Date: 2/21/19

To: The Honorable Mitch Greenlick, Chair; The Honorable Hayden, Vice-Chair; The Honorable Nosse, Vice-Chair; Members of the House Health Care Committee

From: Beverly Sherrill, The Dalles, Oregon (SD 30, HD 59)

RE: Please support HB 2753, HB 2754, and HB 2755, increased access to generics and biologics

Chair Greenlick, Vice-Chairs Hayden and Nosse, and members of the House Health Care Committee,

Over twenty years ago I was diagnosed with Osteopenia, low bone density. This condition requires monitoring with bone scans, medication, calcium supplements, and exercise. Because of the requirements of the Affordable Care Act, monitoring and medication was covered by insurance, even though it was a pre-existing condition.

Unfortunately, in 2013 I slipped into the Osteoporosis range and started a new therapy, a Reclast infusion. I had my first infusion at the Celio Center at Mid-Columbia Medical Center in The Dalles, Oregon and was shocked when the bill arrived, \$6,305! Fortunately, because I had great insurance, my out-of-pocket cost was only \$898, but it was money I had no idea I would be spending. I called my doctor to see if she knew how much it cost - the answer was no. This was a treatment done once a year, so when it was time again in 2014 I asked how much this is going to cost. I called my insurance company and was told the actual cost wasn't their responsibility. I called the pharmacy, no way to find out without a prescription from a physician. Plus, you can't just go buy the medicine - it is administered by IV. After wrestling with trying to find another option, I ended back up at the Celilo Center and another bill, this time \$6,594 and my insurance covered it.

In preparation for another treatment in the fall of 2015, I asked my Doctor about going to OHSU to the Osteoporosis specialist and she agreed. An appointment would be 6 months out (unless it was an emergency) so I had to wait. After seeing the Doctor at OHSU in 2016 he agreed that I needed another Reclast infusion and ordered the treatment to be done at the OHSU campus. Again, I had no idea how much the charge would be. When the bill arrived in the mail, I opened it and to my astonishment it was \$1,193 and my portion would be \$99.83. Why would this be? I didn't have to drive to Canada, just to Portland. I called my insurance, and they said they just approve charges.

After much research I found out that Reclast had a generic option in 2016 and therefore the drop-in price. I should have known in advance that a generic option was available for Reclast, which is why I'm writing to ask that you support HB 2753, HB 2754, and HB 2755. These bills will make it mandatory for pharmacists to let patients know if a generic or biologic version of their medication is available for a lower price. They will still have the option of purchasing the brand-name, but they will be informed and able to make the choice that makes the most sense for them. Luckily, I had good insurance throughout the

time I needed treatment, but others are not so lucky. For many people, the difference between paying for a generic and paying for a brand name drug is a rent or car payment.

Thank you for considering supporting these bills. It will make a difference for so many people.

Sincerely, Beverly Sherrill The Dalles, OR