



Testimony in Support of HB 2387

Diane Solomon

March 3, 2017

Senator Steiner-Hayward and Members of the Committee:

Thank you for the opportunity to present testimony in support of SB 792 and 793. My name is Diane Solomon. I am a doctorally prepared Psychiatric Nurse-Practitioner and Certified Nurse-Midwife representing ONA. I cannot personally be with you today as I am treating patients, but respectfully submit this testimony in my absence. ONA represents registered nurses and a commitment to patients in health care settings across the state. We are committed to ensuring Oregon addresses rapidly increasing prescription drug costs that impede delivery of successful, timely, and affordable patient care in line with the Triple Aim.

As you know, prescription prices are one of the fastest growing cost drivers of health care today. Oregon's patients cannot keep paying the price—either through pharmacy dollars or rising insurance premiums bloated by Pharma costs. Oregon employers cannot keep paying the price by slashing additional benefits, which trickle down to hurt our patients. And the state budget cannot keep paying the price either. We require a sustainable solution and I applaud your efforts.

In Oregon, we are proud and nationally championed for successfully retrenching health care, and aiming to keep health care growth at 3.4% annually. Mushrooming prescription drug costs are a huge threat to fiscal conservancy. Unaffordable, unpredictable, skyrocketing prescription prices impact us all, including myself. My husband and I have four children, one on the autism spectrum. He, like most children with autism, struggles to sleep through the night. Without medication, he is up at all hours, unable to learn or be socialized, miserably sleep deprived. Last year, we were forced to pay \$1200 for a simple, non-specialty, non-narcotic sleep medication (clonidine ER) that private insurance refused to pay because they passed big Pharma's price hikes on to us.

In my own practice, I specialize in Women's Mental Health. When mothers suffer depression, anxiety, or other mental health disorders, known and catastrophic downstream effects ensue. Children of these mothers suffer psychiatric diagnoses, impaired cognitive, social, and academic functioning, and lifelong sequelae—often including entry into our criminal justice system. Maternal mental health disorders are easily treated with generic or brand name medications, and the evidence base shows children of treated mothers are set on the path toward a much more positive lifelong trajectory. Yet I must fight daily with insurance companies and Pharma to get even some generic prescriptions authorized. And when authorized, insurers often pass on big Pharma costs to consumers with co-pays that often still make treatment cost prohibitive for many. We simply cannot afford astronomical downstream health consequences tomorrow, while we stand by today.

SB 792 and 793 are important steps toward addressing these challenges. These bills provide immediate and real protection to consumers from steep and sudden price increases, create transparency in pricing for the public, and offer payers predictability and sustainability without sacrificing outcomes or access. Thank you so much for your advocacy on behalf of our patients.

I urge your support for SB 728 and 729. Thank you.

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