



**National  
Multiple Sclerosis  
Society**

May 8, 2023

Oregon State Legislature  
House Behavioral Health & Health Care Committee

**RE: SUPPORT SB 608 A2 amendment language: copays count**

Chair Nosse, Vice-Chairs Goodwin and Nelson, committee members,

On behalf of the National Multiple Sclerosis Society (Society), we are writing today to support legislation which allows third-party payments made by or on behalf of a health care plan enrollee count towards their out-of-pocket maximum and deductible, regardless of source. We ask the House Behavioral Health & Health Care Committee to adopt the -A2 amendments to SB 608 and refer positively out of committee.

Multiple sclerosis is an unpredictable disease of the central nervous system. Currently there is no cure. Symptoms vary from person to person and may include disabling fatigue, mobility challenges, cognitive changes, and vision issues. An estimated 1 million people live with MS in the United States. Early diagnosis and treatment are critical to minimize disability. Significant progress is being made to achieve a world free of MS. The Society works to cure MS while empowering people affected by MS to live their best lives. To fulfill this mission, we fund cutting-edge research, drive change through advocacy, facilitate professional education, collaborate with MS organizations around the world, and provide services designed to help people affected by MS move their lives forward.

The Society's vision is a world free of MS and our mission is that we will cure MS while empowering people affected by MS to live their best lives. Our advocacy around expanding access to comprehensive, affordable health care is based largely on the Society's [Access to High Quality Healthcare Principles](#). It is through this lens that we evaluate any policy proposal put forth to assess its impact on healthcare needs for people affected by MS. The availability of MS disease modifying therapies (DMTs) has transformed the treatment of MS over the last 25 years. Unfortunately for people affected by MS, the price of MS treatments continues to skyrocket. This year, 2023, the average brand price for MS DMTs is \$97,492, six MS DMTs have increased in price by more than 200% since they came on the market, with nine now priced at over \$100,000. Additionally, people living with MS often face a high deductible and later co-insurance costs—meaning they are often responsible for thousands of dollars in out-of-pocket costs each plan year. This poses a significant challenge in accessing needed medications.

Copay accumulators (or accumulator adjustment programs) began from the belief that drug manufacturers' patient assistance programs are discouraging patients and their doctors from choosing generics or less-costly prescription drug alternatives. These programs are used to prohibit prescription



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drug patient assistance funds, and other forms of prescription drug manufacturer assistance, from applying towards a patient’s annual deductible or yearly out-of-pocket maximum amounts.

In MS, not counting patient assistance towards total costs makes it much more difficult for people to get the healthcare they need. As many as 70% of people living with MS rely on assistance programs to maintain access to their disease-modifying therapy. With the implementation of copay accumulator programs, people with MS are experiencing higher financial burdens as they struggle to meet expenses during their deductible period. **It is well-known that people with chronic and high-cost conditions like MS face significant financial hardship each year until their deductible has been met and the full relief of their health insurance kicks in.** This hardship is made worse by “copay accumulator” programs because preventing copay assistance from applying to a person’s deductible means it takes them longer to reach the end of the deductible period. Because patients are responsible for 100% of their health care costs until the deductible is satisfied, prolonging the deductible period can put other medical needs—such as doctors’ visits, rehab therapies, MRIs, or other medications—financially out-of-reach. **Currently, 4 of 6 Oregon health plans DO NOT count patient assistance programs<sup>1</sup>, costing your constituents thousands of dollars in added out-of-pocket costs each year.**

The Society has called on all stakeholders in the prescription drug supply chain to come together and find real solutions to escalating price increases, barriers to care, and a system too complex to navigate. It is reasonable to question the role of copay assistance programs and the potential role they play in cost and access issues—but this should not be the first change that happens. Until we find real solutions to the challenges in our healthcare system that prevent people from affordably accessing the care and treatments they need, we cannot rip away the “band-aids” people have come to rely on—like copay assistance programs.

The National MS Society supports solutions that help safeguard access for people who need life-changing medications, without getting them caught in the middle of struggles between other stakeholders. Please adopt the -A2 amendments to SB 608. Should you have any questions, please contact me at [Seth.Greiner@nmss.org](mailto:Seth.Greiner@nmss.org)

A handwritten signature in blue ink, appearing to read "Seth M. Greiner". The signature is fluid and somewhat abstract, with overlapping loops and a long horizontal stroke at the bottom.

**Seth M. Greiner**  
National Multiple Sclerosis Society  
Senior Manager, Advocacy  
[seth.greiner@nmss.org](mailto:seth.greiner@nmss.org)

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<sup>1</sup> The AIDS Institute: Copay Accumulator Adjustment Programs, Feb. 15, 2023. Accessed online: <https://theaidsinstitute.org/copays>