March 1, 2017

Connecticut General Law Committee
Legislative Office Building, Room 3500
Hartford, CT 06106

Dear Chairmen Leone, Witkos, Baram, Ranking Member Smith and members of the General Law Committee,

On behalf of the undersigned organizations, we write to express the critical need for policy that allows for the substitution of biologics with biosimilars and ensures prescriber and pharmacist communication throughout the patient's treatment process. House Bill 7118 is an opportunity for Connecticut to do what is right, by creating a pathway that facilitates patients access to affordable treatment options while ensuring a patient's doctor has accurate medical records through prescriber communication.

Biologics are a class of medication that treat diseases like various forms of cancers, inflammation, psoriasis and other autoimmune diseases. These medicines are complex, as they are made with living cells that work not only to help patients feel relief, but target a disease at its source. Now, near replica versions of biologics called biosimilars have emerged on the market that make this level of treatment accessible, at potentially a lower cost, to a wider range of patients.

It is important to know that biosimilars are not the same as generic medicines. The Food and Drug Administration (FDA) determines the interchangeability of biologic products, while each state governs the substitution policies. Presently, four biosimilars have been approved by the FDA, with many more in the pipeline. In order to account for the complexity of biologics and biosimilars, House Bill 7118 creates a safe, transparent process, in which pharmacists must communicate any substitution made to both the patient and prescriber. This communication ensures that all parties involved in the treatment process, from patient to prescriber to pharmacist, are fully informed of any changes made, guaranteeing the best care possible for the patient and a complete medical record.

Currently, 27 states and territories have passed biosimilar legislation. We encourage Connecticut to be among the states that bring affordable access to innovative medical treatment options to all of Connecticut's patients, with the opportunity to achieve meaningful Medicaid and budget cost savings.

On behalf of our patient and physician members, we hope to see legislators join us in our support of HB 7118. Thank you for your consideration.

Sincerely,

Bryte Johnson, Connecticut Government Relations Director
American Cancer Society Cancer Action Network, Inc.

Ben Chandhok, State Director for Advocacy and Access, Northeast
Arthritis Foundation

Maryann May, Executive Director
Connecticut Hemophilia Association

Robert T. Schoen, MD, MBA, President
Connecticut Rheumatology Association

Sarah Buchanon, Director of Advocacy
Crohn's & Colitis Foundation of America

Ralph McKibbin, MD Executive Director
Digestive Disease National Coalition

Katie Verb, Director, Policy & Government Relations
Hemophilia Federation of America

Kathleen A. Arntsen, President/CEO
Lupus and Allied Diseases Association, Inc.

Elena Rios, MD, MSPH, FACP, President & CEO
National Hispanic Medical Association

Tim Boyd, Associate Director of State Policy
National Organization for Rare Disorders

Rich Pezzillo, Executive Director
New England Hemophilia Association

Paul Gileno, Founder and President
US Pain Foundation