



February 27, 2025

The Honorable Joseline Pena-Melnyk
Chair, House Committee on Health and Government Operations
Room 240, House Office Building
6 Bladen Street
Annapolis, Maryland 21401

RE: SUPPORT: House Bill 1246: *Health Benefit Plans – Calculation of Cost Sharing Contribution – Requirements*

Dear Chair Pena-Melnyk and Members of the House Committee on Health and Government Operations,

The Maryland/DC Society of Clinical Oncology (MDCSCO) and the Association for Clinical Oncology (ASCO) are pleased to support **HB 1246**, which would prohibit health carriers in the state from utilizing co-pay accumulator programs and save patients with cancer on their out-of-pocket costs.

MDCSCO is a professional organization whose members are a community of physicians who specialize in cancer care. ASCO is an organization representing physicians who care for people with cancer. With over 50,000 members, our core mission is to ensure that cancer patients have meaningful access to high quality cancer care.

MDCSCO and ASCO are 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. Co-pay accumulator programs target specialty drugs for which manufacturers often provide co-pay 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 policy means patients will experience increased out-of-pocket costs and take longer to reach required deductibles. By prohibiting these funds from counting toward patient deductibles and cost-sharing limits, 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.

Co-pay accumulator programs lack transparency and are often implemented without a patient's knowledge or full understanding of their new "benefit." Far from being beneficial, co-pay accumulator programs increase financial burden for patients, many of whom are facing life-threatening illness. The impact is especially hard on low-income populations. Increasing patient cost can contribute to medical bankruptcy and cause patients to discontinue care, seek non-medical alternatives, or forego treatment altogether. The result is poorer health outcomes and greater cost to the system.

MDCSCO and ASCO are encouraged by the steps HB 1246 takes toward eliminating co-pay accumulator programs in Maryland and we strongly urge the Committee to pass it. For a more detailed

understanding of our policy recommendations on co-pay accumulator programs, we invite you to read the [ASCO Policy Brief on Co-Pay Accumulators](#) by our affiliate. We welcome the opportunity to be a resource for you. Please contact Nick Telesco at ASCO at Nicholas.Telesco@asco.org or Danna Kaufman, representing MDCSCO, at dkauffman@smwpa.com if you have any questions or if we can be of assistance.

Sincerely,

Mark Goldstein, MD
President
Maryland/DC Society of Clinical Oncology

Eric P. Winer, MD, FASCO
Chair of the Board
Association for Clinical Oncology