



April 7, 2015

Senate Committee on Health Care Laurie Monnes Anderson, Chair Oregon Senate Salem, Oregon

RE: SB 841

Dear Senator Monnes Anderson and Members of the Committee:

I am writing on behalf of the American Academy of Pain Management in support of SB 841, a bill which requires health plans to reimburse the cost of prescription drugs dispensed in accordance with the plan's synchronization policy; and further, the plan shall prorate any cost-sharing requirement applied to a dispensing of less than a 30-day supply of a prescription drug if requested for the purpose of synchronizing a patient's prescription drugs. In addition, the bill would require the health plan to fully reimburse the dispensing fee for partially filled or refilled prescription drugs. And finally, the bill directs the Oregon Health Authority to implement a synchronization policy for the dispensing of prescription drugs to recipients of medical assistance who are not enrolled in a coordinated care organization. Medication synchronization has been demonstrated to improve adherence, resulting in healthier patients and a cost reduction to patients, insurers, and the healthcare system as a whole.

Pain is a significant burden for many people living with chronic illnesses, and those with limited mobility or limited resources, for example, are extremely challenged by multiple trips and copays at the pharmacy every month. The use of medication synchronization is gaining in popularity as a way to improve adherence by patients who are on a regular medication regimen. To coordinate the patient's recurring medications, the pharmacist performs a comprehensive review of the patient's medication regimen to determine the appropriateness of each therapy. After the initial review, the pharmacist calls the patient each month, before filling the new prescriptions, to ensure that no changes have been made and to confirm that the patient is still taking the medication.

The Centers for Medicare & Medicaid Services (CMS), the nation's largest payer for health care, is implementing several policy changes that will help remove current barriers to the medication synchronization process, reduce waste from unnecessary fills, and ensure that beneficiaries receive only the medications they need. Medicare Part D sponsors are now required to apply a daily cost-sharing rate to most prescriptions dispensed for less than a 30-day supply. This provides a common sense approach when patients are trying a new therapy or are attempting to synchronize their refills. Legislation or regulation at the state level could help remove other payers' existing barriers and encourage the use of medication synchronization programs.

We support SB 841 as an important step to improve access to higher quality healthcare while lowering overall costs. We urge the committee to support this bill and to vote to advance it. I am happy to discuss this issue with you if necessary. Please feel free to contact me by email at <a href="mailto:btwillman@aapainmanage.org">btwillman@aapainmanage.org</a>, or by telephone at 209-533-9750, ext. 110.

About the Academy: The American Academy of Pain Management is the premier organization for all clinicians who care for people with pain. It is the largest pain management organization in the nation and the only one that embraces, as part of its mission statement, an integrative model of care, which: is patient-centered; considers the whole person; encourages healthful lifestyle changes as part of the first line of treatment to restore wellness; is evidence-based; brings together all appropriate therapeutic approaches to reduce pain and achieve optimal health and healing; and, encourages a team approach.

Sincerely yours,

Robert Twillman, Ph.D., FAPM

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**Executive Director** 

American Academy of Pain Management

cc: Senator Alan Bates