



April 11, 2018

The Honorable Thomas Brinkman, Chair  
House Insurance Committee  
Ohio House of Representatives  
77 South High Street, 12th Floor  
Columbus, Ohio 43215

Dear Chairman Brinkman,

On behalf of the Ohio Association of Health Plans (OAHP), thank you for the opportunity to offer comments on House Bill 156, legislation imposing limitations on vision care services.

The Ohio Association of Health Plans (OAHP) is the state's leading trade association representing the health insurance industry. OAHP's member plans 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 Federal Insurance Marketplace. Our members offer a broad range of health insurance products to Ohioans in the commercial marketplace and are committed partners in public programs.

I write today to inform the Committee that OAHP is currently reviewing the details of the substitute version of the bill that was slated for possible adoption today.

While we understand and recognize the improvements that were made to the substitute version of the bill, OAHP continues to have concerns to the extent

The substitute version of the bill burdens Ohio consumers with higher costs for vision care services that are crucial to the overall health of Ohio's businesses and families OAHP continues to have concerns.

Additionally, in testimony provided to this Committee in October and January, OAHP outlined how important price, value and discounts are to purchasers of vision insurance.

To that end, OAHP would like to reiterate concerns previously identified with this policy measures and to the extent the substitute version of the bill does not resolve those issue, OAHP would express its continued concern.

- **HB 156 may Ohio consumers by removing a valuable benefit to them** - an agreed upon price or discount for non-covered services. If plans and providers are prohibited – directly or indirectly - from entering into contractual arrangements that extend to vision consumers discounts for services that are not covered under their vision plans, **consumers will face higher health care costs through uncertain out of pocket obligations** – as they will now be required to pay the provider’s full billed charges without the benefit of the fee negotiated on their behalf by their vision plan.
- **HB 156 may erode important quality and cost provider networks** benefits for Ohio consumers - by removing any incentives for consumers to use network providers for non-covered services and limiting the ability of vision plans to develop and maintain their own network of labs as a way of ensuring quality of materials and lowering costs for the enrollees.
- The Ohio General Assembly should not accept provisions that **interfere with the right to contract as it places the state right in the middle of the legal relationship between two private parties**. A state should not be involved in proscribing contract terms between vision providers and health plans and private parties should be able to negotiate an agreement that is in the interest of both parties.

To that end, OAHP respectfully urges you to thoughtfully consider the impact that this bill will have on Ohio’s health care consumers. **As Ohio families struggle to obtain affordable health care, any legislation that places a heftier financial burden on them for their health care, including their vision care, needs to be reconsidered.**

OAHP respectfully reserves the opportunity to present additional testimony in future hearings or discussions on this bill.

Thank you for the opportunity to comment on this bill. As always, The Ohio Association of Health Plans and its member plans stand ready to work with state policymakers to achieve the shared goal of quality healthcare for all Ohioans.

Sincerely,

Miranda C. Motter  
President and CEO  
Ohio Association of Health Plans