

# SENATE COMMITTEE ON HUMAN SERVICES

February 22, 2005  
3:00 P.M.

Hearing Room D  
Tapes 22 - 23

Corrected 10/03/2005

**MEMBERS PRESENT:** Sen. Bill Morrisette, Chair  
Sen. Jeff Kruse, Vice-Chair  
Sen. Laurie Monnes Anderson  
Sen. Charles Starr

**MEMBER EXCUSED:** Sen. Rick Metsger

**STAFF PRESENT:** Rick Berkobien, Committee Administrator  
Katie Lowry, Committee Assistant

**MEASURES/ISSUES HEARD:**

**Evidence-based Process on Prescription Drugs: Drug Reviews, Improving Drug Use Safety, and Application of Information – Informational Meeting**  
**Oregon’s Mental Health Medication Initiatives: Partnership for Psychiatric Medication Access – Informational Meeting**  
**The Medicaid 340B Program: Overview, Other State’s Experience and Potential for Use in Oregon – Informational Meeting**

---

These minutes are in compliance with Senate and House Rules. Only text enclosed in quotation marks reports a speaker’s exact words. For complete contents, please refer to the tapes.

---

<b>TAPE/#</b>	<b>Speaker</b>	<b>Comments</b>
<b>TAPE 22, A</b>		
005	Chair Morrisette	Calls committee to order at 3:06 p.m. Opens informational meeting on Evidence-based Process on Prescription Drugs.
<b><u>EVIDENCE-BASED PROCESS ON PRESCRIPTION DRUGS - INFORMATIONAL MEETING</u></b>		
010	Dr. Mark Helfand	MD, Oregon Health and Sciences University (OHSU) Evidence-based Practice Center. Introduces himself.
012	Chair Morrisette	Notes that the members are in a sub-committee.
013	Helfand	Gives background information and explains evidence-based process on prescription drugs.
034	Chair Morrisette	Recognizes the committee is now a full committee.
035	Helfand	PowerPoint presentation: Explains systematic reviews.
060	Helfand	PowerPoint presentation: Explains outcomes.
070	Helfand	PowerPoint presentation: Discusses evidence.
075	Helfand	PowerPoint presentation: Discusses systematic literature reviews.
090	Helfand	PowerPoint presentation: Discusses drug-class reviews.
110	Helfand	PowerPoint presentation: Discusses strengths of evidence-based process.
130	Sen. Kruse	Asks how you get a correct demographic sample if it is reviewed by the public.
135	Helfand	States that some experts also review it. States that the public review process has been mostly productive. Describes demographics of public reviewers.
150	Sen. Kruse	Comments that he was misunderstanding the term “public review.” Verifies that the reviewers have to have some type of knowledge or background to be able to review.

155	Helfand	Confirms that they do have to have some knowledge or experience. Comments that the reports tend to be technical and hard for a layperson to read. Discusses that it is important for those being studied to have input.
170	Sen. Kruse	Discusses understanding of Helfand's comments.
180	Chair Morrisette	Comments on difference between peer review and public review.
181	Helfand	Comments that when the reports are open for public comment, that many people who comment are peers.
183	Chair Morrisette	Inquires regarding Helfand's knowledge of a study.
185	Helfand	Discusses the approval process of the Federal Drug Administration (FDA) and studies that come out of it. Discusses an example involving Vioxx prescription drug and heart attacks.
230	Helfand	Discusses the benefit of having physicians on panels to do research because of the lack of time for physicians to read all information.
240	Chair Morrisette	Inquires if there is evidence that show the effectiveness of medical marijuana.
255	Helfand	Answers that he has not been asked to perform a study on that.
258	Chair Morrisette	Comments that he would like to have a study done.
260	Helfand	Comments that before they spend money on research they look to see if someone else has done it.
267	Chair Morrisette	Comments that there is a fund to assist in research. Discusses the need to perform the research.
285	Helfand	Remarks that there is an investigator that is investigating different issues of pain.
295	Dr. Kathy Weaver	MD, Oregon Office of Health Policy and Research. Submits example pages from website ( <b>EXHIBIT A</b> ). Explains what the Health Resources Commission does.
330	Weaver	Explains process for drug review.
365	Weaver	Shares how many evidence based reports have been done by the Health Resources Commission and how often reports are updated.
385	Weaver	Explains sub committees and who is a part of it.
400	Weaver	Refers to EXHIBIT A, page 2, which covers the types of drugs that have been reviewed and reports that were completed.
<b>TAPE 23, A</b>		
005	Chair Morrisette	Inquires if insurance companies in Oregon use the list.
007	Weaver	Answers that they have been doing a survey to discover this. Explains that it is more complicated for insurance companies because of rebates. Discusses knowledge of companies who use the list.
015	Chair Morrisette	Inquires regarding the commission's website and recommended drugs.
020	Weaver	Discusses competition to be on the preferred drug list and the creation of supplemental rebates.
025	Chair Morrisette	Discusses the need of information.
030	Weaver	Remarks that the knowledge of cost effectiveness and bulk purchasing provides leverage and competition.
032	Chair Morrisette	Comments that the program is in an infancy stage.
035	Weaver	Remarks that this is an exciting and busy program.
037	Chair Morrisette	Discusses the desire to understand how the program is progressing.
040	Weaver	Comments that they work together, but are a separate program.
043	Sen. Kruse	Inquires how additional classes are under review right now.

045	Weaver	Answers question.
050	Sen. Kruse	Inquires what would be done if they did not have sufficient data sets.
053	Weaver	Answers question. Describes procedure.
065	Sen. Kruse	Inquires regarding their plan to move into psycho tropics.
068	Weaver	Answers question. Remarks that this is an area that needs to be looked at carefully.
080	Sen. Kruse	Discusses and inquires how they would factor in items that are subjective.
090	Weaver	Responds and notes that drugs are often compared to placebo.
105	Sen. Kruse	Discusses effectiveness of drugs.
113	Weaver	Remarks that she would like to see studies where effectiveness and safety are both measured in.
120	Chair Morrisette	Clarifies Weaver's statement. Closes informational meeting on Evidence-based Process on Prescription Drugs and opens informational meeting on Oregon's Mental Health Medication Initiatives.

**OREGON'S MENTAL HEALTH MEDICATION INITIATIVES – INFORMATIONAL MEETING**

130	Dr. David Pollack	Psychiatrist. Medical Director, Office of Mental Health and Addiction Services. Gives PowerPoint presentation and submits the slides of presentation ( <b>EXHIBIT B</b> ).
175	Pollack	Continues PowerPoint presentation ( <b>EXHIBIT B</b> , page 2, slide 1).
220	Chair Morrisette	Asks for further clarification to understand the relation to Pollack's comments and SB 180.
230	Pollack	Answers that SB 180 addressing the concern of patients "doctor shopping."
240	Pollack	Continues PowerPoint presentation ( <b>EXHIBIT B</b> , page 4, slide 3).
265	Sen. Kruse	Inquires what would be a concern.
268	Pollack	Responds. Refers to next slide ( <b>EXHIBIT B</b> , page 5, slide 2).
310	Sen. Kruse	Comments on the Medicaid population using a large part of the drug budget and inquires if this will help with this.
315	Pollack	Discusses response. Continues PowerPoint presentation ( <b>EXHIBIT B</b> , page 5, slide 3) and explains graphs.
400	Pollack	Continues PowerPoint presentation ( <b>EXHIBIT B</b> , page 8, slide 3).
<b>TAPE 22, B</b>		
010	Pollack	Continues PowerPoint presentation ( <b>EXHIBIT B</b> , page 11, slide 3).
050	Chair Morrisette	Asks for clarification of who the prescribing provider is.
056	Pollack	Explains.
060	Chair Morrisette	Clarifies that Pollack is speaking of psychiatrists.
061	Pollack	Answers that he is talking about psychiatrists and psychiatric nurse practitioners for the most part.
062	Chair Morrisette	Refers to testimony in a previous hearing.
068	Pollack	Discusses concern of those who prescribe prescriptions having the right education. Discusses the departments efforts to assist in this.
080	Chair Morrisette	Discusses idea for assisting with the problem.
090	Pollack	Responds and comments that these issues are very connected. Discusses current efforts to help resolve the problem.
100	Pollack	Concludes PowerPoint presentation and testimony.
110	Chair Morrisette	Comments on the time limits to hear more information today.

123	Sen. Kruse	Discusses electronic prescription writing and costs associated with it.
145	Pollack	Responds to Sen. Kruse's comments. Discusses shortage of funds.
160	Sen. Kruse	Discusses changes happening in the system. Remarks that this needs to be explored.
170	Pollack	Comments that there are a lot of resources available today and agrees that they should be taken advantage of.
175	Sen. Kruse	Responds to Pollack.
185	Chair Morrisette	Closes informational meeting on Oregon's Mental Health Medication Initiatives and opens informational meeting on the Medicaid 340B Program.

### **THE MEDICAID 340B PROGRAM – INFORMATIONAL MEETING**

195	Shawna Kittridge	Consultant, Mercer Government Human Services Consulting. Licensed Pharmacist. Presents PowerPoint presentation. Submits presentation slides ( <b>EXHIBIT C</b> ).
267	Rick Berkobien	Committee Administrator. Inquires regarding the cost comparison.
280	Kittridge	Responds.
290	Kittridge	Continues PowerPoint Presentation ( <b>EXHIBIT C, page 6</b> ).
310	Chair Morrisette	Asks for clarification.
312	Kittridge	Answers clarification.
320	Kittridge	Continues PowerPoint Presentation ( <b>EXHIBIT C, page 7</b> ).
366	Chair Morrisette	Clarifies the number of pharmacies in Oregon participating in the program.
370	Kittridge	Responds. Comments on the need to verify the number.
375	Sen. Kruse	Clarifies if the safety net clinics are federally qualified.
376	Kittridge	Responds.
380	Sen. Kruse	Asks if rural health clinics are a part of it.
382	Kittridge	Responds.
385	Sen. Kruse	Inquires if there is a list of the clinics.
392	Kittridge	Answers that it is available on 340B website.
396	Sen. Kruse	Asks staff to obtain the list.
398	Kittridge	Continues PowerPoint presentation ( <b>EXHIBIT C, page 8</b> ).

### **TAPE 23, B**

003	Kittridge	Continues PowerPoint presentation ( <b>EXHIBIT C, page 9</b> ).
013	Chair Morrisette	Inquires regarding the states that participate currently.
016	Kittridge	Responds. Continues PowerPoint presentation with specific state examples ( <b>EXHIBIT C, page 10</b> ).
030	Sen. Kruse	Asks if there is equivalent savings to their current procedures.
033	Kittridge	Responds. Answers that Texas found 340B savings to be greater.
035	Sen. Kruse	Clarifies Kittridge's answers.
036	Kittridge	Responds.
038	Sen. Kruse	Discusses need to be careful in changing current procedure.
040	Chair Morrisette	Responds.
042	Kittridge	Continues PowerPoint presentation ( <b>EXHIBIT C, page 11</b> ).
050	Chair Morrisette	Inquires if a scenario by Kittridge would need a waiver.
053	Kittridge	Explains response.
059	Kittridge	Continues PowerPoint presentation ( <b>EXHIBIT C, page 12</b> ).
072	Sen. Kruse	Inquires if waivers are case by case.
078	Kittridge	Answers question.
081	Sen. Kruse	Inquires how specific waivers need to be.
090	Kittridge	Explains.
094	Kittridge	Continues PowerPoint presentation ( <b>EXHIBIT C, page 13</b> ).

125	Chair Morrisette	Inquires what would be entailed if Oregon mandated enrollment of healthcare providers.
136	Kittridge	Explains.
141	Chair Morrisette	Clarifies question.
152	Kittridge	Responds.
155	Sen. Kruse	Asks a question about Kittridge's comments.
163	Kittridge	Asks for clarification of Kruse's question.
164	Sen. Kruse	Re-states question.
173	Kittridge	Answers question.
175	Chair Morrisette	Inquires what qualifies a patient to become a client of the entity.
178	Kittridge	Answers question.
185	Berkobien	Inquires if programs in Oregon could potentially become 340B programs.
188	Kittridge	Responds.
190	Stephanie Davis	Mercer Government Human Services Consulting. Addresses question. Discusses reasons why people would not be participating in 340B entities.
206	Sen. Kruse	Remarks that small providers might not participate because it is not worth the effort.
209	Kittridge	Comments on the administrative burden related to getting set up. Continues PowerPoint presentation ( <b>EXHIBIT C, page 16</b> ).
258	Chair Morrisette	Asks who they are currently working with.
260	Davis	Answers they are working with the Oregon Health Policy Institute.
264	Chair Morrisette	Inquires if they have spent much time consulting in Oregon.
272	Davis	Explains. Refers to ongoing work with the benchmarking project.
283	Chair Morrisette	Inquires if they have addressed the bulk purchasing program of pharmaceuticals in Oregon.
285	Kittridge	Discusses efforts to obtain information on the state of Oregon.
298	Chair Morrisette	Asks if Kittridge is currently physically working in Oregon.
303	Davis	Remarks that one person came to Oregon today just for the meeting, but the others were already in the state.
308	Chair Morrisette	Inquires if they will be available later on to discuss things further.
310	Davis	Answers, yes.
311	Chair Morrisette	Comments on the need to obtain more information.
315	Sen. Kruse	Asks question about past experience.
317	Davis	Answers that there is a reconciliation that is ongoing.
326	Berkobien	Inquires if there are numbers available to show the potential savings.
332	Kittridge	Comments that these numbers are not currently available.
342	Chair Morrisette	Comments on appreciation of the testimony given. Ask Kruse if he has been involved in 340B in the past.
357	Sen. Kruse	Answers that this is his first exposure to 340B. Discusses experience.
373	Davis	Comments that many states are also learning about the basics of the Medicaid 340B program.
410	Chair Morrisette	Discusses testimony given at a previous hearing.
430	Sen. Kruse	Remarks that he is interested in the steps that New Mexico went through with hemophilia and the costs associated with it.
445	Chair Morrisette	Closes informational meeting on the Medicaid 340B Program. Adjourns meeting at 4:59 p.m.

**EXHIBIT SUMMARY**

- A. Prescription Drugs, Evidence-based Process On, website pages, Kathy Weaver, 14 pp**
- B. Oregon's Mental Health Medication Initiatives, PowerPoint presentation, David Pollack, 12 pp**
- C. Medicaid's 340B Program, Overview , PowerPoint presentation, Shawna Kittridge, 19 pp**