



**Testimony of
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House Health and Aging Committee**

Chairwoman Gonzales, Vice Chair Huffman, Ranking Minority Member Antonio, and members of the House Health and Aging Committee, on behalf of the Ohio Association of Health Plans (OAHP), thank you for the opportunity to testify before you today on House Bill 505 (HB 505), legislation that authorizes substitution of an interchangeable biological product for a prescribed biological product under circumstances and conditions similar to those of current Ohio law governing substitution of a generically equivalent drug for a prescribed drug. I am Miranda Motter, President and CEO of OAHP.

OAHP is the leading state trade association representing the health insurance industry. OAHP members provide health benefits to more than 9 million Ohioans through employer-sponsored coverage, the individual insurance market, and public programs such as Medicare, Medicaid and the Health Insurance Exchange marketplace. Our members offer a broad range of health insurance products in the commercial marketplace and are committed partners in public programs.

The emergence of biosimilar medications has increased interest in updating state laws in order to acknowledge biosimilar medication and allow for pharmacist substitution of interchangeable biologics. OAHP supports legislation that acknowledges biosimilar medication and allows the FDA approved substitution of biologic medications.

The industry, however, opposes unnecessary burdensome requirements being added to such legislation that impede the dispensing of biosimilar or interchangeable biologic medications. To that end, OAHP believes that legislation addressing this issue must conform to the following principles:

- ***Ohio law should be updated to acknowledge biosimilar dispensing and the substitution of interchangeable biologics as approved by the FDA.*** Ohio law should conform to the FDA definitions of biologics and interchangeable biologics to ensure consistency and reduce confusion in the dispensing of biologic medications.
- ***Ohio law should not include administrative or operational barriers to the dispensing of biosimilar or interchangeable biologics.*** Any dispensing or prescriber notification

requirements should not disrupt the physician or pharmacist workflow to dispense biologic medications as appropriate to patients.

As currently drafted, House Bill 505 would appear to comport with OAHP's established position – with one exception. As currently drafted, HB 505 gives the Ohio Pharmacy Board unfettered discretion in promulgating rules that are inconsistent with FDA standards with no clear criteria or standards (See Sec. 3715.011). As a result, the language in Division (B) could lead to an Ohio substitution law that is misaligned with the national FDA standards.

OAHP understands that this language is the result of a constitutional issue the Legislation Service Commission (LSC) has raised about Ohio ceding their authority to a federal regulator. However, there are numerous examples in Ohio's code where the state relies on national law, regulations, and expertise to ensure a consistent standard on various issues. This is particularly prevalent in the areas of transportation, education, food and labeling, and environmental protection. Again, this is not a new concept and there is a solution when a situation arises where a national expertise on complicated, complex issues is necessary to ensure consistent law, implementation and enforcement.

In recognition of this LSC issue and to ensure that Ohio continues to align with national standards on the highly technical and complicated issue of biologics, OAHP has recommended language that would require the Ohio Pharmacy Board to first obtain approval from the Ohio General Assembly via a statutory codification for any rules that would conflict with the interchangeability standards set forth by the Food and Drug Administration

We believe this language will address the LSC issue and protect Ohioans from having an Ohio Pharmacy Board that diverts from the national standards.

On behalf of OAHP, I urge you to thoughtfully consider this amendment and I am happy to answer any questions you might have.