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## Letters to the Editor

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## Letters to the Editor

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Dr. Nash,

I just finished reading your editorial in the most recent Office of Health Policy Newsletter. It is one of the most clear-headed calls to action that I have read on such a complex topic.

I have worked in the Medicare arena for over 20 years, the past six years as the head of the largest M+C health plan in Minnesota and now as the CEO of the Peer Review Organization in Minnesota, Stratis Health. I have testified to Congress about the inequity of the current Medicare reimbursement system that allows drugs to be covered in some markets, but not in efficient ones like Minnesota. Thank you for weighing in on this subject and for encouraging others to get involved as well. You should submit your editorial to The New York Times. It is very well written and you have made it easy to understand the issue.

**Patricia Riley, CEO**

*Stratis Health*

*Minneapolis, MN*

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Dr. Nash,

Your editorial in the Office of Health Policy Newsletter, "Drug Benefits in Medicare: Where Are We Headed?" was excellent.

**Oliver E. Owen, MD**

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Dr. Nash,

I read your June 2000 article, "Drug Benefits in Medicare : Wh e re are We Headed?" with great interest . As long as pharmaceutical companies continue to pour \$80 million into political campaigns each year, I won't be waiting for Congress to force them to:

- Change the rules that cur rently allow the first pharmaceutical company to develop a generic to be paid by the original patent holder and marketing a generic substitute;
- Change their domestic and international pricing structure; and
- Demonstrate through scientific evidence, improved performance of a new drug over existing drugs.

**John C. Greene**

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Dr. Nash,

I loved your editorial on Medicare prescription benefits. Clearly the cost of drugs is spiraling out of control and clearly the US consumer is subsidizing international consumers. It's a complex issue since the profitability of drug companies, their stock prices and many retirement funds are inter-linked, but the need for information that links cost and outcomes

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has never been greater. As consumers and their physicians make decisions about drug plans and drug choices, they need to understand if the regimen of choice is "worth it."

**Randy L. Thomas**  
*Eclipsys Corporation*

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