

I am writing in support of Senate Bill 560. I support this bill because recent policy changes made by insurers have created significant barriers to care for patients with chronic disease. Patient assistance, sometimes called co-pay cards, helps offset the patient out-of-pocket costs. For many patients in Rheumatology, the only way they can access medications is through patient assistance. Rheumatic diseases are progressive and chronic. These medications, such as Humira for rheumatoid arthritis and Benlysta for lupus, have changed patients' lives, allowing them to continue working, raising families, and contributing to society.

The long-term social cost of untreated or under-treated rheumatic disease is astronomical. Without these medications, patients face permanent joint deformity. Our grandparents had no option but to live with mangled hands and crippled backs. We have the ability to prevent that. A generation ago, lupus patients faced early death due to kidney damage that we can now address with medication. Untreated, or under-treated, rheumatic disease costs patients their eyesight. It robs patients of the ability to focus and function.

We live in an age of scientific marvels, including medications that were not available a generation ago. Some of these medications are expensive, and we all bear the cost. Making medications unaffordable in a bid to prevent patients from using them is unconscionable. It also makes no economic sense. If insurers refuse to count patient assistance toward the patient out-of-pocket costs, patients will forego lifechanging, necessary treatment at the expense of their lives. These policy saves money for insurers while increasing long-term costs for everyone.