

Senate Committee on Health Care

Dear Chair Monnes Anderson and Committee Members,

I write in opposition of SB 237 – copay-only for prescription drugs.

There is a fundamental economic principle that is forgotten in the writing of this bill. That is you pay for what you get.

Having at least one option to choose as a copay-only plan is not a bad thing as long as it's not the only choice. To require it when only one plan is offered will make it an expensive plan for everyone. One price copay without tier options would mean averaging the utilization of very expensive drug in with those that just use an antibiotic every few years to fight an infection. It would raise the cost of a prescription drug plan significantly.

The drawback for the bill is requiring when there is only one plan that it be a copay-only plan because it flies in the face of what the state's focus should be, and that is to keep the cost of insurance affordable.

Perhaps if copay-only was the only option, it should be required to have the choice of tiers to make it more cost effective for general usage. The bill actually plays into the insurer's actuarial need to recoup costs of very expensive drugs through higher premiums from those that don't use drugs on a regular basis. In effect, this bill is redistribution of wealth and penalizes those that go the extra mile to be healthy. Don't misunderstand that many can't help their unhealthy conditions. But, this state has taken a step into being an unhealthy state with several of its social issues. To ask people that refrain from those addictions to support the health issues of those unhealthy habits is wrong.

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