



Comments on HB 2678, Dash-2 Amendments  
From Chris Bouneff, Executive Director, NAMI Oregon  
April 4, 2019  
House Health Care Committee

NAMI Oregon, the state chapter of the National Alliance on Mental Illness, wishes to provide comment on the Dash-2 amendments to House Bill 2678, in particular the provision that eliminates language around access protections for mental health medications.

As we've articulated in past legislative sessions, access is critical for many people with moderate to severe mental health disorders. There is a high degree of variability in response to mental health medications. Even though people may share the same symptoms or diagnoses, what works for one person does not work for another. This is why NAMI vehemently defends the ability of prescribers and patients to find the right medication on the first try rather than force patients to fail first on a hierarchy of medications. Finding the most helpful medication for consumers should be based on clinical judgment and informed consumer choice — not an arbitrary “approved” list.

In consultation with the Oregon Health Authority, we believe that statute existing elsewhere, specifically ORS 414.742, preserves these protections. Therefore, we do not object to this portion of the Dash-2 amendments.

However, we caution the Committee to ensure that the final bill does not inadvertently undercut the work of the Mental Health Clinical Advisory Group (MHCAG) as outlined in Senate Bill 138. NAMI Oregon, in collaboration with the Oregon Health Authority, supports SB 138, which reauthorizes the MHCAG, extends the sunset for the mental health carve out while the Advisory Group continues its work, and formally ties the Advisory Group's work to the Oregon Psychiatric Access Line hosted at Oregon Health & Sciences University.

The Advisory Group is charged with developing comprehensive treatment algorithms for the most common mental health disorders with the aim of standardizing the provision of behavioral health care across Oregon. (This group was created under House Bill 2300 in the 2017 Legislature.) We believe it speaks volumes that what was originally solely a NAMI Oregon proposal in 2017 is now jointly proposed by OHA and NAMI Oregon in 2019 — the group is proving its worth.

We point out that the Advisory Group is composed of members with expertise in mental health treatments and medications — expertise that doesn't exist within the Health Evidence Review Commission, the Pharmacy and Therapeutics Committee, or the Oregon Health Policy Board.

In any final proposal for HB 2678, we hope that the Committee ensures that we don't inadvertently interfere with the Advisory Group's work and the protections we currently have around mental health medications.

Thank you for this opportunity to provide input on the Dash-2 amendments.