



## Ohio Association of Rheumatology

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### Proponent Written Testimony to the Ohio House Health Committee

#### House Bill 469

Hearing: June 2, 2020

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The Ohio Association of Rheumatology (OAR) encourages public understanding and awareness of the impact of rheumatic diseases on society and the importance of the subspecialty of rheumatology in altering disease outcomes. We are submitting proponent testimony on HB 469 because of our deep concern regarding a new utilization management protocol referred to as “copay accumulator adjustment programs.” The programs allow insurers to exclude the amount of a patient’s co-pay card from counting toward their cost-sharing obligation or out-of-pocket cost for the year. This practice allows insurers to “double-dip” on a patient’s deductible and makes treatments more difficult for patients to access.

House Bill 469 would direct insurers to apply all payments made by either the patient or on behalf of the patient through an assistance program to their cost-sharing obligation. All too often, patients are unable to afford their medication without the copay benefit. OAR supports the use of copay card assistance programs and views them as critical lifelines for patients with chronic diseases such as rheumatoid arthritis.

Furthermore, OAR’s concern has grown because this issue has gone largely unaddressed at the federal level. On May 7, 2020, the Centers for Medicare and Medicaid (CMS), Health and Human Services (HHS) finalized the 2021 Notice of Benefit and Payment Parameters (NBPP). Under the Rule, HHS will allow commercial market plans and issuers to exclude manufacturer cost-sharing assistance from a patients’ annual limitation on cost-sharing, even when no medically appropriate generic is available. OAR holds that this practice can completely restrict a patient from accessing their provider prescribed treatment.

The lack of federal action has left states to address these unfair policies. In 2019, four states enacted laws to reform accumulator adjustment programs. Ohio is just one of ten states currently taking up this legislation.

OAR holds that without placing restrictions on the use of copay accumulator adjustment programs, patients will be unable to afford the medications they need for treating their chronic disease. OAR urges the House Health Committee to support HB 469 to uphold Ohioans’ continuity of care and thanks the Committee for its consideration.

Sincerely,

Stephanie Ott, MD FACP, FACP  
President, OAR