

Contact: Jen Daly/Gray Media 860.398.3916 <u>daly@graymediagroup.com</u>

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CONNECTICUT SENATE PASSES LEGISLATION TO END CO-PAY ACCUMULATOR PROGRAMS IN CONNECTICUT

<u>SB 1003</u> will prohibit use of co-pay accumulator programs, which allow insurers and PBMs to 'double dip' on the cost of needed prescription medications

(Hartford, Conn., April 28) Advocates representing thousands of patients from across Connecticut today praised members of the state Senate for passing legislation that will prohibit the use of co-pay accumulator programs.

The legislation is critical to any patient using prescription drug discount programs to defray the out-of-pocket costs passed on to them by insurance companies.

Drug manufacturers have long offered discount programs to help patients. Until recently, insurers applied the total cost of the prescription—what the discount covered and what the patient paid out of pocket to the patient's insurance deductible.

However, with co-pay accumulator programs, **only** the amount that the patient pays directly out of pocket will count towards their deductible—not what the manufacturer program puts toward the cost of the medication. This results in the patient paying more out of pocket to reach their deductible and the insurer being paid twice.

"Patients need every opportunity to manage the costs of their medications," said Richard Pezzillo, Executive Director of the New England Hemophilia Association and Chair of Patients for Prescription Access. "We are grateful for the overwhelming support of the state Senate and look forward to getting this legislation signed into law for Connecticut patients." The bill now heads to the House of Representatives for further action.

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