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February 8, 2021

Chair Delores G. Kelley  
Senate Finance Committee  
Legislative Services Building  
90 State Circle  
Annapolis, MD 21401

Dear Chairwoman Kelley and Members of the Senate Finance Committee,

On behalf of the Multiple Sclerosis Association of America (MSAA) – a 501c3 focused on the mission of improving lives today within the greater multiple sclerosis community and nationwide – we respectfully request your support, and the support of your colleagues, for Maryland Senate Bill 290 to help protect medically vulnerable populations such as those living with multiple sclerosis (MS).

With over 50 years of dedicated service, MSAA has established an excellent record of fair and balanced public positions on various MS issues and prioritizing the needs of patients and their care partners. As a leading resource for the entire MS community, and dedicated to improving lives through vital services and support, we are strong advocates for lowering sky-rocketing drug costs that many individuals living with chronic diseases, like MS, are facing.

Copay accumulator programs that are now trending across the country deplete any financial assistance that copay cards can provide to lower- and middle-income families. According to a 20-year analysis published by Oregon State University, a significant portion of common medications used to treat MS have more than doubled their market price resulting in prescription costs reaching \$100,000 or more. In return, patients on expensive disease modifying therapies (DMTs) are forced to either adjust their treatment plans or forgo filling their prescriptions entirely.

When patients are forced to ration their drug therapy treatments, the results can be costly for both their health and the economy. Medication adherence can be challenging for any chronic condition, but even more so for those who depend on their drug therapies to increase their daily quality of living by keeping severe symptoms at bay. Copay coupons from drug manufacturers can not only have a significant impact on an individual's economic viability, but also provide opportunity for patients to shift their focus to other meaningful areas of life such as work and helping their community. In contrast, non-adherence can lead to an increase in emergency department visits and hospital stays that are 100 percent preventable. A review published by the Annals of Internal Medicine estimates that non-adherence can cost the healthcare system anywhere between \$100 and \$289 billion annually.

At MSAA, we believe that we share a common goal – to lower the financial healthcare burden on families nationwide. No one should have to choose between buying food for their family, or paying to heat their home in the winter, over life-saving medications – especially with our current economy in the wake of COVID-19. While



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we have made tremendous strides in developing new drug therapy regimens over the past two decades, the benefit is lost if patients with MS cannot afford to access those medications. Copay accumulator programs create just another barrier to accessible treatments for anyone living with a chronic illness. Passing SB 290 (cross-filed with HB 167) will not only improve the lives of the MS community residing in the great state of Maryland but establishing state legislation that protects patients will ultimately influence these decisions at the national level as well.

Should you have any questions, we would be more than willing to provide further insight into our concerns about the impact copay accumulator programs may have on increasing drug costs for MS patients. I may be reached at (800) 532-7667, x144 or [rking@mymsaa.org](mailto:rking@mymsaa.org). Thank you for your time and considering our written testimony.

Respectfully,

**Rebecca King**

Director of Education and Healthcare Relations

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