



April 9, 2024

The Honorable Joseph J. Solomon, Jr., Chair  
House Committee on Corporations  
The State House  
82 Smith Street  
Providence, RI 02903

IN SUPPORT OF HOUSE BILL 8041  
*RELATING TO INSURANCE — PRESCRIPTION DRUG BENEFITS*

Dear Chair Solomon and Members of the House Committee on Corporations:

On behalf of the Epilepsy Foundation and our local affiliate, Epilepsy Foundation New England, we write in support of House Bill 8041 regarding the application of cost-sharing amounts toward deductibles or out-of-pocket maximums. This provision would ensure that all people with high prescription drug costs can continue to access needed medications, even if they receive assistance to afford their drugs.

The Epilepsy Foundation is the leading national voluntary health organization that speaks on behalf of more than three million Americans with epilepsy and seizures. Together, we foster the well-being of children and adults affected by seizures through research programs, educational activities, advocacy, and direct services. Epilepsy is a medical condition that produces seizures affecting a variety of mental and physical functions. Approximately 1 in 26 Americans will develop epilepsy at some point in their lifetime. For the majority of people living with the epilepsies, prescription medications are the most common and cost-effective treatment for controlling and/or reducing seizures.

This legislation would ensure that people with epilepsy who have trouble affording their medications can continue to access assistance. Issuers have instituted copay accumulator programs as a result of unfounded concerns that copayment reimbursements by prescription drug manufacturers incentivize physicians to prescribe more expensive drugs; however, this is an inappropriate assumption, especially concerning epilepsy. Epilepsy medications are not interchangeable, and treatment of epilepsy is highly individualized. There is no “one size fits all” treatment option for epilepsy, and the response to medications can be different for

each person. Maintaining seizure control with minimal side effects requires careful evaluation and monitoring by physicians and their patients. The selection of the appropriate medication to prevent seizures is determined by many variables, including type of seizure, seizure frequency, age, gender, and other health conditions. The treating physician is in the best position to make the judgment regarding which medication is most appropriate.

It is beneficial, and at times critical, to our community that individuals are able to receive copayment assistance. Our local affiliate, Epilepsy Foundation New England, provides financial assistance to help pay for the rising costs of medications. Prescription drug manufacturers, and other groups, also offer copayment assistance to individuals who may be struggling to afford their medications for various reasons. If any individuals are not able to afford their medications, even with insurance coverage, and copayment assistance programs play a critical role in ensuring they can gain and maintain seizure control. People living with epilepsy who have their medications switched, or who experience a delay in accessing their medication, are at higher risk for developing breakthrough seizures and related complications including death. Limits on access can also lead to significantly increased medical costs related to preventable seizures, along with lost wages and productivity — not just for the individuals living with epilepsy but also for their family members and communities.

The Epilepsy Foundation and Epilepsy Foundation New England urge you to support H8041 and move this legislation forward. Please do not hesitate to contact Dominique Brown, Senior Manager, State Relations & Policy at [dbrown@efa.org](mailto:dbrown@efa.org) with any questions.

Sincerely,



Bernice Martin Lee  
Chief Executive Officer  
Epilepsy Foundation



Susan Linn  
President & CEO  
Epilepsy Foundation New England

cc:

Representative William W. O'Brien,  
First Vice Chair  
Representative Justine A. Caldwell,  
Second Vice Chair  
Representative Stephen M. Casey  
Representative Anthony J. DeSimone  
Representative Alex S. Finkelman  
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