**Beth Liston MD PhD**

*State Representative*

**Testimony to House Health Committee**

House Bill 387 <> February 13th, 2020

Beth Liston, MD PhD

Chairman Lipps, Vice-Chair Manning, Ranking member Boyd, and members of the Health Committee, thank you for allowing me to provide sponsor testimony on House Bill 387. The most commonly used forms of insulin cost 10 times more in the United States than in any other developed country. Drug pricing is complex and will require significant efforts to create transparency at the state and federal level. However, people are dying without insulin – we can’t wait years before we act. This bill makes sure that while we investigate the system – whether it is through the AGs office, or through other bills members have put forth regarding pharmacy benefit managers, people can get insulin. The high prevalence of diabetes, the chronic lifelong nature of the disease, and the fact that patients with type 1 diabetes will die without access to insulin make this an urgent problem. In addition, the long-term problems from poorly treated cases of diabetes have significant impacts on health care costs as a whole. Every shift I work in the hospital, I take care of individuals with these complications – it is a huge component of both the human and the financial suffering we see in healthcare.

House Bill 387 is very straightforward. It prohibits a health plan issuer from imposing cost-sharing on an insulin drug in an amount that exceeds $100 for a 30-day supply. A typical vial of insulin might cost $250 at list price, and most people need more than a single vial for a 30-day supply. Many will require four vials. This, plus the cost of supplies and blood sugar monitoring lead to incredible expenses for those with diabetes.

Who does House Bill 387 help? Largely it helps those with health insurance who have high deductible plans or high co-insurance. These are middle income families who are working and have insurance but are harmed by the complicated system of rebates and negotiations so that they are paying the list price that keeps rising. Diabetes support groups across the state gear up for January, when everyone’s deductibles reset – and people know they need to spend thousands of dollars out of pocket, in addition to their premiums, in order to get a medicine that is as critical as air or water for their survival.

There are three manufacturers of insulin products. They have shared with me that they have patient assistance programs that will offer insulin to those without insurance at a price equal to or less than $100 a month. We should not penalize families that are doing everything right but are caught within this complex pricing scheme including manufacturers, wholesalers, pharmacy benefit managers, health plans, pharmacies with rebates and negotiations at every step. This is becoming a national issue and conversation. This measure has passed in Colorado and Illinois. We need to make sure the hundreds of thousands of Ohioans caught in the middle of this can get insulin. I urge support of this bill.