



Ohio
Bleeding Disorders
Council

Ohio Bleeding Disorders Council
Written Testimony in Support of SB56
Lisa Raterman, Chair
March 7, 2017

Senate Health, Human Services and Medicaid Committee

The Ohio Bleeding Disorders Council works to ensure and enhance the quality and accessibility of comprehensive care and services for children and adults with hemophilia and related bleeding disorders through information sharing, public education and advocacy.

On behalf of the Ohio Bleeding Disorders Council, I write in strong support of Senate Bill 56. SB56, sponsored by Senators Lehner and Tavares, is a balanced and common-sense approach to improve the step therapy process in Ohio.

Step therapy, also known as “fail-first,” is a tool insurers use to limit how much they spend covering patients’ medications. Under step therapy, a patient must try one or more drugs chosen by their insurer before coverage is granted for the drug prescribed by the patient’s health care provider.

Hemophilia is a genetic bleeding disorder that prevents the blood from clotting properly. The main symptoms are uncontrolled, often spontaneous bleeding, internal bleeding into the joints that can result in pain, swelling, and, if left untreated, can cause permanent damage. Hemophilia affects about 20,000 people in the US and 1,350 Ohioans. Hemophilia patients require life-long infusions of expensive clotting factor therapies that replace missing or deficient blood proteins, thus preventing debilitating and life-threatening internal bleeding.

Recently, an Ohio insurer issued a new drug policy for its commercial market as it relates to factor products to treat hemophilia. The step therapy protocol requires a patient to fail or show hypersensitivity to **three** recombinant factor products before they will cover a certain factor product. The products in the “require to fail” category are all the same class of recombinant factor. The insurer defines “fail” as continuation of spontaneous bleeds and inability to achieve appropriate trough levels.

Step therapy is a one-size-fits-all policy and for physicians and patients it can be a barrier to getting the right care at the right time.

SB56 does not prohibit insurers from using step therapy but seeks to balance cost containment with patient needs. SB56 protects patients by ensuring that step therapy programs are based on clinical guidelines developed by independent experts and that the exceptions process for step therapy is transparent and accessible to patients and health care providers.

We respectfully ask for your support of SB56.