



**Stephen Roller, Primary Health Solutions**

**House Medicaid Committee**

**Testimony on House Bill 96**

**March 5, 2025**

Chairwoman Gross, Ranking Member Baker and Members of the House Medicaid Committee, thank you for the opportunity to provide testimony on House Bill 96, state operating budget. My name is Stephen Roller, and I am the President & CEO of Primary Health Solutions (PHS). I have been with PHS since 2009, first working as a Family Nurse Practitioner, then as the Chief Clinical Officer, Chief Operating Officer and as the CEO since July of 2022.

Primary Health Solutions is a Federally-Qualified Health Center (FQHC) that serves over 66,000 active patients throughout Southwest Ohio, with 15 locations in Butler and Montgomery Counties. We provide advanced primary care, which includes family practice, pediatrics, internal medicine, orthopedics, cardiology, weight management and women's health services. Additionally, we offer vision services, integrated behavioral health services, clinical pharmacy, care coordination programs, and we own two pharmacies that provide access to 340B medications for our patients. In 2015, we opened our first Express Care location and now offer this service in both Middletown and Hamilton. This service is open extended hours and serves as an opportunity for community members to access care that is acute, but not emergent, meeting our goals of expanding access, driving great clinical outcomes, while helping be great stewards of the scarce healthcare funds that are available. We operate a very innovative and successful dental program that includes an AEGD residency program in partnership with New York University Langone Health and we are one of the first providers in the state providing teledentistry services in rural and underserved communities to expand access. We have recently expanded to add Express Dental, which is walk-in only and helps to prevent unnecessary suffering for patients and costly ED visits for the healthcare system. We currently partner with school districts in Fairfield, Middletown, Hamilton and Trenton providing four comprehensive school-based health centers that are open year-round and serve both students and community members of these districts. We also partner with Talawanda City Schools in Oxford and Northridge Local Schools in Northridge to provide school-based therapy for students and access to psychiatric services when needed. Additionally, we serve as the WIC grantee for Butler County and serve an additional 7,000 community members via this service line.

We commend Governor DeWine and his Administration for their investments in the health and well-being of Ohioans in the proposed FY 2026-2027 state operating budget. There are many areas Community Health Centers support in HB 96, such as funding for:

- School-Based Health Centers (SBHCs),
- Ohio Primary Care Workforce Initiative (OPCWI),
- Dental and vision initiatives for children in underserved areas

PHS has long been an advocate for the training of the next generation of caregivers in our region. OPCWI has allowed us to provide small stipends to our staff to offset the additional time and work that is



required when training and mentoring students. We have personally witnessed the benefit of these investments. Of the 63 current providers we employ, 52% were trained at one of our facilities. This has allowed us to continue to grow to expand access in our communities when and where it is needed most. These investments and requests align with the Health Center mission in providing access to comprehensive, quality, and affordable health care to Ohioans and respectfully refer to the Ohio Association of Community Health Centers (OACHC) full remarks for more information.

At PHS we support investments in keeping Ohioans healthy and successful. In HB 96, there are two proposals we respectfully urge to be modified or removed, as they would severely limit access to care for our most underserved populations:

- If federal medical assistance percentage for Medicaid expansion falls below 90%, ODM shall immediately discontinue all medical assistance for members of Group VIII.
- Changes to 340B reimbursement and prohibiting use of contract pharmacies

At PHS, 67% of our patients are covered by Medicaid. 14% of our patients are uninsured and 6% have Medicare. The proposed changes to Medicaid would not only disrupt patient care for patients but lead to a \$1.2 million shortfall in our budget for 2025. We request this provision be removed or at least modified to avoid disruption in the care of vulnerable populations and ensure continuity of services.

At PHS, the 340B program has been a significant contributor to our ability to expand access throughout Southwest Ohio, as the program was intended. The 340B savings, entirely funded with pharmaceutical dollars, makes up a larger portion of our operating revenue than Medicaid reimbursement or Federal 330 grants. If the proposed changes proceed, the PHS services lines that will be most at risk are women's health services, medication delivery and SBHC / vision services. In 2024, we delivered 364 babies in Butler County. We are currently remodeling space in Hamilton to open the first Maternal-Fetal Medicine clinic in Butler County to serve high-risk mothers and babies. We will be able to provide Level II ultrasounds in the patient's medical home versus having to find transportation to Kettering or Cincinnati. In an environment where we are seeing more and more volatility and consolidation of women's health services, creating OB deserts, we are trying diligently to reverse this trend and expand access to women's health services in our region. This aligns with our mission and vision of meeting the identified needs in our community health improvement plan, which focuses on infant and maternal mortality and vitality.

Our SBHCs serve as Patient-Centered Medical Homes throughout Southwest Ohio and provide critical vision, medical, dental and behavioral health services. Our ability to provide comprehensive eye exams and dispensing of glasses can and do have a profound effect on students' ability to learn and engage in their educational development. While we were very fortunate to have received capital grants to help with the initial building and launch of our SBHCs, we do not receive Federal or state grant funds for ongoing operation of our SBHCs. Our 340B savings subsidize our SBHCs and help align the mission of these health centers with the financial realities that we face. Finally, we used some of our 340B savings to provide free delivery of medications to patients. This leads to better clinical outcomes and lower unnecessary utilization of the ED. In 2024, we provided \$602,000 worth of medication deliveries to our patients in Southwest Ohio at no cost. Additionally, when we compare what our patients, who are eligible for a 340B slide for medications, pay versus what they would pay at a non-340B pharmacy, we saved our patients in Southwest Ohio a total of \$5,029,594!



Since 2020, we have seen incremental assaults on 340B savings from the drug manufacturers. We have done all that we can to offset these reductions in an inflationary economic environment, but with these proposed changes, there are no additional levers to pull. We will have to make difficult decisions that disrupt patient access and the high-quality outcomes that our patients have come to expect from PHS.

We appreciate the Ohio Department of Medicaid (ODM) collaborating with our state association, OACHC, to find a path forward on the proposed 340B changes. We urge the General Assembly to safeguard access to care and the essential services made possible by 340B, ensuring the continued well-being and success of Ohio communities.

Thank you for the opportunity to provide testimony on HB 96. I am happy to answer any questions.