

Arthritis advocates urge Congress to take action to address drug costs, access issues

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Physician and healthcare professional advocates from the American College of Rheumatology (ACR) are joined by rheumatology patients on Capitol Hill this week to urge lawmakers to address the significant drug cost and access issues affecting millions of Americans living with arthritis and other rheumatologic diseases. More than 100 advocates met with Congressional and Senate leaders and staff today to advocate for meaningful legislative reforms that would lower biologic drug costs and make life-changing therapies and treatments more accessible to the 54 million Americans living with rheumatic diseases.

"All across America, people living with chronic illnesses like rheumatoid arthritis are routinely denied timely, life-sustaining and clinically appropriate treatments because of cost or access issues," said Sharad Lakhanpal, MBBS, MD, President of the American College of Rheumatology. "We are urging Congressional leaders to come together around common-sense reforms that will ensure their constituents can access and afford the therapies and services needed to avoid long-term disability, remain active in the workforce and their communities, and maintain quality of life."

Rheumatology advocates urged Congressional leaders to support legislative fixes that would help address the following issues impacting patient care:

- Specialty Drug Co-Pays: Health insurers are increasingly making biologic and biosimilar therapies unaffordable for patients by

placing them on so called "specialty tiers," which requires that beneficiaries pay a percentage of the drug's cost rather than a fixed co-pay amount. These patients are often faced with the choice of paying hundreds of dollars per month in co-pays for biologic therapies, or reducing or skipping their medications due to cost concerns. ACR advocates are urging Congressional leaders to support the Patients' Access to Treatments Act (H.R. 2999), a bipartisan bill recently introduced by Rep. David McKinley (R-WV) and Rep. G.K. Butterfield (D-NC) that would require health plans to limit patient cost-sharing for drugs placed on specialty tiers.

- **Pharmacy Benefit Manager (PBM) Pricing Practices:** As the go-between hired by insurers to manage drug benefit programs, Pharmacy Benefit Managers (PBMs) were originally created to control [drug costs](#) by negotiating discounts on the behalf of patients. However, PBMs have recently become incredibly effective at keeping much of the savings for themselves by often pocketing the difference between the fees they charge to pharmacies and the prices they negotiate from manufacturers - prices that are almost always kept secret. This secrecy drives up co-pays and out-of-pocket [costs](#) for patients while delivering record profits to PBMs. ACR advocates are urging Congress to consider requiring PBMs to be more transparent about their payment practices and make it harder to hide the true cost of prescription drugs from patients.
- **Medicare Therapy Caps:** ACR advocates are also urging members of Congress to support the bipartisan Medicare Access to Rehabilitation Services Act of 2017 (H.R. 807 and S. 253) which would repeal once and for all the Medicare therapy caps scheduled to go into effect in 2018. This arbitrary payment cap would severely limit access to vital rehabilitation services like physical and occupational therapy for Medicare beneficiaries living with chronic diseases. Though Congress has come together

to delay implementation of the caps more than 13 times since they were first introduced in 1997, they have yet to be permanently repealed.

"I'm encouraged by the dedication and enthusiasm on display from our members today, as well as the positive reception we received from legislative offices," said Dr. Angus Worthing, Chair of the ACR's Government Affairs Committee. "Many Congressional and Senate leaders recognize that [drug](#) costs are a significant problem; now we need them to come together around practical solutions that will bring relief to our [patients](#). I'd like to thank all of our advocates for coming out this week and supporting policies that will truly make a positive difference for the millions of Americans living with [rheumatic diseases](#)."

The advocacy appeals to Senate and Congressional leaders come as arthritis patient and provider advocates throughout the nation recognize September's Rheumatic Disease Awareness Month.

Provided by American College of Rheumatology

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