

**President**

Grace C. Wright, MD, PhD, FACR

**Vice President and  
Advocacy Co-chair**

Gwenesta B. Melton, MD, FACR

**Director and Advocacy  
Co-chair**

Stephanie Ott, MD, FACR

**OHIO LOCAL CHAPTER  
LEADERS**

Stephanie Ott MD, FACR

Cassandra Calabrese, MD

Elisabeth S. Roter, MD

Liza Varghese, MD

**Proponent Written Testimony to the Ohio House Health Committee  
House Bill 418 – Non-Medical Switching  
Hearing: January 28, 2020**

Dear Chair Lipps and House Health Committee Members:

The Association of Women in Rheumatology (AWIR) promotes the science and practice of Rheumatology, fosters the advancement and education of women in rheumatology, and advocates for access to the highest quality health care and management of patients with Rheumatic diseases. While there are no cures for Rheumatic diseases, medical research breakthroughs have led to treatments and therapies that can dramatically improve the quality of life for those living with rheumatic diseases.

AWIR has a Local Chapter in Ohio comprised of providers of rheumatology from across the state.

The intent of HB418's language is solely to protect stable patients during the course of a plan year when the patient is locked into their health plan.

Simply put, non-medical switching occurs when a stable patient is forced to switch from the medication they are stable on for reasons other than medical ones. This can happen via a variety of scenarios, for example: when a drug is removed from a formulary, a drug is moved to a more restrictive formulary tier, or some other prevailing means is used to increase a patient's out of pocket costs for a drug.

The patient populations we serve are particularly vulnerable to changes in medication treatment. Disruptions in prescribed treatments which have been effective in treating a patient's condition can have both short and long-term effects resulting in increased health care costs, hospitalizations, and a host of other potential complications.

HB 418 would protect stable patient from non-medical switching by preventing a health plan and Medicaid from making certain modifications of coverage for a drug during the course of a plan year.

AWIR implores you to improve patient access to treatments by supporting provisions within HB 418 to reform unfair non-medical switching practices. We would like to thank Chair Lipps and the members of the committee in advance for your time and consideration of our input.

Sincerely,



Grace C. Wright, MD  
President, AWIR

