



**National  
Multiple Sclerosis  
Society**

The Honorable Senator Deb Patterson, Chair  
The Honorable Senator Tim Knopp, Vice Chair  
Senate Committee on Health Care

**RE: Support SB 560 Copays count cost-sharing**

Chair Patterson, Vice Chair Knopp, committee members,

I am writing today on behalf of the National Multiple Sclerosis Society (the Society) supporting Senate Bill 560, which addresses copay accumulator programs that affect patients' access to health care. We respectfully ask the Senate Committee on Health Care to pass SB 560 out of committee.

Multiple Sclerosis (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 State and 2.3 million worldwide are currently living with MS.

MS is an expensive disease to live with and treat, impacting the healthcare system, health plans and of course, families affected by MS. A person with MS spends three times as much out-of-pocket than the average person in employer plans. Disease modifying treatments (DMTs) are approximately 75% of the cost of treating MS. Early and ongoing treatment with a disease modifying medication is the best way we know to slow the progression of MS, prevent the buildup of disability, and protect the brain from damage due to MS. While there are more than a dozen DMTs available they are not interchangeable, and we do not yet know which medication will work best for each person.

These medications are very expensive, average range from \$80,000/yr. to over \$100,000/yr., and people with MS often face a high deductible and later co-insurance—meaning they are often responsible for thousands of dollars in out-of-pocket costs. 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 drug coupons or other forms of prescription drug manufacturer assistance from applying towards a patient's annual deductible or out-of-pocket maximum amounts.

In MS, copay accumulators make it more difficult for people to get the healthcare they need. As many as 40% of people living with MS rely on copay assistance programs to maintain access to their disease-modifying therapy. With the implementation of copay accumulator programs, people with MS are



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experiencing higher cost burdens as they struggle with unexpected 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.

The National Multiple Sclerosis 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 inadvertently play in raising costs or impeding access—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. Mechanisms like copay accumulators primarily impact people who are seeking whatever avenue they can find to be able to take their needed medication.

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 support SB 560.** Should you have any questions, please contact me at [seth.greiner@nmss.org](mailto:seth.greiner@nmss.org)

Sincerely,

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

Seth Greiner  
Senior Advocacy Manager  
Washington State & Oregon  
National Multiple Sclerosis Society