

## **Monet: Keeping drugs affordable**

It's a popular political football this year — the cost of prescription drugs. With a few spectacular players making blazing headlines, it's no wonder every capital, from Montpelier to Sacramento, is trying to tackle the problem. And let's be clear, there is a problem.

But some of the solutions being offered won't do anything to help patients — who need these medications to live — to actually afford them. Instead of focusing on digging into the spreadsheets of drug companies, let's focus on what the consumers actually pay and how they can the best get information on what medicines they can afford.

Fortunately, Vermont is ahead of the game in both respects.

Vermont became the first state in the nation in 2012 to put a cap on what consumers pay for their prescription drugs. This limit has gone a long way toward ensuring patients who take multiple prescriptions each day can afford them. It's literally been a lifesaver, and we must fight to save it from being chipped away at by health insurance companies.

Threatened by eroding profits, insurance companies are pushing to eliminate the cap on out-of-pocket costs for prescription drugs, meaning thousands of patients with cancer, HIV/AIDS, arthritis and epilepsy could see their copays skyrocket when insurers push more of the cost of medicine onto the patient.

There is also a proposal advancing to help patients better understand what insurers are charging for medicine before they sign up for a plan. The bill, S.216, would also enable health care providers to see the insurance information so they could have a conversation with their patients about what medication path would best suit them — financially and physically. And if the insurer plans to make changes to the patient's costs, the bill would require that information to be easily accessible to the patient.

Without the out-of-pocket caps, and without the protection of transparency for the patient, those who are at their most vulnerable point end up not filling their prescriptions or stretching them out. Many end up back at the doctor, or worse still, at the emergency room. Neither of those scenarios help keep health care costs down.

Making sure patients are informed so that they can make the best choices for them and limiting the amount of out-of-pocket expenses they pay are the most prudent measures to take. Anything else is shortsighted.

So yes, let's talk about drug pricing, but let's also focus on what will actually do the most good for Vermonters.

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