Brian DeLashmutt Testimony SB 792 and 793
3/9/2017 Senate Health Care Committee

Chair Monnes Anderson and members of the Senate Health Care committee, my name is Brian DeLashmutt and I reside in South Salem. While I spent nearly 37 years in the Capitol Building representing clients including a number in the area of Health Care and Human Services I am submitting this testimony as a private citizen.

Unfortunately I am out of town today or I would be presenting this testimony in person as I did in the House Committee last week. I appreciate these two committees delving into this very important issue and why after not coming back to the Capitol since my retirement I felt a need to present this testimony.

In July of 2014 out of nowhere I was diagnosed with a somewhat rare blood disease called Multiple Myeloma. At the time I was unaware that I was even ill and a trip to the hospital with a kidneys stone and follow up at my Doctors office revealed that I was a very ill person and was told that if not treated I had days to live. My blood was more than 95% cancerous and my calcium blood levels were double the normal rate which was the highest blood calcium rate the doctors had ever seen. At the time I was told both the bad and good news that the cancer could not be cured, only treated but that only 15 to 20 years ago no treatments would have been available to extend my life.

Fortunately the kidney stone likely saved my live and I was admitted and treated in the hospital for 8 days to stabilize my kidneys and begin the fight to lower the calcium and cancer levels. After 6 months on heavy doses of Chemotherapy I was admitted to OHSU for a stem cell transplant.

With that history that brings me to the central focus of my testimony today. Shortly after the transplant I was on approximately 8 to 9 prescriptions. I am now down to 5 prescriptions that will maintain me in remission for a period of time. Let me focus on 2 of these prescriptions, both forms of Chemotherapy. Each day I am required to take a pill that for a 28 day supply costs $17,041.

Each day this pill costs $608.

Additionally I get an injection of chemotherapy prescription every two weeks. While the injections I get are of a generic version it still costs over $3,000 every two weeks and if it was the nongeneric version it would be over $9,000 for each injection. This cost doesn't include the administration of the injections.

Let's do the math for these two drugs. The 28 day costs (not monthly costs) are over $23,000 and that doesn't include the other 3 prescriptions.

Unless a "Silver Bullet" cure is discovered this is the new normal for people with diseases like mine that have no cure.

While I am covered by Medicare and have the best supplemental insurance program I could find, that still leaves me each month with hundreds maybe up to a thousand out of pocket. However somewhere in the system the remainder of these high costs is picked up. For me the costs are born by Medicare and my supplemental via MODA. For others it may be private pay, private insurance or programs like OEBB and other government sponsored programs. In short we all pay in one form or another.

I can afford my share of these costs, however many of the people I see on a regular basis over the past three years getting treatment can’t. That is why I am here today.

There are some programs to help those with these extreme costs, many of these programs whether by a drug company of by one of the many nonprofits that attempt to help are valuable. However either the income ceiling to qualify is low or the nonprofits run short on money and cannot help those who can’t afford even the hundreds of dollars each month not alone the thousands. I have spent several years researching the nonprofits and find they do great work but can’t help all those in need.

In short I support any legislation that helps those who can’t afford the high costs of staying alive and with that I will answer any questions you may have.