

May 10, 2024

Maryland Prescription Drug Affordability Board 16900 Science Drive, Suite 112-114 Bowie, MD 20715

RE: Public Comments on Therapeutic Alternatives

Dear Members and Staff of the Maryland Prescription Drug Affordability Board:

On behalf of the undersigned organizations, we appreciate the opportunity to provide comments to the board on therapeutic alternatives. We share the board's goal to lower costs for patients and applaud your efforts to ensure access to the care and therapies they need to manage their health.

It is critical, however, that the board understands that for many patients with chronic conditions, medications considered to be therapeutic alternatives are not actually viable alternatives for them personally. Therefore, we strongly urge the board to carefully consider the ultimate impact of your affordability review on those patients and reject actions that could limit treatment options for these patients.

Medicine is Not One-Size-Fits-All

Once diagnosed with a chronic condition, each patient starts an often life-long journey to identify the correct treatments and regimen to successfully manage their symptoms and improve their health. Many will also face multiple chronic conditions or need medications to treat specific symptoms or even side effects of their preferred treatment. For these reasons, patients with chronic conditions often rely on a complicated and personalized course of treatment that is not easily altered.

For these patients, therapeutic alternatives may not be alternatives at all. Very often drug interactions or other health conditions would prevent individual patients from being able to switch to an alternative medication that, on paper, seems like it would be an appropriate treatment. Further, patients with chronic conditions can build up a tolerance to medications over time, so they must retain access to all treatments in a class of drugs to prolong their treatment.

Patient Access Cannot Be Compromised

Ultimately, chronic conditions are incredibly complex to treat. Each patient will face a unique experience and should be able to work with their doctor to identify the treatment that works best for them. Substituting or requiring patients to change drugs based on cost considerations instead of medical needs can disrupt continuity of care and result in complications and higher overall medical costs. We urge this board to seriously consider the unique circumstances faced by these patients and work diligently to ensure that access to all treatments is protected.

As patient advocates, we are concerned that upper payment limits (UPL) will only exacerbate these risks. We are concerned that patients could see reduction in access to medications in the future due to unforeseen consequences of UPLs, like increased utilization management within drug classes or limits on treatment options due to reduced reimbursement rates for doctors.



ENSURING ACCESS THROUGH COLLABORATIVE HEALTH

We strongly urge the board and staff to utilize the authority of the board to fully explore with all healthcare stakeholders how upper payment limits will be implemented and identify in advance any adverse impact to patients.

We appreciate your laudable efforts to improve our health system and your steadfast commitment to protecting patients. We look forward to working together to achieve these goals.

Sincerely,

Vasculitis Foundation

Ensuring Access through Collaborative Health Coalition Advocates for Compassionate Therapy Now AiArthritis (International Foundation Autoimmune & Autoinflammatory Arthritis) **Cancer Support Community** Caring Ambassadors Program Chronic Care Policy Alliance **Chronic Disease Coalition** Global Healthy Living Foundation Infusion Access Foundation International Cancer Advocacy Network (ICAN) Looms For Lupus National Infusion Center Association (NICA) National Psoriasis Foundation Neuropathy Action Foundation Rare Access Action Project Value of Care Coalition

