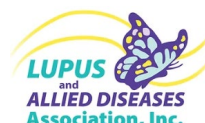


SUPPORT ALL COPAYS COUNT LEGISLATION TO PUT WISCONSIN PATIENTS FIRST



More than 40 Wisconsin-based and national organizations that make up the *Wisconsin All Copays Count Coalition* support SB 737 and AB 773 to ensure copay assistance COUNTS for patients.



Kleefisch: A dirty secret kicks Wisconsin patients while they are down

Two weeks ago, my dog and daughter had surgery on the same day. By week's end, the dog was tearing around, cancer-free. My daughter, though hobbled on crutches in excruciating pain. No one gets health care for fun. There is no joy in receiving a horrible diagnosis, and no delight in swallowing pills that are supposed to help something you never wanted in the first place.

I'm no stranger to health trouble: As a newly-elected lieutenant governor, I took countless chemotherapy pills and sat through infusions for months after my colon cancer diagnosis. I will never be able to say enough about the amazing health care professionals who worked with me, and I'm grateful for the insurance that helped cover the costs.



Like so many with health challenges, my family would be in trouble without our insurance. First I developed cancer. Now, more than a decade later, my daughter has torn her ACL and meniscus. So I deeply appreciate what insurance can and should do for those who need it. But I'm also very concerned by some recent unfair insurer policies that have emerged in Wisconsin and around the country. These policies threaten patients getting the medications they need by jeopardizing accessibility and burdening them with unfair costs.

As I understand it, some large, incredibly profitable insurers decided to implement policies that secretly drive up prescription drug costs on the most vulnerable patients and also force these people to pay huge amounts of money up front while the insurers are pocketing copay prescription assistance meant for patients.

Years ago, insurers created pharmacy benefit managers (PBMs), which were supposed to help reduce costs for patients by working as middlemen between pharmacists and pharmaceutical companies supplying the medications to patients. But any time you add a middleman, he doesn't work for free. The PBMs became more costly, and the insurers stopped letting popular programs for drug copay assistance count toward patient deductibles or out-of-pocket maximums.

So those taking medically necessary and often costly medications were forced into huge up-front costs because the copay assistance no longer counted toward their out-of-pocket max. Imagine being told to pay \$5,000 or \$10,000 immediately for the lifesaving medication you need or you can't have it. It seems unfathomable that some insurance companies would be working against the very individuals who pay them for coverage, but that's what is happening and states are catching on. Legislators are figuring out that big insurance is trying to beat up the little guy patient, all while the patient is struggling with a diagnosis they never wanted.

Nineteen states have already passed legislation to make insurers count all copays -- even those made by the drug companies to defray patient costs (because that's what those drug-company copays were designed to do in the first place). Even more states have put additional restrictions and guardrails on PBMs to ensure their practices are transparent and ethical. Not all insurers are imposing these policies. But enough are doing it in Wisconsin to warrant legislation, and someone needs to speak for the patients.

One of the largest groups of bipartisan legislators our state has ever seen has stepped forward to cosponsor Senate Bill 737, the PBM Accountability Act. This bill will effectively end these dirty-trick practices in Wisconsin and continue to increase transparency in the PBM process. The state Senate has already had a hearing on this bill, and now it is time for the GOP-led Assembly to move quickly and hold a hearing before the session ends. That way, this bill can be heard, approved by the Legislature and sent to the governor for his signature. Time is of the essence for patients and families who are suffering. They trust their state leaders will help provide a meaningful solution to stop them from being kicked while they're down.

It is hard enough to face the many challenges associated with a serious disease when diagnosed. They should not have to deal with the additional burden of financial hardship imposed by those who are blatantly exploiting patient health for company profit. We could all be just one diagnosis away from a similar situation, and the little guy deserves to be protected from unfair insurance practices involving PBMs and copay accumulators. I trust our Legislature will do just that in the days ahead by making this proposed law a reality.

Kleefisch, of Concord, is Wisconsin's former lieutenant governor and president and founder of the 1848 project.