

February 18, 2013

Chair Mitch Greenlick House Committee on Health Care State of Oregon State Capitol Building 900 Court Street NE Salem, OR 97301

Re: HB 2090 Requires Oregon Health Authority to use the Practitioner-Managed Prescription Drug Plan for prescription drug coverage of mental health drugs on and after January 2, 2014

Dear Chair Greenlick and Members of the Committee:

Sunovion is a global leader in research, development and manufacturing of treatments for patients primarily focusing on the brain and CNS disorders, and the respiratory system. At Sunovion we believe we have a responsibility to our patients, medical community, healthcare providers and policy makers to take a leadership role in advocating for policies that recognize our many partners in patient care, advance the treatment of unmet medical needs and have a sound economic basis.

Our company has made a profound investment in the area of mental health, and specifically the treatment of schizophrenia. Schizophrenia is a chronic, severe, and disabling brain disorder that has affected people throughout history<sup>i</sup>. According to the Milken Report on Chronic Diseases approximately 18% of the Oregon population have a diagnosable mental disorder <sup>ii</sup>. Treatment helps relieve many symptoms of schizophrenia, but most people who have the disorder cope with symptoms throughout their lives. However, many people with schizophrenia can lead rewarding and meaningful lives in their communities.

We applaud the efforts made by the Governor's Office, the Legislature and the Oregon Health Authority to transform Oregon's health care system through the integration of physical and behavioral health care. We believe this shows great promise in improving the lives of patients with severe mental illness.

This builds upon the policies that currently exist in statute that have successfully protected patients with schizophrenia who need access to important, non-interchangeable medications. Protecting patient access has been shown to save health systems significant costs by preventing hospitalizations, relapses, and other serious consequences that result when patients with serious conditions cannot access medications prescribed by their physicians

For these reasons Sunovion opposes proposed legislation that would require patients who are prescribed critical mental health medications to obtain prior authorization from the Oregon Health Plan before obtaining a prescription. Currently, critical mental health medications such as

atypical antipsychotics are exempt from OHP's "enforceable" preferred drug list (PDL). If access to antipsychotics is limited, patients can be denied their medication by the pharmacy if their medication isn't on the "approved" list. This will lead to delays in access to prescriptions as well as the possibility of switching medications which can be detrimental to these patients.

Removing patient protections that have been a positive aspect of Oregon's mental health care system is detrimental not only to the individual seeking care but to the overall integrity of Oregon's health system transformation which is seeking to provide better care and better health for all, including those suffering from mental illness.

For all the foregoing reasons, we oppose HB 2090 and ask that it not move forward. As always we are available to further discuss this legislation at any time.

Respectfully submitted,

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April Grant Director, State Government Affairs

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<sup>&</sup>lt;sup>1</sup> Regier DA, Narrow WE, Rae DS, Manderscheid RW, Locke BZ, Goodwin FK. The de facto US mental and addictive disorders service system. Epidemiologic catchment area prospective 1-year prevalence rates of disorders and services. *Archives of General Psychiatry*. 1993 Feb;50(2):85-94.

<sup>&</sup>lt;sup>ii</sup> DeVol, Ross, and Armen Bedroussian, *An Unhealthy America: The Economic Burden of Chronic Disease*, Milken Institute, October 2007