

March 16, 2015

**House Committee on Health Care – Public Hearing on HB 2951  
Testimony from Sarah Truman in support of HB 2951**

My name is Sarah Truman and I am from Beaverton, OR. On behalf of the National Psoriasis Foundation, The Leukemia Lymphoma Society, The Arthritis Foundation, One-in-Four Chronic Health, Cascade AIDS Project and all the patient advocacy groups of the Cap the Copay Coalition, I thank you for the opportunity to provide public input on HB2951. As you know, this legislation will cap out-of-pocket costs for “specialty drugs” – and I support HB2951.

I have had psoriasis since 1994, and psoriatic arthritis since 2006. Psoriasis and psoriatic arthritis are serious, autoimmune diseases with profound physical, psychological and economic burdens. Psoriasis puts me at increased risk for heart disease, stroke and early death, among other comorbidities. Treatment with specialty drugs like biologics help reduce my risk for these comorbidities. Additionally, treating my psoriatic arthritis – an inflammatory arthritis of the joints and tendons –is vital to prevent irreversible joint damage.

When I was first diagnosed, I had health insurance but no prescription coverage. I spent all my money on my medications just to be able to get out of bed and go to work. Eventually as my psoriatic arthritis became worse, I couldn’t even do that anymore. As a mother of three boys, this was devastating. I cycled through numerous medications and had little success. I had given up hope of being able to work or being able to walk. I was confined to the bed, couch, and the chair. My children were taking care of me, as were my friends and parents. My world had come to an end as I knew it. I was getting ready to apply for disability. I was depressed, and struggling with the “why me” syndrome.

In 2009, my doctor introduced me to my first biologic. It tremendously improved my quality of living. I could walk, with a limp, but I could walk. We tried the next one. No limp. I was making progress. I still could not live a full life, but I was able to get out of bed and was making it to work. I am currently on Remicade, which has saved my life. I receive this medication every 4 weeks and without it, I would not be able to be with you here today.

For me and many others, these medications can be very difficult to access and the financial burden is extreme. My insurance company places these types of drugs in a “specialty tier” where a portion of the total cost of the drug is passed onto me as a coinsurance. In my case, that means paying more than \$3000 per month in out-of-pocket costs. It’s not like I just take one or two medications to manage my diseases. I take numerous medications and that means a huge financial burden regarding out-of-pockets costs.

I don’t want to choose between paying rent, buying groceries, paying the light bill, and vital medication. But, I have had to do all of this. I’ve had to wait in line at the food banks more than I care to admit, and I make a good salary. That’s why House Bill 2951 – which would cap copayments on specialty prescription drugs – is so important to me.

Many of these chronic conditions are genetic – I developed these diseases through no fault of our own – and I do EVERYTHING I can to try and curb my flares. If there is a diet, I have tried it. I

don't smoke and don't drink. If there is a homeopathic cure, I have tried that too. I exercise when I can. I don't like taking all this medication, but I have no choice. I tried all types of medications, before I moved onto biologics. These were last resort for me. No one wants to live with a suppressed immune system. I don't like giving myself injections, checking into the hospital once a month for 4 hours to be hooked up to an IV, damaging my internal organs. My own price has been liver failure, so that I can walk.

Although I am not 100% of what I used to be, I am a fully functional, working, tax paying citizen of this great state. Thousands of Oregonians with chronic diseases like me rely on specialty medication to live a normal life. Without specialty medications like biologics I would not be able to walk, get out bed, or be a tax-paying member of society. I couldn't help my son & his wife, my grandson, my parents or contribute to charitable foundations.

I believe HB2951 is good for Oregon and will improve the health of thousands of Oregonians including myself. I respectfully urge all members of the Health Committee to support this legislation.

Thank you again for the opportunity to share my story.



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February 16, 2015

047MEOSV1002012-21061-01  
 SARAH TRUMAN  
 BEAVER TON OR 9/006-8801

**Member/Patient Information**

Member/Patient: SARAH TRUMAN  
 Member ID:  
 Relationship: EE  
 Group Name:  
 Group #:

**Explanation of Benefits Statement**

This is not a bill. Do not pay. This is to notify you that we processed your claim.

**Claims Summary**

Detailed claim information is located on the following page(s).

Dollar Amount	Description
\$15,180.95	<b>Amount Billed</b> This is the total amount that your provider billed for the services that were provided to you.
\$4,034.24	<b>Plan Discounts</b> Your plan negotiates discounts with providers to save you money. This amount may also include services that you are not responsible to pay.
\$7,531.71	<b>Your Plan Paid</b> This is the portion of the amount billed that was paid by your plan.
<b>\$3,615.00</b>	<b>Total amount you owe the provider(s)</b> The portion of the Amount Billed you owe the provider(s). This amount does not reflect any payment you may have already made at the time you received care. This amount may include your deductible, co-pay, coinsurance and/or non covered charges. This amount does not include any payments made to the subscriber*. If a payment was made directly to the subscriber, you/the subscriber is responsible for paying the physician, facility or other health care professional. * When coordination of benefits applies, this amount will include payments made to the subscriber.



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 for all your claim and benefit information.

**Claim Detail for SARAH TRUMAN**

Provider: OREGON HEALTH

Claim Number:

Patient Account Number:

Date(s) of Service	Type of Service	Notes*	Amount Billed	Plan Discounts (-)	Your Plan Paid (=)	Your Itemized Responsibility to Provider**		
01/23/2015	OP MISC. SERVICES	D2	\$14,223.95	\$3,701.10	\$6,954.64	\$0.00	\$2,318.21	\$3,568.21
01/23/2015	LABORATORY SERVICES	D2	\$170.00	\$128.52	\$31.11	\$0.00	\$10.37	\$10.37
01/23/2015	CHEMOTHERAPY	D2	\$350.30	\$204.62	\$109.26	\$0.00	\$36.42	\$36.42
01/23/2015	CHEMOTHERAPY	S6	\$436.70	\$0.00	\$436.70	\$0.00	\$0.00	\$0.00
<b>Claim Total:</b>			<b>\$15,180.95</b>	<b>\$4,034.24</b>	<b>\$7,531.71</b>	<b>\$0.00</b>	<b>\$2,365.00</b>	<b>\$3,615.00</b>

\*\* This total does not reflect any payments / copays you made at the time of service.  
 Please wait for a provider bill before making a payment.