

Proponent Testimony on House Bill 135
Senate Health Committee
November 30, 2022

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Chairman Huffman, Vice Chairman Antani, Ranking Member Antonio and members of the committee, my name is Christine Pfaff, RPh, and I am the Regional Director of Operations for the Zangmeister Cancer Center in Columbus and Hematology Oncology Center (HOC) in Elyria. On behalf of the physicians, patient financial advocates, and patients at the Zangmeister Center and HOC, we appreciate the opportunity to submit testimony in support of House Bill 135.

As a practice leader working directly with patients, I advocate strongly in support of HB 135. Along with the other members of the Community Oncology Alliance, we adamantly oppose copay accumulator policies because they prevent cancer patients, who need financial assistance, from meeting their out-of-pocket maximums. As a result of higher out-of-pocket costs, we increasingly watch our patients find the cost of cancer care prohibitive and they are forced to limit or stop their treatments. Patients may choose to take a tablet every other day instead of the prescribed daily dose or skip refills. The financial bridge that helps patients stay on treatment, that is offered by foundations and manufacturer copay card programs, is taken away when insurers implement copay accumulators.

As one of over 65 patient advocacy groups and professional health care organizations who support HB 135, we strongly believe this legislation will remove roadblocks for Ohioans trying to access affordable medications by allowing assistance obtained by copay cards and foundations to apply to their deductible. The unnecessary financial harm by insurers and pharmacy benefit managers (PBMs) on patient care through copay accumulator policies has a devastating effect on a patient's prognosis and potentially their survival.

Many drug manufacturers, charities, and foundations offer financial assistance to commercially insured patients to help them afford their prescription medications. Almost half of all cancer patients are commercially insured (not on Medicare or Medicaid) and may qualify to use this assistance to help pay insurance deductibles, copays, and/or coinsurance to reduce out-of-pocket drug costs. Under copay accumulator policies, which deny the value of the third-party assistance from applying to the patient's out-of-pocket maximums, this shifts the costs of cancer treatment back to our patients who we are trying desperately to help.

Patients who rely upon assistance programs for expensive therapies are the most vulnerable. Patients acutely need these medicines as they battle cancer. Our providers believe strongly in using the lowest-cost, highest quality treatments for patients. As you may have heard from others, 99.6 percent of all patient assistance programs are for drugs with no generic or biosimilar alternatives. There are often no lower-cost alternatives or generic drugs available to treat these diseases.

Patients are often working full-time to afford the out-of-pocket costs associated with their illness, and for many, copay accumulator programs make out-of-pocket costs unsustainable. Insurers and PBMs selfishly utilize copay accumulator programs to their benefit, not to help patients in need. I have spoken with patients who simply can not afford to pick up their prescriptions. They deserve financial assistance from copay cards and foundations to be applied to their deductible. Patients are choosing between feeding their family and paying utility bills and their cancer medications, when assistance is available to them and they are forced by their insurer to pay additional money unfairly.

Over the past ten years, as cancer treatments have advanced greatly and survival has increased, treatment decisions have changed from solely care-based decisions to financial decisions. As more and more patients are forced into high-deductible health plans, this concern is exacerbated. The Zangmeister Cancer Center and HOC oppose the use of copay accumulator programs for all financially vulnerable patients and strongly urges you to pass HB 135.