



**House Bill 291
Proponent Testimony**

Gary Dougherty
Director, State Government Affairs
American Diabetes Association®
House Insurance Committee
December 6, 2023

Chairman Lampton and Members of the House Insurance Committee:

My name is Gary Dougherty and I am the Director of State Government Affairs for the American Diabetes Association® (ADA), the nation's leading voluntary health organization fighting to bend the curve on the diabetes epidemic. Founded in 1940, the ADA is made up of people with diabetes, healthcare professionals, research scientists, and other concerned individuals. The ADA's mission is to prevent and cure diabetes and to improve the lives of all people affected by diabetes.

I regret that I am unable to join you today; however, on behalf of the more than 4.4 million Ohioans with or at risk for diabetes¹, the ADA thanks Representatives Liston and Carruthers for their leadership in championing efforts to protect patients from mid-year changes in their health care coverage by sponsoring House Bill 291.

The ADA is firm in its belief that restrictive changes should not be made to formularies after a plan year has begun. A patient makes a decision regarding their health insurance coverage based upon the formulary and the plan's policies in effect at the time of enrollment for the coming plan year. It is rare that the patient is able to switch health plans in the middle of the year; therefore, the insurer should not be permitted to make changes that adversely affect an insured's coverage without, at least, providing exemptions and an opportunity to appeal a negative decision.

Diabetes is a serious disease, and effectively managing it is not a one-size-fits-all proposition. The ADA believes that every person living with diabetes should have access to the care, treatments, tools, and information they need to successfully manage their diabetes.

We know that a single therapeutic approach does not work for all people with diabetes. The complexities of managing diabetes are unique to each individual, based on health history, co-morbidities, lifestyle, and other important factors. Day-to-day management of diabetes rests squarely with the individual living with the disease. It is critical that these individuals have the opportunity to work with their health care providers to choose the therapeutic approaches that

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best meet their needs, including access to the brand and type of insulins and durable medical equipment deemed necessary to meet their management goals.

The ADA is concerned with mid-year changes to a plan, such that a medication that is on the formulary when the patient signs up for the plan can be moved off the formulary or shifted to a more expensive tier later in the plan year. Such changes can disrupt the continuity of care, result in unexpected and significant expenses for the patient, and may jeopardize their health as most enrollees don't have the option to switch mid-year to another plan with appropriate coverage.

The ADA advocates for many public policies designed to support patient-centered care, and HB 291 will help achieve that goal. Specifically, we support policies prohibiting health plans from making changes to formularies during the plan year. To protect patients from mid-year formulary changes, the American Diabetes Association® supports House Bill 291 and urges your support as well.

Thank you. If you have any questions, please direct them to me at gdougherty@diabetes.org and I will do my best to answer them for you.

¹ https://diabetes.org/sites/default/files/2023-09/ADV_2023_State_Fact_sheets_all_rev_Ohio.pdf