Immune
Deficiency
Foundation

Fostering a community empowered by advocacy, education, and research

March 8, 2023

Chairman Deb Patterson
Senate Committee on Health Care
900 Court St NE, S-411
Salem, OR, 97301

RE: Support for SB 565

The **Immune Deficiency Foundation (IDF) strongly supports Senate Bill 565.** This legislation would ensure that co-pay assistance programs, a vital source of assistance for patients to afford medication, will count towards any out-of-pocket or deductible requirement under the patient's health plan. Ensuring patients have access to affordable health care is among IDF's principal policy priorities, and SB 565 will help achieve that goal.

IDF is dedicated to improving the diagnosis, treatment, and quality of life of people affected by primary immunodeficiency (PI) through fostering a community empowered by advocacy, education, and research. Individuals with PI have one of the more than 450 rare disorders in which a person's immune system fails to function properly because of genetic or intrinsic defects. Individuals with PI are highly susceptible to recurrent, persistent, and severe infections, which without treatment, can lead to organ damage and often require significant interventions and hospitalization. Fortunately, most people with PI can live healthy, productive lives if they receive lifelong immunoglobulin infusion treatments. However, immunoglobulin costs, on average, $7,500 to $10,000 per month, and there is no generic form of this lifesaving treatment.

To help temper these high prescription costs, many individuals living with PI receive co-pay assistance for their specialty medication. Many of those receiving assistance enroll in the co-pay assistance programs offered by the manufacturer that produces their medication. This assistance is extremely helpful to those who would be required to pay their entire annual deductible or out-of-pocket maximum at the beginning of their plan year. The amount covered by these programs is intended to be counted toward the individual's deductible or out-of-pocket maximum, decreasing the amount of money one must spend before their benefits are activated for the year.

A co-pay accumulator program is a health insurance feature that stipulates that payment from these manufacturer assistance programs may not be counted toward an individual's deductible or out-of-pocket maximum, eliminating any long-term benefit to the patient. While they would stave off high costs of medications in the short-term, once the limit for the co-pay program has been reached, the beneficiary would have to pay their full deductible or out-of-pocket maximum for the year before their benefits would begin to cover their medical costs.

Instead of allowing manufacturer assistance programs to alleviate the financial burden of high cost specialty medications, co-pay accumulator programs ensure that the burden is merely postponed. This is not fair to patients who rely on these expensive medications for which there is no generic equivalent. It also unfair that the insurer receives double payment, once from the assistance program and again from the patient since the assistance payment cannot be applied to the deductible.

We ask for your support on SB 565 to protect all Oregon residents, including those with PI, from unnecessary and burdensome prescription medication costs.

Sincerely,

Matthew Prentice, MPH
Director of State Policy
Immune Deficiency Foundation
443-470-6466
mprentice@primaryimmune.org