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The American Urological Association (AUA) represents more than 15,000 urologists nationally, who care for patients with conditions affecting the urinary-tract system. As the preeminent professional urological organizations, we are committed to patient-centered legislative, regulatory, and ethical policies conforming with best practices in adult and pediatric urology. We are writing to support the elimination of co-pay accumulator programs used by health insurance carriers.

Pharmaceutical companies develop discount card programs to assist qualifying patients with their co-pay or out-of-pocket expense for the purchase of their name brand drugs, which they could not otherwise afford. When you use a co-pay card, the manufacturer pays part or all of the cost you are responsible for, also known as your co-pay or deductible. Health insurance carriers use co-pay accumulator programs to prevent the application of the manufacturer's payments to the patient's deductible.

For example: You are enrolled in an insurance plan with an annual \$2,000 deductible. You enroll in a pharmaceutical manufacturer co-pay coupon program worth \$1,000.

No Co-pay Adjustment Policy: The \$1,000 coupon *counts* toward your annual deductible: \$2,000 - \$1,000 = \$1,000. You are then responsible for the remaining \$1,000 before reaching the deductible.

With Co-pay Adjustment Policy: The \$1,000 coupon *does not count* toward your deductible: \$2,000 - \$0 = \$2,000. You then have to pay the full \$2,000 before satisfying the annual deductible.

A [Kaiser Family Foundation](#) poll found nearly one in four Americans find it difficult to afford their medicine, especially those with complex or chronic conditions (such as cancer or diabetes), with about three out of ten (29%) patients report not taking their medicine as prescribed because of the cost which made their condition worse as a result, allowing for adverse physical effects; increasing the costs to the patient, insurer, and community. A health insurer's co-pay accumulator program prevents the amount of a pharmaceutical manufacturer's card discount program payments from counting toward the patient's deductible and out-of-pocket maximums.

According to the National Conference of State Legislatures (NCSL), in spring 2022, laws in [15 states and Puerto Rico](#) requiring any payment or discount made by or on behalf of the patient be applied to the patient's annual out-of-pocket cost-sharing requirement.

The American Urological Association urge support for HB 135 to allow patients to receive direct financial assistance for medically necessary therapies.

Thank you for your consideration.

Headquarters

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