



## **MEMORANDUM**

To: Rep. Greenlick, Chair, House Health Care Committee  
Rep. Thompson, Vice-Chair, House Health Care Committee  
Rep. Keny-Guyer, Vice-Chair, House Health Care Committee  
Members of the committee

From: Bryan Boehringer, OMA Government Affairs  
Courtnei Dresser, OMA Government Affairs

Date: May 15, 2013

Re: Support for SB 777-A

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The OMA supports the intent of SB 777-A, which modifies the meeting requirements for the Pharmacy and Therapeutics Committee. The Pharmacy and Therapeutics Committee is charged with advising the Oregon Health Authority on which prescription drugs should be included on any preferred drug list or formulary established by the Health Authority.

The OMA, on behalf of our membership, attends the Pharmacy and Therapeutics Committee meetings as well as those of its counterpart, the Health Evidence Review Commission (HERC). The HERC meetings are well publicized and agendas posted in a timely fashion whereas the Pharmacy and Therapeutics Committee meetings have been less transparent and agenda items have been added with less than 30 days' notice. Limiting the ability of the general public to access information related to the drug classes and drug use reviews up for discussion can be detrimental to what is intended to be a public process. Without appropriate notification, it is difficult to engage expert clinicians who are impacted by the drugs up for review. An OMA member and oncologist first brought this issue to the attention of the OMA when he was impacted by a decision of the committee to exclude reimbursement for drugs with marginal benefits in cancer treatment. The physician only became aware of the change in the drugs' status after it was eliminated from the preferred drug list, no longer available for his patient and no longer open to public testimony.

SB 777-A is a first step towards increasing transparency in the Pharmacy and Therapeutics Committee agenda development. It requires the committee to clarify the names of any drug to be discussed by the committee as well as consider any drug use reviews separately from recommendations for inclusion or exclusion on the preferred drug list. The bill was amended by the House to divide the Pharmacy and Therapeutic functions and actions from the Drug Use Review functions and actions. This further serves the purpose of clarifying the agenda and making the P&T Committee more accessible to those public members who are impacted by its decisions.

Additionally, the OMA would like to see the bill amended to include language that would prohibit the committee from using any list or guidelines regarding coverage, payment or utilization of prescription drugs developed or utilized by the Oregon Health Authority to discriminate against patients based on disease or condition, quality of life or expected length of life. As referenced above, the oncologist whose patient can no longer access his/her drug due to marginal benefit does feel that the decision to eliminate the drug from the preferred list was based on the use of the drug at the end of a patient's life. He was unable to weigh in on the discussion at the time it was being heard by the Committee and now must seek alternatives for his patients.

Thank you for your consideration of SB 777-A; we encourage you to support this bill as a step towards increased transparency and public engagement in this committee.

**The Oregon Medical Association is an organization of over 7,800 physicians, physician assistants, and medical students organized to serve and support physicians in their efforts to improve the health of Oregonians. Additional information can be found at [www.theOMA.org](http://www.theOMA.org).**