Plasma Protein Therapeutics Association

March 7, 2012

HAND DELIVERED

The Honorable Chairman Thomas Middleton
Senate Finance Committee
3 East, Miller Senate Building,
Annapolis, MD 21401

RE: OPPOSITION TO SENATE BILL 782

Dear Chairman Middleton:

The Plasma Protein Therapeutics Association (PPTA), an international trade association based in Annapolis, would like to inform the committee of our opposition to Senate Bill 782 which would limit patient access to plasma protein therapies by establishing a definition for specialty pharmacy. Many are struggling with this definition including the Center for Medicare and Medicaid Services. We are concerned the bill could negatively impact the ability of Marylanders to receive the most recent innovative therapies needed for their health conditions.

PPTA represents the world's leading manufacturers of plasma-derived and recombinant biological therapies, collectively known as plasma protein therapies, and the collectors of source plasma. These critical therapies are infused or injected by more than 1 million people worldwide to treat a variety of rare, life threatening diseases and serious medical disorders. PPTA members produce in excess of 80 percent of the plasma protein therapies used in the United States today and more than 60 percent worldwide.

Plasma protein therapies treat rare, life-threatening diseases and disorders. Lifesaving therapies produced by PPTA members include clotting factor therapies for individuals with bleeding disorders, immunoglobulins (IG) to treat complex diseases in persons with compromised immune systems and neurological disorders, and therapies for individuals who have alpha-1 anti-trypsin deficiency, which typically manifests as adult onset chronic obstructive pulmonary disease and substantially limits life expectancy.

Our member companies are dynamic, innovative manufacturers that create new high-impact, life improving products for individuals with rare, chronic conditions. These therapies require special handling and inventory management that not all pharmacies can meet. The special handling is vital to ensure the safety of the patients that rely on these therapies.

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We are concerned that the development of the list of specialty drugs every 6 months will force residents of the state to wait six months before they may receive an innovative therapy that may improve or save their lives.

Although no definition of specialty pharmacy exists, Insurers are trying to develop formularies to limit individuals to a few product choices in a therapeutic class. On occasion, they will not pay for therapies unless they are on their formulary. Specialty drugs are expensive and most Marylanders could not afford to pay for the therapies themselves. What happens if there is a new therapy that will significantly improve the lives of Marylanders? Will they have to wait up to six months for the therapy to be eligible for specialty drug classification?

We appreciate your consideration of our concerns and would welcome the opportunity to discuss them with you further. Should you have any questions or require additional information please do not hesitate to contact me at: bspeir@pptaglobal.org or (443) 433-1110.

Best Regards,

Bill Speir
Director of State Affairs