extremely helpful for people like me, especially now that I am out of a job. Assuming that I keep my current health insurance through COBRA – which will cost roughly $2,000/month – the copay assistance I receive for my disease-modifying therapy, Ocrevus, is going to be even more important in stretching our medical benefits. Having that assistance count towards my copay makes everything else that much more affordable. My benefits expire at the end of February, and I hope to have a new job by then, but if not, I will pay for COBRA as Ocrevus would otherwise be unaffordable."

The National Multiple Sclerosis Society has called on all stakeholders in the prescription drug supply chain to come together and find real solutions to escalating price increases, barriers to care and a system too complex to navigate. It is reasonable to question the role of copay assistance programs and the potential role they inadvertently play in raising costs or impeding access—but this should not be the first change that happens. Until we find real solutions to the challenges in our healthcare system that prevent people from affordably accessing the care and treatments they need, we cannot rip away the band-aids people have come to rely on—like copay assistance programs. Mechanisms like copay accumulators primarily impact people who are seeking whatever avenue they can find to be able to take their needed medication.

The National MS Society supports solutions that help safeguard access for people who need life-changing medications, without getting them caught in the middle of struggles between other stakeholders.
We respectfully request the Committee favorably report HB 0167.

Sincerely,

Shannon Wood
Senior Manager, Advocacy
National Multiple Sclerosis Society
4200 Innslake Drive, Suite 301
Glen Allen, VA 23060