

April 29, 2025

ASSOCIATION CHAIR
OF THE BOARD

Eric P. Winer, MD, FASCO

ASSOCIATION TREASURER

Martin Palmeri, MD, MBA

ASSOCIATION DIRECTORS

Carolyn B. Hendricks, MD, FASCO

Mariana Chavez Mac Gregor, MD, MSc, FASCO

Taofeek K. Owonikoko, MD,

PhD, FASCO

Gladys I. Rodriguez, MD, FASCO

Lynn M. Schuchter, MD, FASCO

Eric J. Small, MD, FASCO

Emily Z. Touloukian, DO

Robin T. Zon, MD, FACP, FASCO

NON-VOTING DIRECTOR

Chief Executive Officer Clifford A. Hudis, MD, FACP, FASCO Representative Susan Donovan, Chair House Committee on Health and Human Services Rhode Island General Assembly 82 Smith Street Providence, RI 02903

Dear Chair Donovan and Members of the House Committee on Health and Human Services,

The Association for Clinical Oncology (ASCO) is pleased to support **HB 6209**, which would protect patients with cancer in Rhode Island from co-pay accumulator programs.

ASCO is an organization representing physicians who care for people with cancer. With over 50,000 members, our core mission is to ensure that cancer patients have meaningful access to high quality cancer care.

ASCO is committed to supporting policies that reduce cost while preserving quality of cancer care; however, it is critical that such policies be developed and implemented in a way that does not undermine patient access. Co-pay accumulator programs target specialty drugs for which manufacturers provide co-pay assistance. With a co-pay accumulator program in place, a manufacturer's assistance no longer applies toward a patient's co-pay or out-of-pocket costs. This means patients will experience increased out-of-pocket costs and take longer to reach required deductibles. By prohibiting these funds from counting toward patient cost-sharing requirements, co-pay accumulators negate the intended benefit of assistance programs and remove a safety net for patients who need expensive specialty medications but cannot afford them.

Co-pay accumulator programs lack transparency and are often implemented without a patient's knowledge or full understanding of the new "benefit." Far from being beneficial, co-pay accumulator programs increase patients' financial burden, many of whom are facing life-threatening illnesses. The impact is especially hard on low-income populations. Increasing patient cost can contribute to medical bankruptcy and cause patients to discontinue care, seek non-medical alternatives, or forego treatment altogether. The result is poorer health outcomes and greater cost to the system.

ASCO is encouraged by the steps HB 6209 takes toward eliminating co-pay accumulator programs in Rhode Island, and we strongly urge the Committee to pass the measure. For a more detailed understanding of our policy recommendations on this issue, we invite you to read the ASCO Policy Brief on Co-Pay Accumulators by our affiliate, the American Society of Clinical Oncology. Please contact Nick Telesco at Nicholas.Telesco@asco.org if you have any questions or if we can be of assistance.

Sincerely,

Eric P. Winer, MD, FASCO Chair of the Board Association for Clinical Oncology