



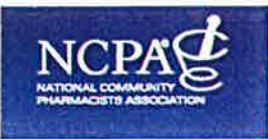
Adoption of SB 93-B Will Increase Patient Safety and Access



SB 93-B provides a unique opportunity to increase patient safety, access and convenience while at the same time creating fairness in the drug distribution system. SB 93 will allow a patient, if they choose, to get the same drug for the management of chronic disease at a retail pharmacy that their insurance company's formulary allows them to get through select networks or mail order pharmacy.

What does SB 93B do?

- SB 93-B requires an initial 30-day supply of a medication to ensure patient safety and effectiveness of treatment, prior to authorizing a 90-day supply.
- SB 93-B allows a 90-day supply of prescription drugs (other than Schedule II controlled substances) when appropriate, which can reduce multiple trips to the pharmacy and provide patients the flexibility to leave home for vacations or emergency situations without the stress and burden of needing refills every 30-days.
- SB 93-B eliminates the current practice of allowing only mail order or preferred network pharmacies to provide a 90-day supply of medication. The current practice limits patient choice and, if the patient has a preferred local pharmacy or pharmacist, fragments therapy as health providers attempt to piece together a complete understanding of a patient's current drug therapy and adherence.



What does SB 93B NOT do?

- SB 93-B does not require payers to pay pharmacies at a different reimbursement rate than mail order pharmacies, so it should have **NO IMPACT** on costs (Sec. 2 (2); lines 15-17).
 - California, Washington and other states have approved similar statutes and have not experienced cost increases.
- SB 93-B does **NOT** interfere with the payers' ability to determine their formularies and benefit plans (Sec. 2(3); lines 18-19). This assures that the payers **DO NOT** have to include expensive specialty drugs or other drugs not otherwise approved for 90-day supply treatments by the terms and conditions of their contracts.



If a patient has access to a 90-day supply of their prescription medication then the likelihood they will have more on hand when a natural disaster strikes is greatly increased. In addition, after a natural disaster Oregonians could experience difficulty accessing the medication needed for their chronic condition – SB 93-B would provide patients the ability to access their medication at retail pharmacies during emergencies.



National Multiple Sclerosis Society Oregon Chapter

Health providers and each patient's healthcare team are best prepared to make drug, disease, and patient specific therapeutic decisions regarding the appropriateness of 90-day supply. **Please support SB 93-B to promote safe and consistent medication use among patients.**



From The desk of:

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