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November 9, 2020

The Honorable Scott Lipps  
Chair, Health Committee  
Ohio House of Representatives  
77 S. High Street  
Columbus, OH 43215

RE: HB 469, Prohibit certain health insurance cost-sharing practices - SUPPORT

Dear Chairman Lipps:

The American Association of Clinical Urologists (AACU) is a leading professional organization for the specialty of urology, a branch of medicine that focuses on conditions affecting the urinary-tract system and male reproductive organs. The AACU represents the interests of more than 500 urologists in Ohio and more than 3,000 nationwide. As physicians who care for patients with complex conditions, we support health insurance reforms that simplify administrative processes and mitigate the financial burden of medically necessary therapies and services. We therefore appreciate the opportunity to express support for House Bill 469, a bill to require insurers to apply all amounts paid by, and on behalf of, an enrollee toward their cost-sharing requirements.

Copayment assistance programs offer direct financial assistance to patients struggling to afford sometimes expensive breakthrough therapies. The idea behind copayment assistance is to reduce a patient's out-of-pocket expense by covering the amount for which their insurer may hold them responsible. Copayment accumulator programs, on the other hand, prevent the assistance from being applied toward the patient's deductible. Instead, the assistance is applied to what would normally be the health carrier's responsibility. Thus, health carriers extract value from what was supposed to be direct assistance to the patient, as well as from the patient's regular cost-sharing requirements. This is not only unfair to the patient from a financial perspective, it is also dangerous to the patient's health. Without copayment assistance, many patients may discontinue their treatment, allowing for adverse physical effects, which, in itself, will increase costs to the patient, payer, and community.

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**Time is of the essence, Chairman Lipps. Starting January 1, UnitedHealthcare will require providers to report the amount patients receive in copay assistance for office-administered treatments, thereby further limiting financial benefits intended for individuals, not insurers.**

Recognizing the danger of copayment accumulator programs, the AACU co-sponsored a resolution at the 2019 Interim Meeting of the American Medical Association House of Delegates that called for the development of model state legislation regarding copayment accumulators for all pharmaceuticals, biologics, medical devices, and medical equipment.

We consider HB 469 to be a valuable example of legislation to achieve this goal. Therefore, we urge continued support for HB 469 to allow patients to receive direct financial assistance for medically necessary therapies.

Thank you for your consideration.

Sincerely,



Elliott Lieberman, MD  
President  
American Association of Clinical Urologists



William C. Reha, MD, MBA  
Chair  
AACU State Advocacy Network