



**National
Multiple Sclerosis
Society**

Connecticut General Assembly – Human Services Committee
Public Hearing – March 4, 2021
HB 6446

Testimony of Laura Hoch,
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Senator Moore, Representative Abercrombie, Senator Berthel, Representative Case and Members of the Human Services Committee, thank you for the opportunity to provide testimony on HB 6446, An Act Concerning the Governor’s Budget Recommendations for Human Services, and how it affects those who live with Multiple Sclerosis (MS).

MS is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and body. Symptoms vary from person to person and range from numbness and tingling to walking difficulties, fatigue, dizziness, pain, depression, blindness and paralysis. The progress, severity and specific symptoms of MS in any one person cannot yet be predicted, but advances in research and treatment are leading to better understanding and moving us closer to a world free of MS. Nearly 1 million people in the United States and 2.3 million worldwide are currently living with MS.

The National MS Society (Society) is concerned about the proposal set forth in the Governor’s budget to implement an asset test when determining an individual’s qualification for the Medicare Savings Program (MSP). Many people living with MS were working full time at the point of diagnosis. Studies show that, ten years after diagnosis, only 40% of those individuals remain in the workforce. Because most in the MS community who qualified for MSP have a history of employment before diagnosis, they may have more assets than others in the program and could therefore be rolled off coverage completely or qualify for an MSP tier with less benefits. This, despite the fact that their overwhelming healthcare expenses could lead to a complete loss of all assets in a matter of years.

It is estimated that the cost of living with MS, including both direct and indirect costs, is upward of \$70,000 per year per person. A major part of these costs is often the prescription medications used to help slow the progression of MS and manage symptoms; these medications are known as disease-modify therapies (DMTs). As of 2020, the brand median price of DMTs was \$91,835 and five of them are priced at more than \$100,00 per year. To lose



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coverage in the middle of treatment would have a disastrous effect on an individual's physical and emotional health, as well as their financial well-being.

Aside from the direct impact to those living with MS, there is also the concern of cost to the state and success of the program. Implementing a program like this means an increased administrative burden. Costs to the state would accrue from the staff time it takes to track additional assets. These administrative costs will divert resources from MSP's goal of assisting those in need with the price of their Medicare premiums and other associated costs.

Additionally, one of the most common symptoms of MS is problems with cognitive function. Compounding already confusing filing and application systems with requirements for annual redetermination and additional requests for information leads to a greater risk of error. It would take a great deal of effort to gather the documentation needed in the annual process, especially for those with disabilities who may struggle to use the various systems required to gather them. This leads to a high incidence error, which then has the potential to lead to a denial or rejection, even if the individual would have otherwise qualified. Patients living with MS cannot afford to see a gap in coverage, both for their financial and physical well-being.

This change in the MSP program has the potential to be harmful for those living with MS and others in the state. The Society urges this committee to continue to operate the MSP program as it is and to avoid implementing asset tests. The state of Connecticut and this legislative body has an obligation to assist and protect its residents, including those living with MS.

Should you have any questions or concerns, please feel free to reach out to Laura Hoch at laura.hoch@nmss.org or (860) 913-2550 X52521.