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March 21, 2021

The Honorable Deb Patterson Chair Senate Committee on Health Care Oregon State Capitol 900 Court Street NE, S-215 Salem, Oregon 97301

## RE: SB 844 (Patterson) – Establishes Prescription Drug Affordability Board

Dear Chair Patterson and Members of the Committee,

ICAN, International Cancer Advocacy Network, has serious concerns regarding SB 844, which would establish a Prescription Drug Affordability Board under the Department of Consumer and Business Services to review prices for prescription drug products meeting specified cost criteria.

We fully support the Committee's goal to make medications more affordable for patients. ICAN is proud to support SB 439 (Senator Knopp), and was honored to have two ICAN patients from Oregon, and our Director of Governmental Relations, testify on behalf of it before your committee last month. SB 439 requires that patients receive 85% of rebates from pharmaceutical companies. That is a clear measure that will reduce costs to patients making drugs more affordable and more accessible.

ICAN is a 501(c)(3) non-profit organization, based in Phoenix, Arizona. During the past 25 years, ICAN has helped over 14,000 cancer patients find clinical trials and new therapies. We have helped patients in Oregon, in every other state, and in 54 foreign countries. Most of the patients we help are Stage IV, the most serious stage of cancer. We deal daily with the challenges and frustrations of our patients attempting to access drugs both for the treatment of their cancer, and to mitigate the effects of that treatment.

Our concern is that aspects of SB 844 establishing a Prescription Drug Affordability Board will not reduce prices, and may create serious obstacles for patients to access their drugs. The upper payment limit that is part of SB 844 could lead to greater difficulty for patients to access their vitally needed drugs. This could result if the upper payment limit set

by the Board reduces or eliminates the ability of hospitals, oncology centers, and pharmacies to purchase these drugs for their patients.

Perhaps of greatest concern is the threat of using an Institute for Clinical and Economic Review (ICER)/quality-adjusted life year (QALY) pricing methodology to set upper payment limits for medicines. We strongly oppose any effort to use QALY methodology in health care pricing. Although ICER and QALY are not mentioned in the current bill language, we have seen similar legislation in other states where ICER and QALY are implicitly referenced.

Although our concern about a commission approach to setting drug prices remains, we would strongly urge all parties to agree on an explicit prohibition of using ICER/QALY metrics in drug pricing (or any similar metric).

We urge consideration of other cost-reducing measures that promise much more direct impact on prices, and on a greater number of drugs—while preserving (and indeed, increasing) access. Supporting measures like SB 439 (requiring that 85% of rebates be passed on to the patient), is the right approach to help patients access critically needed, life-extending, and life-saving drugs.

Please do not hesitate to contact me at <a href="marcia@askican.org">marcia@askican.org</a> or at (602) 618-0183 if you need any additional information. Thank you for your consideration.

Respectfully submitted,

Marcia K. Horn, JD President and CEO

ICAN, International Cancer Advocacy Network

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ICAN is a 501(c)(3) tax-exempt charitable organization (EIN 86-0818253) serving Stage IV metastatic cancer patients across the United States and in 54 countries since 1996. ICAN is one of the few national cancer organizations that is both Platinum-rated (the highest rating) on GuideStar, and five-star rated (also the highest) on Great Nonprofits.

ICAN, operating with the highest standards of board governance, has received the "Top-Rated Health Care Nonprofit" award from Great Nonprofits every year since 2010.