

**FOR IMMEDIATE RELEASE**

**Contact:** Meera Venkatraman  
Arthritis Foundation  
[mvenkatraman@arthritis.org](mailto:mvenkatraman@arthritis.org)  
(404) 965-7631

OR

Cathy Tyler  
Arthritis Foundation  
[ctyler@arthritis.org](mailto:ctyler@arthritis.org)  
(404) 263-2222

**Arthritis Foundation Supports Legislation Reintroduced in Congress –  
Would End Specialty Tier Cost Sharing**

*(H.R. 460) would end specialty tier cost sharing and provide relief for millions with arthritis*

**ATLANTA, Feb. 7, 2013** – The Arthritis Foundation supports new bipartisan legislation introduced in the House of Representatives this week that will increase affordability of medications for more than seven million Americans, including 300,000 children, with rheumatoid arthritis (RA), and other inflammatory diseases. If passed, the **Patients’ Access to Treatment Act of 2013 (H.R. 460)**, introduced by Rep. David B. McKinley (R-WV) and Rep. Lois Capps (D-Calif.), will limit cost-sharing requirements for medications placed in a specialty tier and make innovative and necessary medications more accessible by reducing excessive out-of-pocket expenses.

Because of increasing costs, many insurance plans have instituted a tiered payment system for medications, often labeled ‘generic,’ ‘preferred,’ and ‘non-preferred’ and each have a set cost-sharing amount. A fourth tier, known as ‘specialty tiers,’ utilizes high patient cost-sharing for certain expensive medications. Patients who receive specialty tier medications pay a percentage of the cost of the drug, instead of paying the fixed amount, which results in skyrocketing costs for a single medication.

Biologic medications, including arthritis disease-modifying therapies, are increasingly found in specialty tiers. The result is high out-of-pocket costs, ranging from hundreds to thousands of dollars a month for a single medication. Because of this financial burden, people with arthritis may stop taking their prescribed medication or skip doses because they simply cannot afford it - even with health insurance and a prescription drug plan. Because there are no generic alternatives to biologics, the specialty tier cost-sharing structure negatively impacts people that depend on biologics - people with RA, psoriatic arthritis and other forms of inflammatory arthritis.

“This practice is unacceptable and discriminates against patients with chronic conditions. Cost-sharing for prescription medications should not be so large as to restrict or interfere with people’s treatment,” says Amy Melnick, vice president of advocacy for the Arthritis Foundation and co-chair of the Coalition for Accessible Treatments. “The Arthritis Foundation is one of 18

members of the Coalition for Accessible Treatments which encourages patients and physicians to ask lawmakers to support and co-sponsor the Patients' Access to Treatments Act of 2013.”

# # #

**About the Arthritis Foundation**

Striking one in every five adults and 300,000 children, arthritis is the nation's leading cause of disability. The Arthritis Foundation ([www.arthritis.org](http://www.arthritis.org)) is committed to raising awareness and reducing the unacceptable impact of this serious and painful disease, which can severely damage joints and rob people of living life to its fullest. The Foundation funds life-changing research that has restored mobility in patients for more than six decades; fights for health care policies that improve the lives of the millions who live with arthritis; and partners with families to provide empowering programs and information.