HB 759 **ORGANIZATION** bill analysis 5/5/2003 Wilson, et al.

SUBJECT: Providing transportation to the Texas-Mexico border to purchase medication

COMMITTEE: Border and International Affairs — favorable, without amendment

VOTE: 5 ayes — Chavez, Griggs, Canales, Castro, Merritt

0 nays

1 absent — Riddle

WITNESSES: For — Eric Glenn, Humana; (Registered but did not testify:) Ana Yanez-

Correa, LULAC-Texas

Against — David Gonzales, Texas Pharmacy Association

On — Laura Uribarri, Greater El Paso Chamber of Commerce

DIGEST: HB 759 would require the Texas Department on Aging to provide a low-cost

transportation service to assist elderly individuals and other Texas residents in traveling to Mexico to buy medications. The department would operate buses or other appropriate vehicles between various rural and urban parts of Texas and points in Mexico located near the border. The department would charge fees to cover the cost of the transportation service and could contract with a

commercial bus company to operate the service.

The bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect

September 1, 2003.

**SUPPORTERS** SAY:

HB 759 would offer elderly Texans relief from high drug prices in the United States by providing transportation to Mexico, where many of the same medications can be bought at a much lower cost. It especially would help elderly residents living on fixed incomes who struggle to afford a variety of

prescription and non-prescription drugs.

Because participants would pay their own bus fares, the bill would not create additional costs for the state. The state would not assume any liability for the

## HB 759 House Research Organization page 2

drugs because participants would take this responsibility by purchasing the medications themselves. The U.S. Customs Service allows personal prescriptions filled in Mexico to be brought into the United States as long as the purchaser can show a valid prescription.

Concerns about the quality of medications obtained in Mexico or their handling by Mexican pharmacists are unfounded because most medications sold in border pharmacies are identical to those distributed in the United States by the same companies. Mexican pharmacists are trained to safely handle and distribute these drugs. Each year, thousands of American citizens fill prescriptions in Mexico because of the dramatic difference in price, with no widespread evidence of adverse health effects. Some health plans provide prescription drug benefits for participants on both sides of the border, and many border physicians write prescriptions to be filled in either the United States or Mexico, an indication of the confidence in the quality of medications sold and distributed there.

HB 759 would establish a coordinated statewide program so that more Texans could take advantage of this opportunity to buy prescription and non-prescription medications at lower prices, a service that churches and other groups in the state already offer to elderly residents.

OPPONENTS SAY: HB 759 would encourage elderly Texans to risk buying medications from pharmacists that were not subject to U.S. licensing standards and other requirements. Many people have found out the hard way about the disadvantages of purchasing medications in Mexico when they experienced adverse health effects as a result of taking counterfeit drugs or using dirty needles purchased in Mexico. Texas residents who purchase medications in Mexico usually do not receive sufficient guidance about drug interactions or how drugs and food work together. The state should not encourage these outcomes by sponsoring transportation to Mexico specifically to buy medications.

Those using this state-sponsored, low-cost transportation service could take improper advantage by visiting border communities to shop for other items or to visit relatives. Other forms of transportation are already available to get to

## HB 759 House Research Organization page 3

the border, and there is no compelling reason for the state to provide this service when privately owned service is available.