Oregon Prescription Drug Affordability Board

Patient, Caregiver, and Advocacy Group Survey Feedback

Purpose and privacy note: This document presents substantive feedback submitted through the 2026 patient, caregiver, and advocacy group survey for prescription drugs under review. Personally identifying and administrative information has been excluded, including respondent names, email addresses, timestamps, survey IDs, and demographic fields. Any apparent email address or telephone number found within narrative comments have also been removed. Responses are presented as submitted, with only minor spacing cleanup. The views expressed are those of individual respondents and have not been independently verified by PDAB.

Skyrizi (risankizumab-rzaa)

Are you completing this form as:	A patient
Is the medication currently being taken?	Yes
How long has (or was) this medication taken?	More than 3 years
How often do you take this medication?	Monthly
Do you have health insurance that covers this medication?	Yes
What is your typical out-of-pocket cost for a 30-day supply?	More than $250
Has your out-of-pocket cost for this medication increased in the past 12 months?	No
If costs increased from last year, how significant was the increase?	More than $100
How clear is the information you received about the cost of your medication?	Somewhat clear
Have you ever delayed filling a prescription for this medication due to cost?	No
Have you ever skipped doses or taken less than prescribed due to cost?	No

Have you ever stopped taking this medication due to cost?	No
Have you had difficulty obtaining this medication due to insurance requirements (e.g., prior authorization, step therapy)?	No
Have you experienced any of the following barriers? Select all that apply	None of the above
How much of a financial burden is paying for this medication?	Moderate burden
Have you had to cut back on other essential expenses (e.g., food, housing, utilities) to afford this medication?	No
Do you use manufacturer coupons, discount cards, or patient assistance programs to afford this medication?	Yes
Primary insurance type	Medicare
Has your insurance ever denied coverage for this medication?	No
Has your insurance required you to switch to a different medication for cost reasons?	No
Has your copay or coinsurance for this medication changed in the past year?	Increased
Has difficulty affording this medication negatively affected your health?	Yes
Have you visited an emergency room or urgent care because you could not access this medication?	No
Is there anything else you would like PDAB to know about how medication costs or access affects you?	Medicare drug plans give poorly constructed online data about this product
If you could change one thing about how this prescription drug is priced or accessed in Oregon, what would it be?	I could not afford this drugs without the cap of $2000 co-pay otherwise it would cost $17K per year

Do you currently receive prescription medications in Oregon?	Yes