

Cheryl Volk  
Columbia Station, OH  
Testimony in Support of HB72  
House Health Committee  
March 22, 2017

Chairman Huffman, Vice Chair Gavarone, Ranking Minority Member Antonio and Members of the Committee, thank you for the opportunity to testify in support of House Bill 72.

My name is Cheryl Volk and I live in Columbia Station, Lorain County. House Bill 72 is legislation that will help curb the practice of step therapy which I have recently been forced through by my insurance company.

I have been living with Psoriasis since being diagnosed at age 17. I'm now 55, and over the years I have tried almost every possible treatment to manage my symptoms, including light therapy and a variety of creams and ointments. The light treatment worked in masking some of the symptoms for 12 months, but didn't eliminate them and many of the topical applications actually caused the symptoms to worsen due to allergic reaction.

For most of my lifetime, I never wore shorts or sleeveless tops and dresses. I was the one attending summertime picnics or other hot-weather outdoor activities, wearing jeans and a long-sleeved shirt. I was willing to put up with the discomfort of not being able to wear summer clothes because of my severe skin outbreaks.

About 2 years ago, while working at St. John's Medical Center, I met a doctor in the ICU who told me about a new treatment that might work for me. The doctor prescribed me a new oral medication and gave me sample packs to start treatment while awaiting a decision from my insurance to cover the cost of the prescription.

While on the sample medication, my symptoms completely cleared within 3 weeks. This medication changed everything for me. That summer, for the first time in decades, my symptoms cleared up so much that I was comfortable enough to wear shorts. For the first time from my diagnosis, I felt confident, physically and mentally felt better and my family was so happy for me---Psoriasis no longer made me feel like I had to cover up.

Despite all this, my insurer denied the prescription and told me I have to fail on a biologic medication before the new medication would be covered. My doctor personally talked with the medical director of the insurance company and they **still** denied to cover the medication that made me well. My doctor continued to keep me on the sample packs.

The potential impact that the biologics can have on my immune system is too big of a risk to take. I currently work in the ICU and when I was a teenager, I had a spinal fusion---both of which could put me at risk for negative impact to my immune system that a biologic medication can cause. Eventually, I did try a biologic, in hopes that by failing on that medication, I could obtain the prescription my physician wants me to have. Ultimately, I experienced bad bruising and an inflammation of my symptoms. We knew the medicine would not work, but I had to take it and fail first.

My doctor and I now know what works for me, given my medical history, and the work I do helping other patients in ICU. As a patient, it's so frustrating to know that there was a medicine for treating my symptoms, but it was not available to me because insurance companies did not want to cover the costs.

As a healthcare professional, I feel that it's wrong that insurers are denying medications that truly can change people's lives. Doctors and their staffs are the one with the knowledge to prescribe what's right for patients.

Thank you for allowing me to tell you my story. Please support House Bill 72. I would be happy to answer any questions.