Pacific Northwest Bleeding Disorders

CHAPTER OF EXCELLENCE

May 3, 2021

Honorable Senator Deb Patterson
Chair, Senate Committee on Health Care
Honorable Senator Tim Knopp
Vice Chair, Senate Committee on Health Care
Committee Members, Senate Committee on Health Care
900 Court St NE
Salem, OR 97301

RE: Support for HB 2517

Dear Chair Patterson and members of the Senate Committee on Health Care,

I am writing today on behalf of Pacific Northwest Bleeding Disorders (PNWBD - formerly known as Hemophilia Foundation of Oregon) in support of House Bill 2517, which addresses prior authorization and step therapy issues in our health care system.

PNWBD is the leading advocacy organization for individuals with bleeding disorders living in Oregon and SW Washington. Our mission is to enhance the quality of life for individuals with bleeding disorders and their families through advocacy, assistance, outreach, education and research support.

PNWBD strongly supports HB 2517 because it would provide important patient protections related to step therapy. Passage of this bill would ensure health care providers may override a health plan's step therapy protocols in certain circumstances when it is medically appropriate for a patient.

The definition of step therapy is trying less expensive options before stepping up to drugs that cost more. The practice has become increasingly prevalent and often results in individuals with chronic and progressive conditions having to suffer lengthy delays in accessing the right treatment. For persons with bleeding disorders delay in receiving life-saving medication could be debilitating or even fatal.

PNWBD recognizes that treating bleeding disorders can be complicated and often result in high medical expenses for patients and their health insurance plans. While it is important for insurers to utilize cost containment strategies, it is critical that such strategies not compromise continuity of care for those with complex medical conditions.

Most bleeding disorders are genetic conditions for which there are no known cures. To manage these disorders, patients often depend on prescription medications (clotting factor or novel, non-factor treatments) to treat or avoid debilitating and life-threatening internal bleeding episodes that can lead to future medical issues.

Clotting factor and non-factor replacement therapies are biological products either derived from human blood plasma or produced by using recombinant technology; there are no generic equivalents. Differences among these therapies mean that they are neither pharmacologically nor therapeutically equivalent. Collectively, these characteristics make an individual's response to a specific product very unique.

PNWBD works closely with two national organizations – National Hemophilia Foundation (NHF) and Hemophilia Federation of America (HFA). These organizations work diligently to advocate on behalf of people living with bleeding disorders. In addition, they provide treatment protocols and medical standards for those living with bleeding disorders across the US.

NHF's Medical and Scientific Advisory Council (MASAC) recommends that individuals retain access to the full range of FDA-approved clotting factor products. Limiting access through utilization management practices like step therapy/fail first could have a negative impact on patient care and ultimately result in higher drug spends. Therefore, drug benefit designs employing these methods should be avoided, and the choice of product used by an individual should remain a decision between patient and physician.

On behalf of individuals in Oregon affected by bleeding disorders, we urge you to support HB 2517 and pass it favorably from the committee.

Thank you for considering our comments and making them part of the record. If you have any additional questions, or need any additional information, please contact myself at my email below or our legislative consultant, George Okulitch (george@okulitch.com).

Thank you,

Madonna McGuire Smith

Madonna McGuire Smith
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