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The Patient's Voice | *since 1996*

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August 6, 2009

The Honorable John Rockefeller
United States Senate
Washington, DC 20510

RE: "Affordable Access to Prescription Medications Act of 2009"

Dear Senator Rockefeller:

On behalf of the patients we serve, National Patient Advocate Foundation is pleased to offer its strong support for the "Affordable Access to Prescription Medications Act of 2009", which provides all Americans with vastly improved access to life-saving medications.

National Patient Advocate Foundation (NPAF) is a non-profit organization dedicated to improving access to healthcare services through policy reform. The advocacy activities of NPAF are informed and influenced by the experience of patients who receive case management services from our companion organization, Patient Advocate Foundation (PAF). Last year, PAF provided 48,369 patients with full case management services involving multiple communications made by PAF staff on behalf of patients in order to reach positive resolution. In addition, PAF received more than 9.5 million inquiries by phone or on the Internet from individuals throughout the United States seeking assistance for access to care issues resulting from diagnoses of chronic, debilitating or life-threatening diseases. In 2008, approximately 36% of all PAF cases were Medicare beneficiaries; of those 70% had annual incomes of less than \$23,000 and nearly 30% of all cases were directly related to pharmaceutical co-payment/coinsurance issues.

The escalating use of specialty tiers in Medicare Part D has led to a significant increase in requests for co-payment assistance at Patient Advocate Foundation. While the increasing use of specialty tiers limits Part D plan liability for expensive drugs, the placement of a drug on a specialty tier has dramatic cost implications for Medicare beneficiaries. Your legislation will impose a monthly cap on the cost of any one prescription drug at \$200 per 30-day supply; and further, will cap the total for all prescription drug copayments and coinsurance obligations in any given month at \$500. For patients with serious or life-threatening conditions or for an individual with multiple co-morbid conditions, this legislation will provide greater access and affordability for prescribed treatments.

Last year, PAF was contacted by a 70-year old man from Georgia recently diagnosed with chronic myelogenous leukemia. The patient, a Medicare beneficiary with supplemental coverage, was unable to afford his prescribed therapy because his coinsurance ran \$1,238.81 or 33% a month. With a combined income of \$1,735.00 per month for the man and his wife, the patient was considering stopping treatment due to cost. PAF also assists cancer patients

regularly who are trying to access oral chemotherapy drugs. Some of these drugs run \$5,000 for a 30 day supply meaning a patient would owe \$1,500 each month if they have a typical 30% coinsurance. These patients urgently need the help your legislation proposes.

NPAF strongly supports the practical solutions for patients struggling to meet high coinsurance obligations that are provided in your legislation. We thank you for your continuing efforts on behalf of patients, and we will continue to watch with interest the movement of this important legislation through the United States Congress.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Nancy Davenport-Ennis".

Nancy Davenport-Ennis
President & CEO