



OSPA Legislative Update (5/6/15)

Today, a word from the professionals that are carrying our banner in the state legislature.

Should there be any question, I think it is obvious from the summary (below, attached, and on our website) that we are extremely fortunate to have their expertise during the session and throughout the year.

We still need your help! As noted last week, being 'present' is the first step.

Make your presence known:

Encourage others to join you in association membership. You and the other members of the state associations are paying for our lobbyists to be present. In their absence, our profession would be shaped at the whim of every payor, insurer or other health profession.

Donate to the PAC. Donating is as easy as clicking on this message. Legislative voting is based on hearing the concerns of those at the table. PAC donations, rightly or wrongly, is how you get a seat at the table. We can help shape the conversation, if our legislators know we are invested in their actions.

Mid-Session Report from the Capitol

By Bill Cross & Niki Terzieff, OSPA's Government Affairs Advocates



Since the April 10th deadline for a bill to be placed on an agenda for a vote - lest it does not move forward in the legislative session for this year - the Capitol has had a circus-like atmosphere. Lobbyists and legislators scrambling to ensure that their bills (of the nearly 3000 introduced this session) are kept alive. In the past two weeks, committees have been focused on moving through those lengthy lists of bills to consider and flying at a sometimes frightening pace.

The 21st of April brought about one of the major milestones in Oregon's Legislative process, one that is welcome by all: the Originating Chamber Deadline. This means, that all Senate bills

must have been debated and voted out of their committees (and House bills the same) in order to stay in play. With this deadline passed, 1,472 bills went to the second chamber. An astounding 1,137 bills died this week. Your advocacy team will continue to focus on your priorities as we enter the second-half of session and success seems somehow to be twice as consequential.

After a well-deserved deep breath on Friday of last week, legislators will now begin to shift to focus more to budget items and policies that were on the back-burner, in committees not beholden to deadlines. The largest and most contentious budget, the public education budget, has passed and the Ways & Means Sub-Committees have moved through agency budgets at a somewhat uncomfortable pace. There will likely be another flare up of revenue and budget activity as Legislators still grapple with ensuring the Kicker law won't "kick" and tax collections and expenditures are impactful and modest. With the recent Supreme Court decision nullifying much of the PERS reform legislated in 2013, the Legislature will need to calculate how to deal with those cost impacts down the road.

As these budget issues emerge, elected officials are already looking ahead to the next deadline coming up in June for the remaining policy work. Outside of the bills now moving along the path to passage in their subsequent chamber, the Joint Committee on Implementation of Measure 91, the measure that legalized recreation marijuana use beginning July 1, is on the cusp of passing its first bill of the entire session. Months in the making, changes to the medical system will soon be off the docket and the assignment of implementing adult-use marijuana to Oregon's statutes will begin.

A number of mandates confronting the business community have still yet to be resolved including: the minimum wage increases, paid sick leave, wage theft and liens against employer's property for wage claims, mandated predictive shifting and workers compensation costs. The Senate and House leadership are evaluating what might be politically palatable this session versus in 2016 or 2017.

To date, the 2015 legislative session continues to be unique in pace and manner. Through all of this, however, your advocacy team has been able to cut through the din and the confusion. We are pleased to report back on some of our early successes and what we are striving to push over the finish line in the final 75 days.

OSPA Legislative Agenda:

HB 2028: Establishes Provider Status for Pharmacists and Explains Clinical Pharmacy Services

Securing the passage of Clinical Pharmacy Services legislation is the top priority of OSPA this legislative session. HB 2028 establishes provider status for pharmacists, clarifies the provision of clinical pharmacy services (CPS) and allows payment for the same, and defines CPS as provided under clinical service agreements or under protocol from Oregon Health Authority. The bill just received unanimous support from the House and is now on its way to the Senate. Rep. Knute Buehler continues to work on a legislative concept to grant pharmacists the ability to provide self-administered hormonal contraceptives in addition to emergency contraceptives. This could up as an amendment to HB 2028 on the Senate side.

[\(Return to top of page\)](#)

SB 520: Lowers Age for Pharmacist Immunization Down to Age Seven

It proposed to lower the age for which pharmacists can administer immunizations from age 11 to age 7. Supported by OSPA and the Pharmacy Coalition, SB 520 passed in the Senate with a unanimous vote. Scheduled in the House Health Care Committee for a public hearing, it is anticipated that this bill to lower the age for which pharmacists can administer immunizations from age 11 to age 7 should receive House approval as well.

[\(Return to top of page\)](#)

SB 93: Establish Equal Rules for Dispensing of Chronic Medications

This bill would require PBMs to allow all pharmacies to fill prescriptions for chronic medications for 60 days, not only mail order or preferred networks. OSPA and OSHP offered an amendment to expand it to 90-day supplies which the members of the Senate Health Care Committee seemed to support. However, the committee chair Laurie Monnes Anderson moved the bill out of committee with a politically-driven amendment restricting the 90-day supply to generic prescriptions. The bill passed has passed the Senate and we will work to see if we can't secure more expansive access to level the playing field.

[\(Return to top of page\)](#)

SB 147: Regulation of Biosimilar Substitution

Introduced to regulate and, in essence, restrict substitution rules for biosimilars, SB 147 would have extended the requirement that pharmacists provide notification of substitution to patients and prescribing practitioner. Considered by OSPA to be unnecessary as regulations

already exist to regulation substitution, this bill would institute unneeded roadblocks. OSPA and a coalition of opponents were successfully able to keep the measure in Senate Health Care Committee.

[\(Return to top of page\)](#)

HB 2875: Enhancements to PBM Statute (2123) Passed in 2013

Introduced initially by the Pharmacy Coalition to serve as a vehicle to tighten implementation of the breakthrough PBM legislation passed with the support of the association in 2013 (HB2123). *OSPA/OSHP submitted amendments to provide enforcement teeth and improve the effectiveness of HB 2123. OSPA, NCPA and four pharmacists provided compelling testimony to highlight the failure of PBM's to follow the intent of the 2013 statute. However, the House Health Care Committee Chair stated that since portions of 2013 statute just went into effect this January 1, he would like to provide a little longer time for implementation.*

He has asked Vice Chair Rob Nosse to work with the stakeholders during the interim and to prepare recommendations for 2016.

[\(Return to top of page\)](#)

SB 841: Update of Medication Synchronization

SB 841 modifies requirements for health plan coverage of prescription drugs dispensed in accordance with synchronization policy, seeking to fully implement the 2014 legislation. It would require the Oregon Health Authority to implement synchronization policy for the dispensing of prescription drugs to medical assistance recipients who are not enrolled in a coordinated care organization. OSPA and OSHP are working with a coalition to secure passage of the bill. In spite of opposition from the health insurance industry, the bill was successfully moved from Senate Health Care Committee to Ways and Means.

[\(Return to top of page\)](#)

SB 148: Addition of a Technician Member to the Board of Pharmacy

As approved by the Senate, SB 148 adds two pharmacy technicians to the Board of Pharmacy, in spite of support voiced by OSPA/OSHP for an amendment that would have added one technician and one pharmacist to the Board. The House Health Care Committee has held a hearing on the bill which is expected to secure approval in the House later this month.

[\(Return to top of page\)](#)

SB 71 and 626: Increased Reporting Requirements to PDMP

Initially SB 71 would have required a 24 hour turn around on the time for pharmacies to report to PDMP, which was considered unworkable by OSPA leadership given current technology. Negotiations have modified this to a 72-hour window. OSPA and the Pharmacy Coalition have agreed to a neutral position on the bill with the amendments described. It has been passed in the Senate and is scheduled for hearing and possible work session later this month.

[\(Return to top of page\)](#)

Please feel free to contact us at any time if you have any questions by emailing Bill Cross at bill@wvcross.com or Niki Terzieff at niki@leadingedgepublicaffairs.com.

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