



Our Mission: To drive efforts to cure psoriatic disease and improve the lives of those affected.

February 6, 2020
The Honorable Delegate Pendergrass
241 House Office Building
6 Bladen Street
Annapolis, MD 21401

Dear Chair Pendergrass and members of the Health and Government Operations Committee,

The National Psoriasis Foundation (NPF) is the leading patient advocacy group for more than 8.3 million Americans and the over 152,000 Maryland residents living with psoriasis and psoriatic arthritis. I write to you today to express our support for HB 134 to limit the copayment or coinsurance for a covered prescription insulin drug to not more than \$100. Patients with psoriatic disease are at a heightened risk to develop other chronic conditions, including diabetes and hypertension, cardiovascular disease and stroke, as well as depression and anxiety.¹ HB 134 will help individuals with diabetes, who may also be managing other chronic conditions like psoriasis, have affordable access to insulin.

Numerous studies have demonstrated that individuals with psoriatic disease face a higher risk for diabetes, even when controlling for risk factors such as obesity and hypertension. One study that compared over 100,000 individuals with psoriasis to matched patients without psoriasis found that patients with mild psoriasis had an 11% increased risk of diabetes and patients with severe psoriasis had a 46% higher risk of diabetes.² Another study found that, after accounting for diabetes risk factors, diabetes risk increased by 20% with every 10% increase in psoriasis body surface area.³

It is critical that patients with psoriatic disease, diabetes, and other chronic conditions have the tools they need to effectively manage their disease. When facing high out of pocket costs, patients often do not use their medications appropriately; skipping doses in order to save money or abandoning treatment altogether. Furthermore, according to several studies prescription abandonment rates increase significantly when cost-sharing exceeds just \$100.⁴

By limiting the cost of insulin prescriptions to \$100, HB 134 would help reduce patient costs, thereby improving patient's ability to access insulin. We appreciate your attention on this important matter. Should you have any questions regarding this issue please reach out to Patrick Stone, Vice President Government Relations and Advocacy with the National Psoriasis Foundation at pstone@psoriasis.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Patrick Stone", enclosed in a thin black rectangular border.

Patrick Stone
VP, Government Relations and Advocacy

1. Journal of American Academy of Dermatology: Joint AAD-NPF guidelines of care for the management and treatment of psoriasis with biologics - April 2019 Volume 80, Issue 4, pages 1029–1072
2. Shin, D., Troxel, A., Margolis, D. Increased risk of diabetes mellitus and likelihood of receiving diabetes mellitus treatment in patients with psoriasis. Archives of Dermatology, 2012 Sep; 148(9): 995-1000
3. Wan, M.T, Shin, D.B, Hubbard, R.A, Noe, M.H, Mehta, N.N and Gelfand, J.M. Psoriasis and the risk of diabetes; a prospective population-based cohort study. J Am Acad Dermatol. 2018; 78; 315-322.e1
4. Gleason PP, Starner CI, Gunderson BW, Schafer JA, Sarran HS. Association of prescription abandonment with cost share for high-cost specialty pharmacy medications. Journal of Managed Care Pharmacy. October 2009.