

Caring Ambassadors Program Lorren Sandt, Executive Director P.O. Box 1748 Oregon City, OR 97045

Written Testimony Senate Committee on Health Care Support SB 1508 February 7, 2024

Dear Chair Patterson, Vice Chair Hayden, and committee members,

My name is Lorren Sandt, Executive Director of the Caring Ambassadors Program. The Caring Ambassadors Program is a national nonprofit advocacy organization based in Oregon City, Oregon. Caring Ambassadors has empowered patients to be advocates for their health since 1997. We provide education, support, and advocacy for people living with chronic diseases, focusing on lung cancer and hepatitis C. We respectfully urge you to vote yes on SB 1508, which prohibits using quality-adjusted life years (QALYs) by the Health Evidence Review Commission (HERC).

QALYs are illegal and discriminate against people with lung cancer, chronic disease, and disabilities. In fact, in some instances, the QALY value for a person with lung cancer is .58. The people I know with lung cancer do not believe their life worth is 42% less than another person. Treatment is becoming more individualized and improving survival. A one-size-fits-all health policy does not consider this and may restrict access to optimal care and ignore the physicians' and patients' decisions.

In the past, QALYs were used by HERC when the FDA approved new therapies for hepatitis C (HCV). Unfortunately, this resulted in draconian restrictions on the CURE for most people living with HCV in Oregon. Fast forward ten years to today, most conditions have been removed (partly because patients sued the state). However, we still have physicians across the state who believe they cannot treat their hepatitis C patients because they use drugs, drink alcohol, or do not have enough damage done to their liver to warrant treatment—all conditions imposed by P & T 10 years ago.

Healthcare coverage policies should not be informed by discriminatory metrics like QALY that can undermine access to treatments. If we had today the report required in Section 3 (6), the data would show how previous prior authorization and utilization management implored on HCV treatment has led to a lack of treatment for those most at-risk for transmitting the virus, helping to fuel the increase in HCV in Oregon.

Through discussion with consumers, advocates, physicians, and the committees, OHA can develop a novel way to review evidence that will help create a system based on the state's healthcare equity focus. Please pass SB 1508.

I appreciate your consideration. Sincerely,

Lorren Sandt