



February 10, 2016

The Honorable Anne Gonzales  
Chair of the Ohio House Health Committee  
Ohio House of Representatives  
77 S. High Street  
Columbus, OH 43215

Dear Chairwomen Gonzales,

On behalf of the Ohio Association of Health Plans (OAHP), I would like to thank you for the opportunity to provide written comments on House Bill 285 (HB 285), legislation that authorizes pharmacists to dispense multiple refills of a prescription simultaneously under certain conditions.

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 and Medicaid. OAHP's core mission is to promote and advocate for quality health care and access to a variety of affordable health insurance benefits for all consumers in Ohio.

OAHP member plans are becoming more and more concerned with respect to access and affordability of health care coverage for Ohioans. Health plans continue to innovate with ongoing efforts in Ohio and across the country that are transforming the health care delivery system, providing integrated care with collaborative provider partnerships, and providing tools and data to help consumers make informed health care decisions. Over the past thirty plus years, the health insurance industry has incrementally transformed from a payer of health insurance claims to an active participant working with health care providers to improve the quality of health care in a cost-effective manner. Innovation and continued transformation is not an option anymore for our industry. Today, it is expected. Purchasers of health insurance coverage – from employers, individuals and states – are all demanding it. And, Ohio has been at the forefront in terms of setting health care policy that insists on *improved quality of health care in a cost-effective manner*.

It is through these lenses of expectation, innovation and affordability that OAHP member plans review policy measures that impact health care coverage cost and quality.

It is largely undisputed that prescription drugs costs are rising at an unsustainable rate. The release of several new, astonishingly expensive, specialty medications and overnight, dramatic increases to generic drugs that have been on the market for years have renewed public policy discussions over prescription drug pricing. Policy makers, along with health plans and many others in the health care delivery system, are looking for ways to ensure access to and affordability of prescription drugs.

To that end, it is important to determine how HB 285 will impact the cost of prescription drugs for Ohio's health care consumers. OAHP is concerned that the bill, as currently drafted, will not achieve the stated goals of driving down health care costs and would respectfully request that this Committee consider the following issues as it deliberates on HB 285.

**HB 285 has very broad application.** As currently drafted, HB 285 would permit a pharmacist to dispense 90 days of any prescription drug, as long as that drug is not a controlled substance. OAHP believes further guardrails are needed relative to the types of prescription drugs that would be eligible for a 90 day fill and the types of situations where the pharmacists may dispense 90-days-worth of prescription drugs. OAHP respectfully requests that the following guardrails be considered and ultimately adopted:

- The bill should be limited to only those drug that are prescribed for chronic conditions;
- The bill should be limited to only those drugs that have been prescribed as maintenance drugs;
- The bill should be limited to only those drugs where the patient has been stable on the prescribed drug for at least 6 months;
- The bill should be limited to allowing a pharmacist to fill or refill the 90 day quantity only when such dispensing is consistent with FDA prescribing guidelines; and
- The bill should not apply to specialty drugs.

**HB 285 will have unintended consequences.** As currently drafted, HB 285 will likely result in a series of unintended consequences, which include:

- **Potential for Increased Waste and Safety Risks.** As currently drafted, HB 285 could lead to increased waste if, after receiving a 90 day supply of prescription drugs, the patient changes medications or no longer tolerates the drug regimen. Additionally, there are safety risks that must be considered when patients have additional supplies of prescription drugs on hand.
- **Benefit and Eligibility Changes.** There may be situations where a patient's health care benefit is going to change or terminate and the patient, knowing of the change or termination, attempts to obtain a 90 day fill for a drug that will not be covered after the first 30 day fill. In this situation, a health plan might have to pay for a drug that is not ultimately covered. Additionally, what happens when a patient's eligibility changes after the date where the member receives a 90-day prescription? This question is particularly relevant in the Medicaid program, where eligibility is fluid. Here, a Medicaid recipient could obtain a full 90 day

fill of a prescription drug one month and then the next month that person determined ineligible for Medicaid coverage.

- **Unknown Costs to the Patient Due to Benefit Designs.** There may be unintended costs impacts for the health care consumer. Benefit designs, under the terms of the coverage, may limit prescription drug refills at one point in time to a maximum of 30 or 60 days. If a pharmacist were to provide a 90-day supply, the patient would be responsible for paying the full cost of extra days. In addition, for the patient, the prescription drug supply dispensed by the pharmacist may be more expensive under their plan than if they were to receive that prescription drug supply via mail order. In those situations, it would be important to ensure that the patient fully understands any additional costs that may be incurred if the pharmacist dispenses the prescription drug per the provisions of HB 285 versus the potential cost savings for the patient if that same drug was received via mail order.

On behalf of OAHP member plans, thank you for the opportunity to share our concerns relative to HB 285. With prescription drug costs representing a significant portion of overall health spending, OAHP member plans are particularly interested in any legislation that could ultimately result in increases for prescription drugs for patients. To that end, OAHP respectfully requests that this Committee consider the issues relative to HB 285 that are outlined in this letter and then ultimately consider ways to address these areas of concern.

Sincerely,

A handwritten signature in black ink that reads "Miranda C. Motter". The signature is written in a cursive, flowing style.

Miranda C. Motter  
President and CEO