

**U.S. Senator Cindy Hyde-Smith (R-Miss.)**  
**Prescription Drug Pricing Floor Speech**  
July 22, 2020  
*(As prepared for delivery.)*

Mr. President, I join my colleagues today in calling on this body to include the Prescription Drug Pricing Reduction Act of 2020 in the next coronavirus relief bill so that we can finally address the high cost of prescription drugs.

The troubles caused by skyrocketing drug prices are a never-ending source of worry and hardship for Mississippians and people across this country. I hear about this issue from my constituents more than just about any other issue.

Let me highlight a few stories shared with me by some of my constituents.

Emily Quinn lives in Fulton, Mississippi. Her husband Brian was diagnosed with Type 1 diabetes at age 2 and continues to rely on insulin daily. Her son Dylan, who is now 16, was diagnosed with Type 1 diabetes at age 6. The Quinn family pays more than \$2,700 each month just for Brian and Dylan's insulin, not including the other diabetic equipment and supplies they need. It is shocking that, more than a century after insulin was discovered, insulin prices continue to rise by a staggering amount – nearly 300 percent over the past 10 years.

Scott Crawford of Jackson, Mississippi, is a volunteer advocate with the Multiple Sclerosis Society. Scott was diagnosed with primary progressive MS in 2002. Only one drug, named Ocrevus, can help slow the advancement of this disabling disease. That drug costs a staggering \$65,000 a year. Even with good insurance coverage, Scott cannot afford the \$15,000 copay for Ocrevus, so he goes without. MS drugs have seen some of the most shocking price increases of all – with list prices rising nearly 450 percent over the past 10 years.

Two young neurologists in Mississippi told me about their Medicare patients who quickly move into the catastrophic phase of Medicare Part D early each year. Even though these patients face only a 5 percent out-of-pocket cost for their drugs in this phase, that small percentage can amount to thousands of dollars for the expensive neurology drugs these patients depend on. Because there is currently no Medicare Part D out-of-pocket cap, these patients will get no relief from high drug prices later in the year.

These are just a few of the many, many stories I've received from Mississippians. And I have one of my own as well.

My mother, a Medicare beneficiary living in Monticello, Mississippi, faced \$454.50 in out-of-pocket cost for her prescription eye drops earlier this year – a tiny bottle of eyedrops. This drug, Restasis, has been on the market for well over a decade, more than enough time for Allergan, the pharmaceutical company that developed the drug, to recoup its investment. Yet the average wholesale price of this drug has increased by almost 250 percent in the past 10 years.

And Allergan has undertaken, what I consider, one of the most blatantly anticompetitive schemes in the history of the pharmaceutical industry. Fearing competition after its Restasis patents expired in 2014, Allergan transferred the patents to a Native American tribe in an attempt to use the tribe's sovereign immunity to shield Allergan against competition from lower-priced generic alternatives.

This case went all the way to the United States Supreme Court in 2018. Even though the Supreme Court ultimately ruled that this scheme was illegal, the company's underhanded ploy successfully delayed competition while it continued to reap outrageous profits from Restasis—costing the U.S. healthcare system over \$2 billion per year because of Allergan's monopoly pricing.

Mr. President, we want pharmaceutical companies to succeed. The great cures and treatments they discover improve the lives of Americans. But these cures and therapeutics can only save lives if patients can afford them. And too many Mississippians and individuals across this country cannot afford their prescription drugs due to anticompetitive practices of companies, like Allergan, that continue to increase their prices year after year.

Today, the threat of the coronavirus pandemic has only increased concerns about drug pricing. As new vaccines and treatments for COVID-19 are being tested and developed, the affordability of prescription drugs is more important than ever. Just as much as we need a vaccine or treatment to be discovered, we also need it to be affordable to Americans if we are going to get on the other side of this pandemic.

I am proud to be an original cosponsor of the Finance Committee Chairman's comprehensive Prescription Drug Pricing Reduction Act to bring affordability and fairness to the prescription drug market. This bill must be an immediate priority for us as leaders if we're serious about helping patients afford the drugs they need.

This important legislation would:

- Create a true out-of-pocket cap for Medicare beneficiaries.
- Reinforce the market forces that have supported the research and development of so many miracle cures.
- Keep pharmaceutical companies from price gouging
- Prevent taxpayers from being on the hook for unlimited price hikes that have no basis in the free market, and;
- Stop the hurtful tactics of pharmacy benefit managers that hurt patients and community pharmacies while enriching these middlemen.

These reforms would reduce out-of-pocket spending on prescription drugs by \$72 billion dollars, reduce premiums by \$1 billion, and save taxpayers \$95 billion. And the Congressional Budget Office anticipates those savings will spill over into even more savings in the commercial health market.

This is a priority that should transcend party politics. Yet Democrats, who had previously supported Chairman Grassley's reform legislation, have walked away from the drug pricing negotiating table altogether. They would rather deny President Trump a victory on this issue than help the millions of Americans struggling to make ends meet due to high drug prices.

There is no doubt about it: Democrats are putting election year politics ahead of making prescription drugs affordable for the American people.

Mr. President, the American people can't wait. Every month the Democrats continue to block this vital legislation is another month of thousands of dollars in insulin expenses for the Quinn family in Fulton. Every month delayed is another month that Scott Crawford's MS advances because he cannot afford his medications. Every month is another month that those neurologists in Jackson will continue to worry about their patients on Medicare who face unlimited expenses due to no out-of-pocket cap.

These patients and millions more like them cannot wait until next year or until the coronavirus pandemic passes or until Democrats decide to put the American people over politics.

Mississippians and Americans need a solution now. My friend, the senior Senator from Iowa, has done the hard work of writing a bill over the past 18 months that can address the heart of the issue and garner bipartisan consensus. I call on my colleagues to include the Prescription Drug Pricing Reduction Act in the next coronavirus relief package.