



Senator Kelvin Atkinson, Chair
Senate Committee on Commerce, Labor and Energy
April 2, 2017

Re: Support SB 436

Dear Senator Atkinson,

ACT for Nevada submits this letter in strong support of SB 436 which will allow individuals living with chronic diseases in Nevada access to life sustaining treatments that they otherwise could not afford. This bill ensures Nevada patients have options when selecting a health plan that fits their medical and financial needs. Specifically, this bill would require that insurers have at least 25 percent of the plans offered at each coverage level be a flat dollar co-pay option for all prescription medications including those on specialty tiers. In addition, the co-payment rates must be reasonably graduated and proportionately related in drug formulary tier levels.

ACT for Nevada is a diverse coalition of patient organizations committed to ensuring more equitable, affordable and accessible health insurance coverage for those living with chronic illnesses. Coalition member organizations include organizations such as the Arthritis Foundation, Colors of Lupus – Nevada, Immune Deficiency Foundation, National Eczema Association, National Multiple Sclerosis Society, National Psoriasis Foundation, and Neuropathy Action Foundation (NAF). Additionally, more than 5,000 Nevadans have joined the effort in recent months in support of ACT for Nevada's mission to address high out-of-pocket costs and discriminatory health insurance practices that economically endanger patients across the state.

Individuals living with a variety of chronic conditions often require expensive, specialty medications in order to live healthy and productive lives. Unfortunately, their **only health insurance options contain formularies with high coinsurance** for the treatments they need. Many Nevada families cannot afford to pay these out-of-pocket expenses, which can be **up to 40% of the cost of the medication**. Plans that do not offer options for patients to choose pre-deductible, flat-fee copay plans for specialty tier medications **discriminate against patients with complex and acute conditions** who are left paying the highest cost.

This financial burden on patients and families increases the likelihood that the most vulnerable among us will forego care. For example, a 2014 Health Insurance Survey conducted by the Immune Deficiency Foundation of patients with Primary Immunodeficiency (PI) found that approximately one-third (1/3) of patients reported that they had skipped life sustaining treatments because they could not afford the out-of-pocket costs required by payers. In addition, ACT for Nevada has received stories from Nevadans living with diabetes, multiple sclerosis and other chronic disorders sharing the impact that high co-insurance for necessary medications has had on the health and financial stability of their family. Not only can skipped treatment lead to negative outcomes, even death, it can also result in high costs

to the health system including inpatient hospital stays and expensive treatments for declining conditions.

Senate Bill 436 will address these high up-front costs and ensure there are insurance options with a pre-deductible, flat dollar copayment structure. This will finally allow patients to select the right plan and eliminate under-utilization due to prohibitive co-insurance costs. **We urge you to pass SB 436 to give patients reliant on high cost medications an option for insurance they can afford and that meets their medical needs.**

For further information or questions, please contact Krystin Herr Larkin at krystin@klgovaffairs.com.

Respectfully submitted,

Arthritis Foundation
Colors of Lupus
Immune Deficiency Foundation
Multiple Sclerosis Society (MS Society)
NAACP Tri-State Conference of Idaho, Nevada and Utah
National Eczema Association
National Psoriasis Foundation
The Neuropathy Action Foundation (NAF)

