

Chair Senator Laurie Monnes Anderson
Vice-Chair Senator Dennis Linthicum
Senate Committee on Health Care
Emailed to: shc.exhibits@oregonlegislature.gov

February 24, 2020

Dear Chair Monnes Anderson, Vice-Chair Linthicum, and members of the Senate Committee on Health Care,

My name is Tai Harden-Moore and I am living with stage 4 metastatic breast cancer. I ask that you support people like me who need access to all available treatment options by voting yes on HB 4102-A.

My journey with breast cancer began when I was diagnosed at age 31 with stage 3 inflammatory breast cancer. I fought through that treatment, which included 18 rounds of chemotherapy, a bilateral mastectomy and radiation, and was deemed “cancer-free” until cancer showed up again in November 2017.

While flying home from Florida, I became short of breath and fainted on the airplane. I followed up with my doctor who initially believed I had pneumonia. I rapidly began to lose my ability to breathe normally and within a few weeks I was using oxygen. After several rounds of antibiotics with no improvement, I pushed for two months to receive more testing including a lung biopsy. The biopsy discovered that I again had breast cancer which metastasized to my lungs. I was 37 years old and I was facing death. After speaking with my doctors, I learned of new advances in the treatment of metastatic breast cancer, a treatment that included medication that is combined with hormone therapy to stop estrogen from stimulating the growth of cancer cells. If I was going to have any shot at living, I needed that treatment. My doctors placed me in medically induced menopause in order to stop estrogen from stimulating the growth of my cancer cells and sought to start me on Ribociclib immediately. We were all excited about this treatment option and the possibility of it giving me a chance at life. Unfortunately, due to my age (37 at the time), my insurer denied me access to Ribociclib, reasoning that I was ineligible for the treatment because I was not in “true menopause”. My doctor’s office and I spoke to several insurance representatives and the answer was always the same, denied. I was told that because I was only 37, I couldn’t be in menopause and ribociclib is only available for those in menopause. Though my doctor explained several times that I was in “medical menopause”, I was still denied the treatment. I saw any opportunity I had to live slipping away - and slipping away fast! I called the appeals line again to plead my case. The representative told me the same things that I had been told before but this time I interrupted her and I told her how scary it was to be 37 years old and have an incurable, life threatening disease. I told her how afraid I was that I would not live

long enough to see my children go to high school let alone graduate. I told her how afraid I was that I would not live to see 40 years old. I told her I was afraid to die. I explained how all off my hopes for a future with my family hinged on me getting the proper treatment and getting it quickly. Fortunately, the representative listened to my pleas and authorized the use of ribociclib.

While I ultimately received the treatment that I sought, no one should have to endure what I did. No one should be denied lifesaving treatment because of pre-authorization policies that do not take in to account the unique needs of individuals. No one should have to suffer for weeks or months wondering if the treatment they need to live will be approved. It is imperative that Oregon provide protections to patients that ensure they receive the proper treatment without delay. For these reasons, I encourage you to vote yes on HB 4102-A.

Tai Harden-Moore
Newberg Resident