



December 28, 2021

Health Policy and Analytics Medicaid Waiver Renewal Team
Attn: Michelle Hatfield
500 Summer St. NE, E65
Salem, OR 97301

Dear Ms. Hatfield,

The Caring Ambassadors Program is a national, nonprofit advocacy organization based in Oregon City, Oregon. Caring Ambassadors has been empowering patients to be advocates for their health since 1997. Caring Ambassadors Program greatly appreciates the work you and state agencies are doing to reach the goals of the Oregon Health Authority, improve lifelong health, increase access to quality care and affordable care. Thank you for the opportunity to comment on the proposed 1115 Waiver.

Caring Ambassadors applaud the inclusion of expanded access to peer-delivered services. We have witnessed the vital services peers provide to people in recovery.

We respectfully ask that you withdraw the following aspects of the waiver.

Strategy 3: Increase predictability of costs and ensure value for spending through closer management of pharmacy costs by adopting commercial-style closed formularies and by excluding drugs with limited or inadequate evidence of clinical efficacy.

a) Adopt a commercial-style closed formulary approach

Drug formularies should encourage the proper use of resources while not restricting or adversely delaying medically necessary care. The Medicaid formulary should not be about treating populations but treating one person at a time. Delaying access to the most effective treatment for an individual can impact health status, quality of life, education, and employment. Such delay may also result in higher costs to the patient and the system if emergency care or hospitalization is needed, at odds with the cost savings intent. In addition, having a single drug per therapeutic class may cause non-medical switching. For patients with multiple comorbidities on multiple medications, this switching can be extremely harmful. For infectious diseases, like hepatitis C, hepatitis B or HIV, this can cause drug resistance. For patients with cancer, this can be deadly. Oregon's stated goal of "Protect member access, quality, and health equity" will not be reached if OHP members are limited in access to FDA-approved drugs and physicians' prescribing choice is taken out of their hands.

OHA would create a collaborative process that includes CCOs to select drugs for the closed formulary.

What would this collaborative process look entail? Will patient outcomes be considered? Will you include patients living with these conditions in the process? Closed formularies are not transparent nor equitable.

b) Allow exclusion of drugs with limited or inadequate evidence of clinical efficacy

New drugs approved under the FDA's accelerated approval pathway can be particularly costly and would be ideal for more rigorous evaluation of coverage and potential labeling as non-formulary where appropriate.

In 2013, the FDA granted Sovaldi Priority Review and Breakthrough Therapy designation for the treatment of hepatitis C. Since 2014, DAA's have CURED thousands of Oregonians. Yet in 2021, the P & T committee recent drug class review on Direct-Acting Antivirals for hepatitis C states, "There is insufficient direct evidence from randomized controlled trials (RCTs) that DAA therapy improves long term clinical outcomes". These FDA-approved drugs eliminate the virus in more than 90% of those studied. Patients are cured of the cancer-causing hepatitis C virus. **Would these drugs still not be available for people on OHP? If you move forward with this approach, what other breakthrough cures will be denied to people on the Oregon Health Plan?**

Our other area of concern is in *Section II. Waiver Authority*.

Restrict coverage for treatment services identified during Early and Periodic Screening, Diagnosis and Treatment (EPSDT) to those services that are consistent with the prioritized list of health services for individuals above age one.

Caring Ambassadors encourages OHA to remove the waiver authority. Oregon touts the passing of Senate Bill 558, also known as Cover All Kids. OHA has launched a campaign; OHP now covers me! However, you do not "Cover All Kids" if you continue this authority. This waiver authority is discriminatory against children with disabilities and their families that rely on the state for their health care.

Thank you for your time and consideration of our concerns regarding the application for renewal and amendment to the Oregon Health Plan 1115 Demonstration Waiver.

Sincerely,

A handwritten signature in cursive script, appearing to read "Lorren Sandt".

Lorren Sandt
Executive Director