

Hello Madam Chair and Members of the Committee,

I am writing to talk to you about HB23-1130- regarding the practice of requiring a patient to try a series of less expensive drugs before insurance will cover the originally prescribed more expensive drug for psychiatric conditions. This is referred to as step-therapy.

My name is Susan Wagner, and I am a person in recovery from mental illness. I first noticed my struggle with Depression when I was thirty and had given birth to my son two years earlier. While trying to raise my son, I was subjected to step-therapy. I was more than willing and hopeful about getting on medication but soon became frustrated with the process. First, I tried a series of generic medications reacting to each one by becoming more depressed and suicidal. At times the suicidal thoughts were so bad, I had to be hospitalized. Because of my reaction to these medications my doctor wanted to try a different direction of mood stabilizers instead of anti-depressants. Since I had already gone the generic route with the anti-depressants, she thought I could go straight to a brand name medication with the least amount of side effects and highest efficacy. Again, she was overruled and forced to start me on the least expensive medicine. I consequently went through another regiment of step therapy protocol. The generic medication damaged my kidneys and I lost 50% of my kidney function. I gained weight, had elevated liver levels and remained unstable and suicidal. At this point it had been several years. I finally got to the point where I went off-formulary and found a medication with lower side-effects and one that controlled my symptoms. Yes, it was more expensive, but it worked. I have been stable since then and have not been hospitalized in over 15 years.

Surely, money could have been saved if we had used the medication that the doctor wanted to use once it was apparent that I was not tolerating the generic drugs. In this case, the high cost of hospitalizations in addition to all the medication costs.

Besides the physical and psychological damage this process did to me, it took many years away from my relationship with my son. We have worked hard to repair our relationship but still struggle with the difficulties in his childhood. I feel guilty. He feels lonely. I can't help but wonder how this could have gone

differently. It is time to put an end to this practice and let medication decisions be between a person and their doctor.

Thank you for listening.

Susan Wagner

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