



Insurance and Real Estate Committee

March 6, 2014

Written Testimony Submitted by Paul Gileno, President, US Pain Foundation

HB 5251: An Act Limiting Out-of-Pocket Expenses for Prescription Drugs

---

On behalf of the US Pain Foundation and the 100 million chronic pain sufferers throughout the United States, and right here in Connecticut, I wish to register our support of HB 5251. People living with chronic conditions are particularly vulnerable to rising out-of-pocket medical spending. This piece of legislation would protect patients facing cancer, multiple sclerosis, rheumatoid arthritis, HIV/AIDS, hemophilia, and other conditions who are subjected to disproportionately high co-payments or co-insurance costs.

Employer-sponsored insurance and Medicare health insurance premiums are generally shared across all policyholders; however, increased out-of-pocket spending at the point of care differentially burdens people with chronic conditions who require multiple services to maintain optimal health and treat disease. Increasing out-of-pocket spending reduces the use of clinically important services and drugs that prevent new onset and progression of chronic disease. Reduced drug adherence includes delaying prescriptions fills, failing to fill prescriptions, cutting dosages, and reducing the frequency of administration.

I, along with patients with high annual medication costs, including those whose drugs are not on a specialty tier, would directly benefit from HB 5251. The bill would limit a patient's out-of-pocket cost for any single prescription to \$100 for a 30-day supply. In addition, it would limit an individual's out-of-pocket cost for medications to \$3,175 per year and for families it would be \$6,350 per year. Many of our patients -- having already endured long periods of high medical need -- have exhausted their financial resources. For them, high cost-sharing puts their medications out of reach.

HB 5252 addresses key policy issues intended to improve patient care by adding important patient protections. It does not prevent insurers from using tiered co-payment structures nor would it prevent insurers from using utilization management techniques to control medication costs. Raising copayments and deductibles for drugs and services reduces adherence and can lead to poor disease control. I respectfully urge you to support HB 5252.

[info@uspainfoundation.org](mailto:info@uspainfoundation.org)  
[www.uspainfoundation.org](http://www.uspainfoundation.org)

Main: (800) 910.2462  
Fax: (800) 929 -4062

670 Newfield Street, Suite B  
Middletown, CT 06457