

HOUSE HEALTH AND GOVERNMENT OPERATIONS COMMITTEE

February 26, 2009

House Bill 574

Prescription Drugs – Evidence-Based Prescriber Education and Outreach Program

The Biotechnology Industry Organization (BIO) appreciates this opportunity to comment on House Bill 574. BIO is the largest trade organization to serve and represent the biotechnology industry in the United States and around the globe. BIO represents more than 1,100 biotechnology companies, academic institutions, state biotechnology centers, and related organizations. BIO members are involved in the research and development of health care, agricultural, industrial, and environmental biotechnology products. In particular, many of our members are involved in the research and development of life-saving therapies and play a critical role in delivering treatments that both prolong life and reduce the burden of disease for patients worldwide.

In Maryland, we work closely with the Technology Council of Maryland (TCM) and the more than 500 technology companies, biotechnology companies, higher education institutions, government laboratories and business support firms that collectively form Maryland's technology and biotechnology community.

BIO respects the legislature's efforts to improve health outcomes and reduce health care costs for residents of Maryland. We are concerned, however, that House Bill 574 poses significant practical challenges for physicians and biotechnology companies, which could ultimately result in a potential negative impact on patient care and access to new innovative therapies.

As a representative of an industry committed to discovering new cures and ensuring patient access to them, BIO strongly supports efforts to increase the availability of accurate, scientific evidence to inform clinical decision-making. BIO believes individual patients and their doctors should be armed with the best available information to help assess the relative clinical benefits and risks of various treatment alternatives. When appropriately applied, evidence-based or comparative effectiveness information is a valuable tool that, together with a variety of other types of medical evidence, can contribute to improving health care delivery. However, BIO is concerned that comparative effectiveness information *may be used strictly as a means to contain costs, rather than deliver health care value by improving patient health outcomes.*

Action taken at the federal level negates the need for Maryland to contribute to a state-by-state patchwork of legislation that ultimately duplicates federal programs. The

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recently passed American Recovery and Reinvestment Act (“the Stimulus package”) includes \$1.1 billion for comparative effectiveness research. The funds will be divided between the Agency for Health Research and Quality, the National Institutes of Health, and the Secretary of the Department of Health and Human Services to pursue comparative effectiveness research which may ultimately improve health care quality.

Additionally, we do not believe that a tax on pharmaceutical manufacturers is the appropriate funding mechanism for this new program. Imposing new fees on manufacturers will only serve to drive up the cost of bringing innovative and life-saving biologic treatments to market with these increased costs ultimately being passed onto patients.

BIO’s members remain committed to advancing innovation and developing new therapies to improve patient health. BIO welcomes the opportunity to continue to work with policymakers and other stakeholders on ways to improve value in the health care system by ensuring the most appropriate care is delivered to each patient.

We appreciate the Committee’s consideration of our concerns and encourage members to oppose House Bill 574.

Respectfully Submitted,



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