



Insurance and Real Estate Committee

March 1, 2011

Testimony of the American Cancer Society

FTR

RE: SB 1084, An Act Concerning Out-Of-Pocket Expenses For Non-preferred Brand Name Drugs.

We have made significant progress in recent years in addressing the cancer problem. Cancer death rates have decreased by 18.4% among men and 10.5% among women since the early 1990s. Despite this significant progress, the American Cancer Society realizes that its long-term goals of reducing the incidence and mortality of cancer cannot be achieved unless the gaps that exist within the current health care system are addressed. The challenge lies in the fact that our current health care system is not up to the task.

In the absence of a system that ensures adequate, affordable coverage, a cancer diagnosis can quickly translate to bankruptcy for families and in the worse case scenarios, the inability to access potentially lifesaving treatments and medications. As such, we must ensure that healthcare reforms in Connecticut meaningfully meet the needs of all individuals diagnosed with cancer.

SB 1084 seeks to prohibit insurers from imposing a greater coinsurance, copayment, deductible or other out-of-pocket expense for non-preferred brand name drugs than for preferred brand name drugs. ***While we do not have a formal position on this legislation, we agree with the premise of limiting patient out-of-pocket costs for treatment. Also, as costs to patients rise, we know they sometimes choose not to pursue therapy or go with a choice that is less expensive and often less effective, another outcome we should all strive to avoid.***

When individuals are deterred by co-pays in obtaining needed medications, the cost associated with untreated diseases that had the potential of being treatable through medication are much higher. For some individuals a co-payment of \$10 is too much to afford during these economic conditions, and is a deterring factor in obtaining a potentially life-saving medication. In fact, one in five persons with insurance use all or most of their savings because of the financial cost of dealing with cancer.

We believe that all people should have unimpeded access to comprehensive, quality health care services. This care includes cancer prevention, early detection, diagnosis and treatment, rehabilitation and long-term care through the end of life. The Society recognizes that serious gaps exist in accessibility, affordability, administrative simplicity and adequacy of health care for many people, which must be addressed by the nation as a whole.

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