



July 2015

A newsletter from:

AfPA Health Policy Council

Physician Legislators Promoting Patient Access

www.allianceforpatientaccess.org



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WV SEN. TAKUBO SECURES ORAL PARITY FOR CANCER PATIENTS

West Virginia state senator Tom Takubo, MD, came to politics “by accident,” he explained. A next-door neighbor, who was also a state delegate, invited Sen. Takubo and his daughter to a State of the State address. The event was educational – and not only for the senator’s daughter. The experience led Sen Takubo to an important realization: The medical profession needed better representation in the state house.

Sen. Takubo now represents constituents from West Virginia’s 17th District, spearheading some of the state’s pivotal health policies. Most recently, Sen. Takubo sponsored a bill requiring oral parity, or insurance coverage for pill forms of anti-cancer medication that parallels the coverage provided for infusion chemotherapy. The bill passed, marking an important victory for patients in West Virginia.



Tom Takubo, MD

“With West Virginia being number two in smoking and number one in smoking-related disease in the country,” Sen. Takubo explained, “we have lots of lung disease in West Virginia.” Takubo noted that the rise of genetically targeted therapies allow medications to attack specific cancers more directly. Opting for oral anti-cancer medication can reduce toxic side effects for some patients, making it “far more effective” and “life-saving,” Takubo said.

The bill passed this session and goes into effect January 1, 2016.

In the meantime, Sen. Takubo is preparing legislation that offers alternative responses to nonviolent offenders convicted of a drug abuse crime. By offering monthly outpatient treatment with naloxene, Sen. Takubo says, the state could allow these offenders to continue working and supporting their families and avoid the cost of incarceration. Sen. Takubo plans to introduce the bill next session.

ABOUT AfPA'S HEALTH POLICY COUNCIL (HPC)

HPC serves as a physician led non-partisan forum to promote interstate communications between physicians serving in public office. HPC provides for a free exchange of ideas and best policies on issues impacting the practice of medicine. HPC members will join with AfPA's physician leadership to examine issues and promote policies that strengthen the physician-patient relationship while ensuring patient access to appropriate clinical care and approved therapies.

JOIN HPC TODAY

As a physician serving in elected office, you are invited to join the HPC. There are no membership dues, only a small investment of your time working with fellow physicians toward the promotion of health policies that strengthen the physician-patient relationship while ensuring patient access to appropriate clinical care and approved therapies.

To join or learn more about AfPA or the Health Policy Council, contact brafferty@allianceforpatientaccess.org or call (202)499-4114.



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HPC AND AFPA

The Health Policy Council (HPC) functions as a non-partisan policy forum and there are no dues or fees to join, nor are its members compensated. HPC is sponsored by the Alliance for Patient Access (AfPA), a physician led 501(c)(4) non-profit corporation. HPC programming is also supported by the Institute for Patient Access (IPA), a related 501(c)(3) non-profit organization. HPC is not a lobbying organization and its funding is derived from grants, donations, and sponsorships provided by both for-profit and non-profit entities. Visit AfPA's website at www.allianceforpatientaccess.org for more information.

CONGRATULATIONS ON 2015 LEGISLATIVE SUCCESSES

Congratulations to the following Health Policy Council members, whose bills were successfully passed by state legislatures and signed by the governor during the 2014-2015 session.

Sen. Irene Aguilar (CO)

- [SB 260](#): On oversight of medical marijuana caregivers

Rep. Richard Creagan (HI)

- [HB 467](#): Requires state birthing facilities to perform pulse oximetry tests. (Still awaiting governor's approval).

Rep. David Watkins (KY)

- [HB 377](#): Establishes collaborative agreement between pharmacist and practitioner with certain met provisions.

Del. Dan Morhaim (MD)

- [HB 490](#): Enables operations of Maryland's Medical Cannabis program
- [HB 1106](#): Promotes use of electronic advance directives
- [HB 1288](#): Places one year moratorium on sales of powdered alcohol

Sen. Ervin Yen (OK)

- Amendment to [HB 1965](#): Making texting while driving a primary offense.

Rep. Bryan Terry (TN)

- [HB 425](#): Facilitates access to free healthcare by allowing licensed health care members who are national guard members to provide healthcare services at a free clinic and allows armories to be used temporarily as site for a free clinic.
- [HB 440](#): Streamlines the credentialing process for new providers

Sen. Charles Schwertner (TX)

- [SB 425](#): Transparency in ERs about treatment costs.

Rep. Stuart Barlow (UT)

- [HB 148](#): Establishes a pilot program for a state employee health clinic

Rep. Edward Redd (UT)

- [HB 101](#): Reauthorizes the Rural Residency Training Program

Del. Christopher P. Stolle (VA)

- [SB 732](#): Expands access to investigational drugs for terminally ill patients

Del. Clarence Lam (MD)

- [HB 978](#): Facilitates HIV screening

Sen. Steiner Hayward (OR)

- [SB 440](#): Establishes a joint committee for quality metrics for both Medicaid and commercial insurers
- [SB 454](#): Statewide paid sick time policy
- [SB 523](#): Deals with the problem of the ACA-required 90 day grace period for non-payment of insurance premiums
- [SB 608](#): Establishes a Task Force on Palliative Care
- [SB 895](#): Requires schools to notify parents of school-wide immunization rates and clarifying applicability of new process for opting out of immunizations
- [HB 2546](#): Defines inhalant delivery system (e-cigarettes & more), prohibits sale to or use by people under age 18, adds them to Indoor Clean Air Act)
- [HB 3343](#): allows pharmacists to prescribe oral contraceptives & hormonal patches to women 18 & above, and subsequent prescriptions to women under 18 after they receive their first prescription from a primary care provider
- [HB 2879](#): requires insurers to pay for a full year of contraceptives at one time, so women don't have to return to the pharmacy for refills every month or three months.