## National Multiple Sclerosis Society Submitted Comments on Ohio House Bill 469 November 10, 2020

Holly Pendell
Director, Advocacy & Activist Engagement
Holly.Pendell@nmss.org

The National Multiple Sclerosis Society appreciates the opportunity to submit comments in support of House Bill 469. We thank Representatives Manchester and West for introducing legislation that if passed, will assist people living with multiple sclerosis (MS) access the medications they need to live their best lives.

Copay accumulators (or accumulator adjustment programs) began from the belief that drug manufacturers' patient assistance programs are discouraging patients and their doctors from choosing generics or less-costly prescription drug alternatives. These programs are used to prohibit prescription drug coupons or other forms of charitable assistance from applying towards a patient's annual deductible or out-of-pocket maximum amounts, though the insurers are receiving full payment for the medication.

For people living with MS copay accumulators make it more difficult to receive the disease modifying therapies (DMTs) they need. As many as 40% of people living with MS rely on some copay assistance to maintain access to their disease-modifying therapy. With the implementation of copay accumulator programs, people with MS are experiencing higher cost burdens as they struggle with unexpected expenses during their deductible period.

Recently we were alert to an upcoming practice that increases our concern regarding copay accumulator programs. Starting January 1, 2021, United Healthcare will require providers to report the amount their patients receive in copay assistance for treatment administered in their offices. The specialty drugs targeted by this policy are expensive; however, they are also critical to a patient's disease course and could include MS DMTs. Most of the drugs have no generic equivalents or therapeutic alternatives, meaning patients do not have lower-cost options. Additionally, this policy places providers in an ethically objectionable position by requiring they report information that would be used to harm patients. The copay accumulator restrictions proposed by UHC threaten patients' access to treatment. As such, reporting this information would likely harm the patient as well as the doctor-patient relationship, and would be unethical under AMA guidelines.

DMT's and symptom management medications are critical to slow the progression of MS. In 2020, the median price of these therapies was over \$90,000 a year. The three generics currently available cost between \$63,000 and \$65,000 per year. Of the eight products that cost more than the median price, more than half have been on the market for eight years or longer, some as long as 25 years.

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. Medications must be affordable, and the process for getting them simple and transparent. House Bill 469 offers provisions that will allow consumers to receive assistance of any kind to pay for their medications and for that assistance to count towards their deductible. Ohio lawmakers have an opportunity to address a significant drug price issue by passing House Bill 469. Thank you for your consideration of this legislation. Please let me know if I can be of assistance to you and your work in the future.