



HJ0054

LRB102 21082 ECR 30043 r

1 HOUSE JOINT RESOLUTION

2 WHEREAS, Forty-five percent of Americans have used a
3 prescription drug in the past 30 days in the United States; and

4 WHEREAS, Millions of Americans rely on copay assistance
5 programs to afford their prescription drugs; and

6 WHEREAS, On average, cost-sharing assistance helped
7 patients taking HIV or oncology medicines with more than
8 \$1,600 toward their out-of-pocket cost in 2019 and helped
9 patients taking multiple sclerosis medicines with more than
10 \$2,200; and

11 WHEREAS, When copay accumulator adjustment programs
12 prevent any copayment assistance from counting toward a
13 member's deductible or maximum out-of-pocket requirements, the
14 result is that patients may be left with insurmountably high
15 out-of-pocket expenses for their medications; and

16 WHEREAS, Patients with chronic and rare diseases are
17 particularly impacted and struggle to afford their specialty
18 medications; and

19 WHEREAS, Copay accumulator adjustment programs coupled
20 with the rise of patient out-of-pocket expenses resulting from

1 increased deductibles and co-insurance, accounting for up to
2 95 percent of patients costs for brand medicines, leads to
3 patient medication nonadherence; and

4 WHEREAS, Medication nonadherence has led to between \$100
5 and \$300 billion of avoidable health care costs in the United
6 States annually, due to avoidable hospitalizations and medical
7 visits; and

8 WHEREAS, The State of Illinois passed Public Act 101-0452
9 (215 ILCS 134/30(d)) to eliminate the burden patients face due
10 to copay accumulator programs; and

11 WHEREAS, Public Act 101-0452 passed the Illinois General
12 Assembly with unanimous support; and

13 WHEREAS, The law ensures that a health care plan shall
14 apply any third-party payments, financial assistance,
15 discount, product vouchers, or any other reduction in
16 out-of-pocket expenses made by or on behalf of such insured
17 for prescription drugs toward a covered individual's
18 deductible, copay, or cost-sharing responsibility or
19 out-of-pocket maximum associated with the individual's health
20 insurance; and

21 WHEREAS, The lack of clarity between federal and state

1 laws and regulations has left consumers in a vulnerable
2 position; therefore, be it

3 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE
4 HUNDRED SECOND GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, THE
5 SENATE CONCURRING HEREIN, that we declare our commitment to
6 ensuring access to quality health care for patients and
7 healthcare consumers in Illinois; and be it further

8 RESOLVED, That we urge the Illinois congressional
9 delegation to support federal legislation to ensure all copays
10 count and urge the federal regulators to specifically clarify
11 that all copays count in the 2023 Notice of Benefit and Payment
12 Parameters and tri-agency guidance; and be it further

13 RESOLVED, That suitable copies of this resolution be
14 delivered to the Governor, the Director of the Illinois
15 Department of Insurance, all Illinois constitutional officers,
16 and all members of the Illinois congressional delegation in
17 order to bring further awareness to the importance of access
18 to healthcare for our residents of the State of Illinois and to
19 be a model state for the rest of the country.