



March 7, 2025

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Senator Judy Lee, Chair
Senate Committee on Human Services
Fort Lincoln Room
600 East Boulevard Avenue
Bismarck, ND 58505

Dear Chair Lee and Members of the Senate Committee on Human Services,

The Dakota Oncology Society and Association for Clinical Oncology (ASCO) are pleased to support **HB 1216 as originally introduced**, which would take steps to protect patients with cancer in North Dakota from co-pay accumulator programs.

The Dakota Oncology Society is a professional society representing healthcare professionals in North Dakota and South Dakota who specialize in oncology. ASCO is an organization representing physicians who care for people with cancer. With over 50,000 members, our core mission is to ensure that cancer patients have meaningful access to high quality, cancer care.

The Dakota Oncology Society and ASCO are committed to supporting policies that reduce cost while preserving quality of cancer care; however, it is critical that such policies be developed and implemented in a way that does not undermine patient access. Co-pay accumulator programs target specialty drugs for which manufacturers often provide co-pay assistance. With a co-pay accumulator program in place, a manufacturer's assistance no longer applies toward a patient's co-pay or out-of-pocket maximum. This policy means patients will experience increased out-of-pocket costs and take longer to reach required deductibles. By prohibiting these funds from counting toward patient deductibles and out-of-pocket maximum, co-pay accumulators negate the intended benefit of patient assistance programs and remove a safety net for patients who need expensive specialty medications but cannot afford them.

Co-pay accumulator programs lack transparency and are often implemented without a patient's knowledge or full understanding of their new "benefit." Far from being beneficial, co-pay accumulator programs increase the financial burden for patients, many of whom are facing life-threatening illness. The impact is especially hard on low-income populations. Increasing patient cost can contribute to medical bankruptcy and cause patients to discontinue care, seek non-medical alternatives—or forego treatment altogether. The result is poorer health outcomes and greater cost to the system.

The Dakota Oncology Society and ASCO are encouraged by the steps HB 1216 takes toward eliminating co-pay accumulator programs in North Dakota, and

we strongly urge the committee to pass the measure. For a more detailed understanding of our policy recommendations on this issue, we invite you to read the [ASCO Policy Brief on Co-Pay Accumulators](#) by our affiliate, the American Society of Clinical Oncology. Please contact Nick Telesco at Nicholas.Telesco@asco.org if you have any questions or if we can be of assistance.

Sincerely,

Matthew Tinguely, MD
President
Dakota Oncology Society

Eric P. Winer, MD, FASCO
Chair of the Board
Association for Clinical Oncology