

House Bill 177 Proponent Testimony

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American Diabetes Association®
House Public Health Policy Committee
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Chairman Lipps, Vice Chair Stewart, Ranking Member Liston, and Members of the House Public Health Policy Committee:

My name is Gary Dougherty and I am the Director of State Government Affairs for the American Diabetes Association® (ADA), the nation's leading voluntary health organization fighting to bend the curve on the diabetes epidemic. Founded in 1940, the ADA is made up of people with diabetes, healthcare professionals, research scientists, and other concerned individuals. The ADA's mission is to prevent and cure diabetes and to improve the lives of all people affected by diabetes.

I regret that I am unable to join you today; however, I want to thank Representative Manchester for sponsoring House Bill 177, which would ensure that the value of co-pay assistance programs is applied toward a patient's deductible, and urge your support for the bill.

Through policies known as co-pay accumulator adjustments, health plans will accept a patient's co-pay card or coupon but may not credit the amount toward the patient's deductible or out-of-pocket maximum. As a result, patients are forced to pay more out of their own pocket while health plans pocket both the assistance payment as well as the patient's co-pay. Blocking patient assistance can threaten the health of patients with chronic diseases like diabetes and lead to medication non-adherence or rationing. ADA research has shown that, for at least one in six insulin users, cost has impacted their use. Rationing or skipping doses of insulin is unsafe and can lead to costly and preventable emergency room and hospital visits.

For individuals living with rare and chronic conditions, like diabetes, the high cost of treatment has a direct impact on patient access. Many patients and their families rely on copay assistance programs from manufacturers and nonprofit organizations to afford the medications they need to manage their conditions - medications that rarely have generic alternatives.

Diabetes is a serious disease and must be managed according to the needs of each individual person. The ADA believes that every person living with diabetes should have access to the care, treatments, tools, and information they need to successfully manage their diabetes. It is vital that



people with diabetes have the opportunity to work with their health care providers to choose the most appropriate therapeutic option that best meets their individual needs at that particular time. To ensure their access to life-saving treatment, the practice of co-pay accumulator adjustments must be eliminated.

It's important to note that the Ohio Prescription Drug Transparency and Affordability Council studied the issues of transparency, pricing, and accessibility of prescription drugs in the State of Ohio and, in its 2020 <u>report</u>, made the recommendation to "(e)xpand options for the use of copayment programs produced by drug manufacturers to help defray the cost of expensive medications." The Council further declared that "(c)ustomers would benefit if these copayment programs could be applied to members' deductibles and out of pocket maximums."

HB 177 is very similar to bi-partisan legislation (HB 135) that passed the House last session by a unanimous vote of 89-0. Nineteen states have already enacted similar legislation to protect patients from this practice – all with overwhelming, bipartisan votes.

Ensuring all people with and at risk for diabetes have access to adequate and affordable health care is among ADA's principal policy priorities. HB 177 will help achieve that goal.

At a time when Ohioans are already struggling financially from high medical costs, we ask that you support and quickly pass HB 177 so patients can afford their medications, stay adherent to their treatments, and reduce the need for expensive hospitalization.

Thank you very much for your attention. If you have any questions, please direct them to me at gdougherty@diabetes.org and I will do my best to answer them for you.