

Memorandum in Opposition

The International Myeloma Foundation (IMF) Strongly Opposes Amendment to AB 219 to Increase Costs to Patients Taking Oral Anticancer Treatments

The International Myeloma Foundation (IMF) - improving the quality of life of myeloma patients while working toward prevention and a cure - strongly opposes amendments to increase the cap in out-of-pocket expenses, from \$100 to \$200, for patients taking oral anticancer treatments, recently added to AB 219. The original intent of this bill was to eliminate the cost disparity between oral and intravenous anticancer medications, ensuring access to all anticancer medications for cancer patients. Additional proposed changes allow insurers to increase the cap over time, delay the implementation date until 2015, and sets the law to expire in 2019 – all counter to the original intent of the bill. A 2011 report by Avalere Health showed that as many as 10% of patients abandoned their treatment if their out-of-pocket responsibility was more than \$200, while up to 25% walked away, if their expense was \$500 or more.

Access to effective, medically-appropriate oral anticancer medications will assist in safeguarding the immediate and long-term financial stability of patients. Many FDA-approved oral anticancer medications target cancer cells directly and are often easier for patients to tolerate, resulting in fewer side effects and enabling many patients to continue working during and after treatment. This in turn helps employers avoid costly issues of turnover, missed days at work, short- and long-term disability, caregiver absenteeism, and replacement worker costs. Moreover, oral anticancer medications allow many patients a continued quality of life with fewer disruptions of day-to-day activities.

Cost-sharing requirements for patients are structured differently for oral anticancer treatments than those administered intravenously, with oral treatments often having significantly higher out-of-pocket costs. For cancers like multiple myeloma (MM), oral treatments do NOT have intravenous substitutes, forcing patients to absorb thousands of dollars in out-of-pocket costs each month.

With nearly 30% of the new therapies in the research pipeline coming in oral form, oral anticancer treatment is the future of cancer care. To level the playing field for all cancer patients, California lawmakers and Governor Brown should reject proposed changes to AB 219, ensuring that no matter how a drug is administered, cancer patients can relax knowing that they have access to the best possible care at a price they can afford.

For more information, please contact Zina Cary, *National State Affairs Consultant* for the IMF at zcary@myeloma.org.