

## Testimony before the Appropriations Committee

February 18, 2009

Good afternoon, distinguished Chairs and members of the Appropriations Committee. My name is Muriel Tomer and I live in Wallingford. I am here to plead with you not to subject mental health drugs to the state's PDL.

My son has tried literally every appropriate drug on the market for 15 years before he tried Abilify, a non-generic manufactured by Bristol-Myers Squibb. That drug saved his life on so many levels, that it would take hours to describe it to you. He has been on that drug for the last 7 years, and I *directly* attribute his being alive to him taking that particular drug.

If you subject mental health drugs to the PDL, then my son, and thousands like him, may not be able to take drugs with the highest efficacy rate, and may set these consumers back many treatment years, thereby wreaking havoc in their lives.

We all know that many mental health medications have serious side effects, such as profound weight gain, diabetes, tardive dyskinesia, memory and cognitive impairment, confusion, hallucinations, and suicidal thoughts. However, new drugs are being worked on all the time that have greatly reduced side effects, and some of these newer drugs are now in the marketplace. If you take these drugs away from consumers, then you may be putting both their mental and physical health at increased risk. Why? Because, they will be forced to take medications that may be outdated, have a more serious side effect profile, or may not be suitable for that individual's physical or mental health requirements.

If you allow the subjection of mental health drugs to the PDL, then you are, in effect, putting the consumer back to the Stone Age. What right does anyone have to set another back medically, and possibly increase his or her physical and mental health risks? This action will ultimately cost everyone more, because time will need to be taken to find the next best available drug on the list, consumers may begin to endure new physical and mental health issues, which often require additional medications, and, or hospitalizations, which are all more expensive – and not just on the monetary level. These consumers are an integral part of our society, they have families, and they are important contributors to the work force. These consumers are real people, they are not just representative of a cost or a number.

There is also one other population to be considered here – and that is the providers, treatment teams, and support personnel. If you mandate that consumers can only take a medication on the PDL, not the *best* drug for the consumer's needs, then you are also putting the entire treatment and support staff at increased risk of serious treatment disruption, having to spend a lot of additional time to then find the "next best" drug for the consumer, and setting back the entire system to the stone age regarding medication as treatment and medication management.

When are we going to be smart about this and let the requirements and needs of the consumer drive these decisions, instead of the almighty dollar driving everything? We didn't create this fiscal nightmare, and yet, as always seems to be the case, we will be the ones to suffer for it. Aren't you tired of seeing your constituencies pay for mistakes and bad management decisions made by individuals who are totally removed from our world? I know I am tired of it. Stop asking the vulnerable and the poor to "pick up the slack," as it were. We already have enough on our plate just to get halfway decent healthcare as it is. Make the people who made the bad decisions that led to this fiscal nightmare accountable and responsible – not us!

Just because my son has mental illness and cannot work to afford private health insurance coverage, he should not be punished because of his disabilities. If anything, he needs more support and access to high quality health care and treatment – just like many Americans already enjoy.

I view this action as a punitive one, and one that may have deadly consequences for our most vulnerable population. Please do not subject mental health drugs to the PDL. Making that decision will have profoundly negative effects on consumers as well as providers and loved ones who support individuals with a mental illness.

May I suggest that you ask the Pharmaceutical Companies to perhaps offer these newer drugs to the State of Connecticut at a greatly reduced price, so as to pull their weight regarding their own civic responsibility and accountability?

I ask you, why would anyone **not** want to have the latest medical breakthroughs available to our most vulnerable population, as well as everyone else?

Thank you for listening to my viewpoint.