

ARTHRITIS
FOUNDATION
AMBASSADOR
PROGRAM



DISTRICT MEETING
TOOLKIT

AUGUST RECESS 2014



Instructions

If you're new to advocacy or the Arthritis Ambassador Program, you can dip your toes into August Recess by attending a town hall.

Included in this packet you will find:

- Instructions for locating and attending a town hall meeting (see right).
- A list of Do's and Don'ts for attending a town hall meeting.
- A scripted "ask" to share during the meeting.
- An issue brief on H.R. 460 to hand to your legislator or their staff.

In order to prepare for your town hall, be sure you:

- Share your town hall date with Arthritis Foundation staff (lkeivel@arthritis.org). We may link in other Ambassadors or staff to accompany you on your visit!
- Print out the issue brief for your meeting. Note the reasons that "specialty tiers" make medications unaffordable and what that means for your ability to afford and obtain your needed medications. Email Mark Guimond at mguimond@arthritis.org should you have any questions about this legislation.
- Practice sharing your story. In five minutes or less, you should be able to share how arthritis has impacted your life and why this legislation is important to you.

STEPS TO ATTENDING A TOWN HALL

1. **FIND:** You can identify upcoming town hall meetings by visiting your Representative's website and registering to receive their e-newsletter. You can also call their local office and ask the receptionist.
2. **PREPARE:** Review the tips listed and practice making the ask. Print out the issue brief in this packet
3. **RECRUIT:** Call your family and friends and ask them to join you!
4. **FOLLOW UP:** Email the Representative's staff after the town hall and thank them for their time. Follow up on your requests.



When Attending A Town Hall Meeting

1. **Be Prepared.** Come with thoughtful arguments, current data and persuasive stories.
2. **Tell a Personal Story.** Make yourself relatable with your Member of Congress and talk about how these policies affect you and your family.
3. **Use numbers if you have them.** Numbers matter. They are tangible and persuasive facts. Numbers are hard to ignore. For example, is the cost of your medications high? Numbers will get your legislator's attention!
4. **Be Respectful.** Your Member of Congress is there to listen to you. Starting the conversation on a positive note will help with the delivery of your message.
5. **Go in Groups.** There is strength in numbers. Going in groups shows that H.R. 460 will positively impact a significant amount of your Member's constituents.
6. **Talk to Staff.** Your Member of Congress works with a team. Seek out those team members, talk to them before the meeting, get their business card, tell them your story. The staff is the eyes and ears and close advisors of your legislator.
7. **Leave Paper.** Not only is it important to talk with the staff, but leaving issue briefs and talking points can also find its way to legislative assistants.
8. **Follow Up Politely.** Politely persistent people persuade politicians.
9. **Get People to Multiple Meetings.** Hearing the same ask at different meetings will help our cause stand out. The more people who ask, the more H.R. 460 will be on your Member of Congress' radar.

The Ask

H.R. 460

- Become a co-sponsor of the legislation.
- If already a co-sponsor, thank them and request a hearing on the bill.
- Either way: Attend the Briefing about the bill on September 9th (announcement to come from Rep. McKinley's office)

Issue Brief: H.R. 460: The Patients' Access to Treatments Act

Drugs Are Being Placed Out of Patient Reach

Commercial health insurers have traditionally charged fixed co-pays for different tiers of medications. As an example, the co-pays might be set at \$10/\$20/\$50 for the three tiers.

Drug Type	Example Patient Expense
Tier 1: Generic	\$10 copay
Tier 2: Preferred Brand Name	\$30 copay
Tier 3: Nonpreferred Brand Name	\$50 copay
Tier 4: Specialty Tier Drug	20-50% of drug cost

Some commercial health insurance policies are now moving vital medications (mostly biologics) into a fourth *specialty tier*.

Specialty Tiers require patients to pay a percentage of their drug cost— from 25% to 50%— rather than a fixed co-payment. These practices are placing medically necessary treatments out of reach of average Americans.

- Biologics are FDA approved and have no inexpensive, generic equivalents.
- Biologics can prevent patients with rheumatoid arthritis, MS, lupus, hemophilia, and some forms of cancer, from becoming disabled, seriously ill, or even dying.
- Monthly co-insurance amounts often range from \$500-\$5,000. Cost-sharing for prescription medications restricts access to medically necessary drugs.
- Individuals unable to afford specialty tier pricing are likely to go without crucial medications, resulting in disability and other expensive health complications.

Support The Patient's Access to Treatment Act H.R. 460 The bipartisan Patients' Access to Treatments Act (H.R. 460), introduced by Rep. David McKinley (R-WV) and Rep. Lois Capps (D-CA), limits cost-sharing requirements in the specialty drug tier (typically Tier IV or higher) to a similar dollar amount applicable to drugs in a non-preferred brand drug tier (typically Tier III).

Ask your Representative to co-sponsor H.R. 460 by contacting Rep. David McKinley's office at devon.seibert@mail.house.gov or x54172 and contact House Energy and Commerce Committee Chairman Upton and Ranking Member Waxman to request action on this important bill for people with arthritis

This legislation is also supported by the Coalition for Accessible Treatments: American Academy of Dermatology Association, American Academy of Neurology, American Academy of Pediatrics, American Autoimmune Related Diseases Association, American College of Rheumatology, American Plasma Users Coalition, Arthritis Foundation, Crohn's and Colitis Foundation of America, Colon Cancer Alliance, GBS/CIDP Foundation International, Hemophilia Federation of America, Immune Deficiency Foundation, Leukemia & Lymphoma Society, Lupus Foundation of America, National Hemophilia Foundation, National Organization for Rare Disorders, National Psoriasis Foundation, Patient Services Incorporated, Pulmonary Hypertension Association, Sjögren's Syndrome Foundation, Spondylitis Association of America, The Alliance for Patient Advocacy, US Hereditary Angioedema Association



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