## Ohio Association of Health Plans

April 30, 2025

Chair Jean Schmidt House Health Committee 77 S. High Street, 12<sup>th</sup> Floor Columbus, Ohio 43215

Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and members of the House Health Committee: my name is Megan Richwine, and I am the Director of Government Affairs for the Ohio Association of Health Plans. On behalf of OAHP, thank you for the opportunity to offer opponent testimony to House Bill 8, legislation that would require coverage for biomarker testing.

OAHP is the state's leading trade association representing the health insurance industry. Our member plans provide health benefits to more than 9 million Ohioans through employer-sponsored coverage, the individual insurance market, and public programs such as Medicare, Medicaid, and the Federal Insurance Marketplace. Our members offer a broad range of health insurance products to Ohioans in the commercial marketplace and are committed partners in public programs.

HB 8 concerns coverage of biomarker testing, which is new technology that looks for genes, proteins, and other substances known as biomarkers<sup>1</sup>. In some cases, these tests can shed light on diseases such as cancer. OAHP members are excited to see new technology enter the market that could bring better health outcomes to their members. That's why many plans already offer coverage of multiple biomarker tests.

Today, health plans cover biomarker tests that meet the health plans' medical necessity criteria. These coverage decisions also allow plans to negotiate the price of testing to bridge access and affordability for its members. It's important to know that health plans are not opposed to biomarker testing; in fact, health plans already cover multiple biomarker tests today. However, we are opposed to covering any and all biomarker tests that do not meet a health plan's medical necessity criteria. While OAHP appreciates the efforts by the proponents to insert clinical evidence language, we still believe our member health plans should retain the ability to provide coverage based on their medical necessity criteria.

If a health plan cannot apply its medical necessity criteria, it can no longer effectively manage the care rendered to its members. Health plans employ physicians and other medical professionals to help evaluate things like biomarker tests to ensure the clinical appropriateness and effectiveness of what is covered. Again, this bill would take that ability away from health plans.

 $<sup>\</sup>frac{1}{\text{https://www.cancer.gov/about-cancer/treatment/types/biomarker-testing-cancer-}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{testing}\%20\text{is}\%20\text{a}\%20\text{way,how}\%20\text{certain}\%20\text{cancer}\%20\text{treatments}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{testing}\%20\text{is}\%20\text{a}\%20\text{way,how}\%20\text{certain}\%20\text{cancer}\%20\text{treatments}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{testing}\%20\text{is}\%20\text{a}\%20\text{way,how}\%20\text{certain}\%20\text{cancer}\%20\text{treatments}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{testing}\%20\text{is}\%20\text{a}\%20\text{way,how}\%20\text{certain}\%20\text{cancer}\%20\text{treatments}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{testing}\%20\text{is}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{testing}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:\text{text=Biomarker}\%20\text{work.}} \\ \frac{1}{\text{treatment}\#:^{\sim}:$ 

Today, a health plan has the ability to negotiate for the price of the testing, passing those savings onto its members. However, if HB 8 passes, there would be less incentive for biomarker testing companies to negotiate pricing. This means testing prices will increase, which will ultimately be reflected in premiums.

Thank you for the opportunity to offer opponent testimony to HB 8. On behalf of the more than 9 million Ohioans to whom member plans provide health care coverage, we will continue to fight for affordable, accessible health care for all Ohioans.