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AB 236

This bill seeks to assist consumers in gaining much needed information regarding certain prescription drug programs.

We are all familiar with the reality that many Americans, especially seniors, frequently have to make the difficult choice between buying much needed medication or going without other important needs such as food and heat. The end result is that many people will take only half the prescribed dose to make it last longer, and many more simply stop taking the medication all together.

Americans spend more on prescription drugs than consumers in any other country, and those costs are increasing at an alarming rate.

Between 1996 and 2001 prescription drug expenditures increased by 111 percent, in contrast to a 12.8 percent increase in the cost of living. Even more alarming is the fact that prescription drug costs are expected to rise an additional 40-60 percent over this biennium. Expenditures for prescription ~~drugs now account for about 11 percent of personal health care expenses.~~

With more than one out of four Americans being without prescription drug coverage, prescription costs are paid out of pocket – or not all. More disturbing is that about half of our seniors have no prescription drug coverage at all.

The situation is not any better for Medicare recipients. ~~One out of three~~

~~Medicare enrollees is without prescription drug coverage and fewer than 25 percent have dependable private sector coverage. More than three-fifths of seniors have inadequate drug coverage. This translates to 45 percent of all~~
prescription drug costs of Medicare recipients being paid out of pocket.

Prescription drug access is not just a problem for the elderly or retired. Non-elderly adults enrolled in Medicaid and those who are uninsured have the most problems affording prescription drugs.

While states grapple with how to help individuals who do not have prescription drug coverage, there is one thing that states can do right now to help individuals in need: They can create a prescription drug help desk. ~~This help desk would do a few different things. First,~~ it would help individuals who cannot afford their prescription drugs by informing them of the free

pharmaceutical programs offered by the industry. Almost all pharmaceutical companies offer free pharmaceuticals for individuals who cannot afford them. The problem with these programs is that consumers have trouble learning about them. Some physicians do a very good job educating their patients and completing the forms for them. Others, however, do not. Most consumers never learn about these programs, ~~and if they did know they could obtain the help they need.~~ This program would create one-stop shopping and allow consumers to get the information they need about all available prescription drug programs.

As policy makers, you must not ignore the difficulties many non-elderly patients face in affording prescription drugs, especially those who are uninsured or enrolled in Medicaid. States must provide solutions that help those in need, and can do so without draining overstretched budgets. By passing AB 236, Nevada can follow the lead of other states. As of February of this year, at least three states have established or authorized some type of program to provide pharmaceutical coverage or assistance, ~~primarily to low-income elderly or persons with disabilities who do not qualify for Medicaid.~~

Maine has, for example, published a Prescription Drug Assistance Guide, a Prescription Drug Pricing survey, consumer buying tips, and has made free counseling and interpreters available as well as promoting state programs and other resources. Minnesota has a plan to create a state clearinghouse to help consumers navigate the complex path of rules and applications. ~~The~~ ^{which would link} ~~Minnesota clearinghouse also links~~ residents to free and discounted programs offered by manufacturers. And Kentucky has begun to offer consumer protection and education services.

By passing this bill, Nevada would be able to better assist its consumers in gaining information about prescription drug programs. The Office for Consumer Health Assistance would be able to help consumers find free, low cost and discounted medications.

The path of eligibility and availability can be difficult for consumers to navigate, as guidelines vary by manufacturer. With more and more people seeking help with the costs of prescription drugs, it is even more imperative for such information to be made more available. The resources are there, just largely unknown to the general public. AB 236 can help change this.