

### 47th House District

Portions of Butler County, including  
Hamilton and Fairfield, Ross  
Township and portions of Fairfield,  
Hanover and St. Clair townships

### Columbus Office

Vern Riffe Center  
77 S. High Street, 11th Floor  
Columbus, Ohio 43215-6111  
(614) 644-6721  
(800) 282-0253  
(614) 719-0000 (Fax)  
[Rep47@ohiohouse.gov](mailto:Rep47@ohiohouse.gov)  
[www.ohiohouse.gov](http://www.ohiohouse.gov)



**Sara P. Carruthers**  
Ohio State Representative

### Committees

- Finance-
- Finance Subcommittee on Health & Human Services-
- Transportation-
- Behavioral Health- Homeland Security-

### Commissions/Councils/Boards

- Early Childhood Advisory Council-
- Ohio Children's Trust Fund-
- Ohio Arts Council-
- Ohio Holocaust & Genocide Memorial & Education Commission-

## **House Bill 291 Sponsor Testimony** **House Insurance Committee** **November 1<sup>st</sup>, 2023**

Chairman Lampton, Vice Chairman Barhorst, Ranking Member Miranda and members of the House Insurance Committee, thank you for the opportunity to speak on House Bill 291. I would like to thank my joint sponsor, Representative Liston, for her partnership on this important piece of legislation.

Our bill addresses Non-Medical Switching, which occurs when patients are forced to switch to a less expensive treatment for no medical reason, often in the middle of a coverage year. Some examples included insurers suddenly dropping medication from coverage, abruptly requiring prior authorization for a drug the patient has been effectively taking, or significantly increasing co-pays to the point that a patient can no longer afford the medication. The practice of Non-Medical Switching puts patient's health at risk.

This bill would put an end to Non-Medical Switching practices by prohibiting Medicaid and all other health plan providers from doing any of the following before the end of the current plan year:

- Moving the pharmaceutical to a more restrictive tier of that patient's health plan formulary.
- Removing the pharmaceutical from the formulary, unless directed to do so by the U.S. Food and Drug Administration due to health and safety concerns, or unless the drug manufacturer interrupts or discontinues sales in the United States.

Health plan providers will be required to provide patients with a clear and convenient path to requesting continued coverage of an effective medication if and when any of these changes do occur at the end of the plan year, and grant them comparable access if there is no medical reason to take them off that drug. Nothing in this bill prevents a physician from prescribing an alternative medication if they believe it to be medically appropriate.

Thank you Chairman Lampton.