

**AIDS Project of Southern Vermont Crohn's and Colitis Foundation of America
Family Reach HIV/HCV Resource Center National Organization for Rare Disorders
National Patient Advocacy Foundation National Psoriasis Association
New England Hemophilia Association Twin States Network U.S. Pain Foundation
Vermont CARES Vermont People with AIDS Coalition**

House Health Care Committee Members:

April 12, 2016

The above-named organizations are concerned about the proposal to reduce or eliminate the maximum out of pocket prescription drug benefits from Vermont insurance plans and ask that no action be taken at this time..

- ***Patient groups have only recently been involved in the stakeholder group.*** Not all interested patient groups have been involved, and they have had little input in administration proposals. Businesses should not define health care policy in Vermont.
- ***VT was a national leader in 2012 when it enacted the strongest protections in the country against rising out-of-pocket costs.*** However, there are proposals circulating that would grant the Green Mountain Care Board the power to override current law and approve plans that do not contain these protections. This essentially allows plans to violate current state law, without a statutory amendment approved by the Legislature. The Green Mountain Care Board has already publically stated it supports the change recommended by health insurance companies and the administration. This begs the question of an unbiased process at the Green Mountain Care Board.
- ***The Legislature should retain its authority on a law that was intentionally passed to protect seriously and chronically ill Vermonters.*** This is a troubling proposal for patients in Vermont. Patients, and the legislators who have enacted these protections, must have a voice if such protections are to be altered. If the administration deems a change is necessary, they should come before the Legislature in January to request it.
- ***There is no assurance that this proposal will result in lower costs to patients.*** The practice of insurers collecting higher and higher premiums and then shifting costs to patients who need care the most is not going to end. If this cap is undone, costs for the sickest patients will skyrocket and patients will find themselves having to cut their own drug costs – skipping or splitting dosages, etc. This will likely result in sicker patients who end up requiring higher medical and hospital costs. For thousands of Vermonters, having a cap on out-of-pocket spending for prescription drugs has been a lifeline and has enabled severely and chronically ill patients to maintain their health.
- ***Patients need to have a seat at the table.*** When this issue is discussed, and if it is determined that changes need to be made to the law, the Administration can make those recommendations, and the Legislature can make those changes – but this should not occur without the input of patients.