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Re: SB 139 – Memo of Support

Dear Committee Members,

The Coalition of State Rheumatology Organizations (CSRO) is a national organization composed of over 30 state and regional professional rheumatology societies formed in order to advocate for excellence in rheumatologic care, and to ensure access to the highest quality care for patients with rheumatologic and musculoskeletal disease. Rheumatologists are entrusted with the safe care of patients with rheumatoid arthritis and other autoimmune diseases that require the careful choice of safe and effective pharmaceutical and biological therapies.

The implementation of various utilization management practices, such as prior authorization, step-therapy, and non-medical switching, have had a deleterious impact on rheumatologists' ability to provide proper care to their patients. The CSRO recognizes that there can be a role for utilization management, but when utilization controls are so stringent and unresponsive that insurers have in effect begun practicing medicine – the balance is decidedly uneven. SB 139 provides balanced reforms to the aforementioned practices, while still maintaining them as meaningful cost-control tools.

To that end, CSRO urges you to support SB 139

Rheumatologists treat patients with extremely complex chronic conditions such as rheumatoid arthritis (RA). Complex chronic conditions such as RA are temperamental and present unpredictably on a case-by-case basis. This necessitates a high degree of individualized care and attentive management. Stabilizing these conditions is a process that can take months or even years of trial and error. The resulting course of treatment must carefully balance each patient's unique medical history, disease environment, and drug interactions.

Utilization management controls, as they exist in the status quo, are onesize fits all approaches that impede access to treatment decisions arrived at through the course of the doctor-patient relationship. Existing appeals pathways have failed to rectify these problems. Health plans do not devote the time, resources, or expertise that is required to properly evaluate the treatment decisions being made between patients and their physicians. Patients with complex chronic conditions require a different approach. There must be a role for the doctor-patient relationship, and SB 139 helps to restore it to its proper role.

The stakes for these patients are high. Slight derivations in treatment and variations between drugs, even those in the same therapeutic class, can cause serious adverse events. The resulting disease progression can be irreversible, life threatening, and cause the patient's original treatment to lose effectiveness. Patients with complex chronic conditions need the right treatment at the right time.

For these reasons CSRO respectfully requests that you vote to advance SB 139.

Sincerely,

Madelaine H. Feldman, MD, FACR

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President, CSRO