



Massachusetts Society of Clinical Oncologists

Comments of the Massachusetts Society of Clinical Oncologists Before the Health Policy Commission Re: Chapter 363 of the Acts of 2018 Public Listening Session Regarding the impact of coupons, discounts, and other product vouchers for prescription drugs

May 24, 2019

Officers

Michael Constantine, MD
President

Kala Seetharaman, MD
Vice President

Edress Othman, MD
Treasurer

Victor Aviles, MD
Secretary

Patrick J. Gagnon, MD
Immediate Past President

Directors

Omar Eton, MD

Elizabeth Blanchard, MD

Claire Fung, MD

Ciaran J. McNamee, MD

Therese Mulvey, MD

David Shepro, MD

Jeffrey Wisch, MD

Eric T. Wong, MD

These comments are submitted on behalf of the Massachusetts Society of Clinical Oncologists (MSCO) which represents oncologists throughout the Commonwealth. Oncologists are responsible for providing and improving the quality of care of cancer patients.

Rapidly rising drug prices and spending in the United States have engendered considerable debate on how to constrain costs. That debate is fully engaged here in Massachusetts.

As physicians treating patients with cancer, we are deeply concerned about the effect rising drug prices have on individuals affected by cancer. Oncologists deliver some of the most complex and expensive treatment regimens in health care during one of the most stressful health episodes in most people's lives. MSCO members are expert in the technical benefits and risks of these drug regimens and managing those risks, often over years since the medications can yield durable cancer control. Medical oncologists also bear witness to the financial impact cancer treatment has on patients and families.

In recent years, the number of oral medications that target certain diseases has been increasing. These oral medications can be life altering and clearly have been shown to improve on the quality and quantity of patients with these diseases. Unfortunately, these medications are only partially covered by insurers and the gap in coverage can be insurmountable. For instance, in patients newly diagnosed with Chronic Myelogenous Leukemia, the use of oral tyrosine Kinase inhibitors to the BCR/abl mutation has almost normalized life expectancy and relieved the use of Bone Marrow Transplant in this patient population.

We see the heartbreaking financial decisions many of our patients face in struggling to afford their needed cancer fighting drug regimen. We often struggle to find support systems to help them. We have found that pharmaceutical co-pay assistance does ease the financial burden of astronomical out-of-pocket costs that may put some patients in the unenviable position of choosing basic life necessities over taking needed medication that is medically necessary, prescribed by their physician and approved by their insurer. We are seeing more and more use of the coupon voucher program to fill this need and allow these patients a life altering treatment that has been profound.

MSCO
PO Box 549154
Waltham MA 02454-9154
Phone: 781.434.7329
Facsimile: 781.464.4896
Email: MSCO@mms.org
<http://www.mass-oncologists.org>

Insurance companies are continuously shifting costs onto patients by increasing co-pays and deductibles on prescription drugs. Unlike for non-steroidal anti-inflammatory agents, opioids, antibiotics, antacids, or cold remedies, for example, there generally aren't many off-patent oncology agents that compete or can be substituted. Approved biosimilars will be able to compete at a lower price point because the risks and costs of original drug discovery and development were not required.

Oncology drugs should be eligible for coupons because they are very expensive to make: they are inherently dangerous and have often more complex biological molecules involving recombinant DNA and other advanced technologies and are not just simply manufactured chemicals. Creating a consistent supply with appropriate shelf life to treat patients over years rather than months is challenging. Prolonging life leads to ever increasing costs - a measure of success, paradoxically. Furthermore, developing combinations of these agents will be ever more expensive. The challenge is being met in ever newer technologies making simpler drugs with less off-target side effects.

It would be tragic if the current law allowing co-pay assistance is not extended. Until we are able to have complete health care reform that addresses prescription drug costs and eases the financial burdens of high co-pays and deductibles on our patients, then we need to continue this program to ensure that our patients in the Commonwealth have complete access to these treatments.

As you review the co-pay assistance law, please remember and factor into your analysis that many patients have benefited from co-pay assistance over the past 6 years. We have seen that it really helps relieve some of the stress of the overwhelming burden a cancer patient and their family must bear in treating their cancer. We would urge that the co-pay assistance law be extended. Massachusetts should not slide back to being the only state in the nation that does not allow co-pay assistance.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Michael Constantine". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Michael Constantine, M.D.
President