



January 11, 2022

The Honorable Denise Tepler, Co-Chair
The Honorable Heather Sanborn, Co-Chair
Joint Committee on Health Coverage, Insurance and Financial Services
Maine Legislature
100 State House Station
Cross Building – Room 220
Augusta, ME 04333

Dear Representative Tepler (Co-Chair), Senator Sanborn (Co-Chair), and Members of the Committee,

The Northern New England Clinical Oncology Society (NNECOS) and the Association for Clinical Oncology (ASCO) are pleased to support **LD 1783: An Act To Require Health Insurance Carriers and Pharmacy Benefits Managers To Appropriately Account for Cost-sharing Amounts Paid on Behalf of Insureds**. Committee passage of LD 1783 would be a crucial step in helping protect Maine patients with cancer from burdensome out of pocket costs.

NNECOS is a professional organization whose mission is to facilitate improvements for Maine physician specialties in both hematology and oncology. NNECOS members are a community of hematologists, oncologists, and other physicians who specialize in cancer care. ASCO is a national organization representing physicians who care for people with cancer. With nearly 45,000 members, our core mission is to ensure that cancer patients have meaningful access to high quality, equitable cancer care.

NNECOS and ASCO are committed to supporting policies that reduce cost while preserving quality of cancer care; however, such policies should be developed and implemented in a way that does not undermine patient access. This bill addresses a key issue for cancer patients - copay accumulator programs that target specialty drugs for which manufacturers often provide copay assistance. A co-pay accumulator program prevents a manufacturer's assistance from applying toward a patient's co-pay or out-of-pocket maximum. With these programs in place, patients will experience increased out of pocket costs and take longer to reach their deductibles. By prohibiting manufacturer assistance funds from counting toward patient premiums and deductibles, co-pay accumulators negate the intended benefit and remove a safety net for patients who need expensive specialty medications but cannot afford them.

While co-pay accumulator programs are often described as a benefit for patients, these programs actually harm patients. These programs lack transparency and are often implemented without a patient's knowledge or full understanding of their new "benefit. Increases in out-of-pocket costs for the patient can result in significant adverse impacts on patient finances, which contribute to medical bankruptcies and disproportionately affects low-income populations. For all of these reasons, co-pay accumulator programs could jeopardize outcomes, as patients may decide to forego or discontinue treatment or seek different treatment for non-medical reasons. If a patient does forego care, this decision will lead to poorer health outcomes and higher costs to the health care system.

NNECOS and ASCO are encouraged by the steps that LD 1783 takes toward eliminating co-pay accumulator programs in Maine and we therefore urge your office to support the measure. For a more detailed understanding of our policy recommendations on this issue, we invite you to read the [ASCO Position Statement on Co-Pay Accumulators](#) by our affiliate, the American Society of Clinical Oncology. Please contact Sarah Lanford at ASCO at sarah.lanford@asco.org or Lori Aubrey at NNECOS at laubrey@nnecos.org if you have any questions or if we can be of assistance.

Sincerely,



John Winters III, MD
President
Northern New England Clinical Oncology Society



Howard A. Burris III, MD, FACP, FASCO
Chairman of the Board
Association for Clinical Oncology