

Hello, Chair Sanchez and members of the committee: my name is Steve Elzie, and I have come before this body to testify regarding medication for mental health conditions. I'm 34 years old, and I'm from Beaverton, Oregon. I graduated law school at 25, and was diagnosed with bipolar disorder at 30. After a struggle and great personal cost, I'm working full-time as a practicing attorney.

I am fortunate that I was able to find medications early on that worked for me. I've taken them for three years, experiencing almost no symptoms during that time, which has helped facilitate my recovery. However, because I changed insurance coverage, the continuity of my medications has been threatened, and it isn't always easy to maintain.

I've had three different types of insurance carriers since my diagnosis, both through the Oregon Health Plan and subsequently with private insurance policies. The change in coverage resulted in my having to change providers. When I tried to get a prescription filled, the new insurer blocked me from purchasing it at my regular pharmacy. Instead, when I called the insurance company, they said the prescription would be sent by mail. Thus began a series of mistakes which resulted in many hours spent trying to refill the same medications that I'd taken for years.

The insurer contacted my previous doctor, even though I'd informed them of my current prescriber. Then, I was told my prescription was approved, but not ready, because they were waiting for an administrator to authorize the request. After again sending several requests to the wrong provider, and after I spent many hours on the phone attempting to get the medication I needed, the insurer finally told me I could pick up my medication at a different pharmacy.

At this point, I had gotten down to my very last dose of medication.

My backup plan had been to go to urgent care if I ran out of my prescriptions. But would this be covered by my insurance? And what would the cost be?

I know that there are many individuals for whom the foregoing tasks may have been daunting. Especially for someone with insecure housing, working longer and more stressful hours, facing an episode or mental health crisis, or any other number of issues. I know the risks of being without medication for even a day or two. Had I been unable to obtain my medication in time on account of the fractured mental health system, the progress I have made over the last three years could easily have become unraveled. I am hopeful that the Oregon State Legislature can take action to resolve these issues, and to ensure that no one with a mental health condition loses their access to treatment on account of a system that is frequently hostile to its own consumers.