



**National  
Multiple Sclerosis  
Society**

Ohio General Assembly – House Committee on Public Health Policy

Testimony of Holly Pendell,  
AVP of Advocacy and Activist Engagement, National Multiple Sclerosis Society  
Support of HB 177  
October 11, 2023

Chairman Lipps, Vice Chair Stewart, Ranking Member Liston and Members of the House Committee on Public Health Policy, thank you for the opportunity to provide testimony on House Bill (HB) 177. I am writing today on behalf of the National Multiple Sclerosis Society in support of HB 177, which addresses copay accumulator programs that affect patients' access to health care. We respectfully ask the Public Health Policy Committee to favorably report HB 177.

Multiple sclerosis (MS) is an unpredictable disease of the central nervous system. Currently there is no cure. Symptoms vary from person to person and may include disabling fatigue, mobility challenges, cognitive changes and vision issues. An estimated 1 million people live with MS in the United States. Early diagnosis and treatment are critical to minimize disability. Significant progress is being made to achieve a world free of MS.

When someone is diagnosed with MS, their clinician will typically prescribe a medication referred to as a disease-modifying therapy (DMT). DMTs are used to modify the disease course, treat relapses, and manage symptoms. Growing evidence indicates that early and ongoing treatment with DMTs is the best way to prevent the accumulation of disability and protect the brain from permanent damage due to MS.

MS is an expensive disease to live with and treat, impacting the healthcare system, health plans and, of course, families affected by MS. A person with MS spends three times as much out-of-pocket than the average person in employer plans. DMTs are approximately 75% of the cost of treating MS. DMTs are essential for many people with MS—but their prices have skyrocketed. In 2023, the median annual price of MS DMTs is \$97,492. Six of the MS DMTs have increased in price by more than 200% since they came on the market, with eleven now priced at over \$100,000. Although there are now more than twenty DMTs on the market (including three generic copies of the same DMT), competition has not driven down their price, and the majority have increased in price several times each year. People with MS often face a high deductible and later co-insurance—meaning they are often responsible for thousands of dollars in out-of-pocket costs. This poses a significant challenge in accessing needed medications.

Further, co-insurance for these treatments can be as high as 40% in some health plans. A study by Prime Therapeutics showed that one in four patients do not fill their DMT prescription likely due to the high cost-sharing burden they would require.<sup>1</sup> Moreover, the common perception that less costly alternatives to high cost DMTs are available is simply false and not substantiated by any evidence.

It is therefore not surprising that a survey of over 12,000 respondents living with MS revealed as many as 70% relied on help from a copay assistance program in order to maintain access to these treatments.



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However, copay accumulators, the programs this bill seeks to limit, are used to prohibit prescription drug assistance or other forms of charity from applying towards a patient's annual deductible or out-of-pocket maximum amounts. Copay accumulator programs effectively 'blame the victim' by disallowing copay assistance from counting toward a patient's annual deductible and out-of-pocket maximum amounts. This prevents or delays vulnerable individuals from reaching the financial relief of the deductible and annual out-of-pocket cap features of their health insurance plan.

Copay accumulators are not simply harmful to people living with MS, but all patients. In my position at the Society, I was appointed as a member of the Ohio Prescription Drug Transparency and Affordability Council by Governor DeWine, along with statewide business leaders including the Ohio Manufacturers' Association and the Ohio Business Roundtable labor unions, various state agencies, including AARP and other groups. Our charge was to "pursue change that will relieve the burden on Ohioans in need of prescription medications while preserving taxpayer dollars, improving transparency, and creating efficiencies across health care systems."

After extensive hearings and the discussions concerning the numerous presentations made by many groups that came before the Council, the Council, unanimously issued a report, which I have also attached, making several recommendations to the Governor and Ohio General Assembly on how to better assist purchasers and consumers of prescription drugs to address cost factors. One of those important recommendations was "Find Additional Ways to Benefit the Consumer."

This recommendation, and I am quoting directly from this report, said Ohio should "expand options for the use of copayment programs produced by drug manufacturers to help defray the costs of expensive medications." The report further said, "Customers would benefit if these copayment programs could be applied to members' deductibles and out of pocket maximums." Additionally, in the formulation of this recommendation, no party, including the business organizations on the Council, whom you may hear from in the future, expressed any concern or objection that this practice would increase costs or premiums to purchasers.

The National Multiple Sclerosis Society has called on all stakeholders in the prescription drug supply chain to come together and find real solutions to escalating price increases, barriers to care and a system too complex to navigate. Until we find real solutions to the challenges in our healthcare system that prevent people from affordably accessing the care and treatments they need, we cannot rip away the band-aids people have come to rely on—like copay assistance programs. Mechanisms like copay accumulators primarily impact people who are seeking whatever avenue they can find to be able to take their needed medication.

The National Multiple Sclerosis Society supports solutions that help safeguard access for people who need life-changing medications, without getting them caught in the middle of struggles between other stakeholders.



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I close with this; Ohio lawmakers have the chance to truly help patients and families by passing meaningful copay assistance reforms after having failed to do so over the last five years. While patients and advocates have been working on this legislation, many patients have gone without medication, accrued thousands in medical debt and progressed in their disability while waiting for relief from an unjust insurance practice only you can provide. As such, I implore you to act quickly to advance this legislation and encourage you to urge your Senate colleagues to act without delay.

I will close by thanking Representative Manchester who has worked tirelessly, alongside advocates, to try to address many of the challenges brought by the opponents of the bill and I thank the Chairman for his continued goodwill toward patients and advocates as we work towards passage.

Please support HB 177. Should you have any questions, please contact me at [holly.pendell@nmss.org](mailto:holly.pendell@nmss.org).

<sup>[1]</sup> Gleason P, 'Specialty pharmacy costs are rising and insurers are focusing on better ways to manage costs', Prime Therapeutics press release June 17, 2009.

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<sup>i</sup> Gleason P, 'Specialty pharmacy costs are rising and insurers are focusing on better ways to manage costs', Prime Therapeutics press release June 17, 2009.