



Representative P. Scott Lipps  
Ohio House of Representatives  
77 S. High St, 13 Fl.  
Columbus, OH 43215

Dear Chairman Lipps and Committee Members:

The AIDS Institute, a non-partisan, a nonprofit organization dedicated to supporting and protecting health care access for people living with HIV, hepatitis, and other chronic and serious health conditions, **supports HB 469**. The bill would require insurers to include payments made by, or on behalf of, the insured for prescription drugs toward the insured's cost-sharing requirement.

This bill will address the negative effects of a relatively new practice that limits patient access to HIV and hepatitis C (HCV) medications. Health plans that have policies in place that prevent patient copay assistance from counting toward the beneficiary's deductible and out of pocket limits are often referred to as "copay accumulators," and place significant burden on vulnerable patients who rely on specialty medications. Since cost sharing for many specialty medications can add up to thousands of dollars every month, especially when there are no low-cost generic alternatives, many people living with HIV and other serious conditions depend on copay cards or charitable copay assistance programs to help defray their prescription drug cost sharing. Without copay assistance, patients will not be able to afford their medication; for HIV, the matter is one of life and death. For other serious chronic conditions, rationing prescriptions will result in irreversible disease progression and increased emergency room visits, which ultimately costs the healthcare system more.

In 2020, at least 6 of the 10 health insurance issuers participating in the Ohio ACA marketplace had policies in place that prevents copay assistance from counting toward the beneficiary's cost sharing requirement. This becomes a risky reality for patients in the 30 counties that have only one or two issuers offering plans in their area. This means that people living with HIV or HCV in Belmont or Miami Counties will not have the option to select a plan that will fit their needs and honor their copay assistance.

When insurance companies refuse to count the value of copay assistance towards the deductible or out of pocket costs, patients' expenses are substantially increased while insurers are rewarded with extra payments collected from both the patient and the copay assistance. This seems to be a particular injustice for patients as we begin to witness the broad effects the COVID-19 crisis is having not only on the health of individuals and families, but also on their economic well-being. Record breaking unemployment figures indicate that millions of people will be forced to make tough financial decisions, choosing between health care and putting food on the table.

**In conclusion, we urge you to support HB469 that ensures copay assistance will count toward a beneficiary's annual cost sharing and protect Ohio patients' health.**

Sincerely,

Stephanie Hengst  
Manager, Policy & Research  
The AIDS Institute