

To: Ohio House Finance Subcommittee on Health and Human Services

Fr: Monica Hueckel, Senior Director of Government Relations, Ohio State Medical Association  
Joe Rosato, Director of Government Relations, Ohio State Medical Association

Da: April 11, 2019

Re: HB 166, Main Operating Budget FY 2020- FY 2021

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On behalf of the 16,000 physician, resident and medical student members of the Ohio State Medical Association (OSMA), we write to express our appreciation for the following major health care-related provisions in the introduced version of the state operating budget for FY 2020-2021.

The initial budget bill has many components which the OSMA believes represent a positive step forward for Ohio's physicians and for patient care, including language which would require coverage of telemedicine services to be on par with services performed in-office. Telemedicine, also called telehealth, is allowing physician offices and health systems to innovate in health care delivery and permit vulnerable and needy patient populations to access care they otherwise would not be able to obtain. We can only truly understand the full potential of telemedicine in helping Ohioans access care for issues like mental health conditions, chronic diseases, and drug addiction if insurers provide coverage for care delivery via telemedicine.

Ohio is currently behind 35 other states in the U.S. which have already enacted laws providing for coverage and/or payment parity for telemedicine, and the OSMA has made telemedicine coverage a key priority for several years now on behalf of our physician members and their patients. We are so encouraged by the administration's commitment to telemedicine coverage in this initial budget proposal.

Additionally, the OSMA supports the funding for the current Ohio Physician Loan Repayment Program and the Substance Use Disorder Professional Loan Repayment program. These programs are a valuable tool to incentivize participants who renew commitment to practicing in underserved areas of the state and to providing medication-assisted treatment for addiction, thus helping to expand the drug treatment workforce.

Other portions of the budget bill provide support to the physician community and to medical education, such as:

- Continued funding, at the previous levels, for graduate medical education (GME), medical education, clinical teaching, primary care residencies, and long-term care research to ensure Ohio's supply of well-trained medical professionals.
- Changes to physician CME requirements to remove the 60 hour category II requirement, and to increase by 10 hours the requirement for category I.

Furthermore, HB 166 proposes the creation of the Chancellor's Task Force on Physician, Nursing, and Allied Health Care Work Force, with a goal of finding ways to train and retain health care workers in key shortage areas. The task force will include representatives from medical schools, the state medical board, hospital administrators, physician and nursing organizations, and other allied health professionals. We believe this effort has great potential for helping Ohio to determine the best ways to meet Ohio's health care needs safely and efficiently.

We also appreciate and are encouraged by numerous commitments to public health, and in particular, children's health, in HB 166, such as:

- An expansion of the current Ohio Comprehensive Primary Care (CPC) Program to include investments in pediatric care.
- Language that requests a waiver be submitted to the Centers for Medicare and Medicaid Services (CMS) to allow pregnant women on Medicaid to have 12 months of continuous coverage following the birth of a child. Current Ohio law only requires coverage for 6 weeks post-delivery.
- Provisions that would prohibit anyone under the age of 21 from purchasing tobacco or other tobacco products, such as vape pens. Although we support efforts to strengthen this language.
- Efforts to increase community access to naloxone by providing some funding for Project DAWN sites across all 88 counties in Ohio.
- Initiatives to provide consumers with education and resources in order to better understand coverage for mental health and addiction services.
- Efforts to streamline the prescribing and prior authorization process for patients in the Medicaid program by creating a preferred drug list. We look forward to working with the Department of Medicaid on the specific implementation of this policy and ensuring a robust drug formulary for Medicaid recipients.

Overall, the OSMA is highly supportive of many of the provisions in the current budget bill that provide investments toward making Ohio healthier and better enabling physicians in our state to provide patients in need with high quality care. We are hopeful that these provisions will remain in the bill as the budget moves through the legislative process.

We appreciate your attention to this letter and the opportunity to comment on the budget proposal. Should you care to discuss these matters further, please feel free to contact us.