



**Senate Bill 100
Opponent Testimony**

Gary Dougherty
Director, State Government Affairs
American Diabetes Association®
Senate Financial Institutions, Insurance, and Technology Committee
March 18, 2025

Chairman Wilson and Members of the Senate Financial Institutions, Insurance, and Technology 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 those Ohioans in the agricultural community with or at risk for diabetes, I would like to share with you the opposition of the ADA to Senate Bill 100 which would allow certain agricultural organizations to provide health coverage to their members that lacks key benefits and consumer protections.

Among the ADA's priorities is to ensure all people with and at risk for diabetes have access to adequate and affordable health care. Unfortunately, SB 100 is not the answer.

The coverage envisioned by SB 100 is not insurance and is not subject to the insurance laws of the state. Administrators of such non-insurance plans typically rely heavily on medical underwriting, selectively choosing the plan participants. Applicants are often asked to fill out lengthy medical histories and may be asked to submit medical records. Plan administrators can reject people or charge them more due to their health status and treatment for pre-existing conditions, like diabetes, and these people may not be covered for up to six months. ADA has concerns for those individuals with diabetes who are in need of robust, comprehensive coverage.

With the enactment of the Affordable Care Act (ACA), there was a guarantee of health insurance coverage, offering access to a comprehensive set of benefits, regardless of health status, and providing critical protections that ensure individuals with diabetes and others with pre-existing conditions have access to the services and treatments they need to manage their disease. Unregulated non-insurance plans, such as those that would be allowed under SB 100, expose

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consumers to often-misunderstood risks and have caused financial and medical harm to patients with pre-existing conditions.

By segmenting the insurance market risk pool, these non-insurance plans drive up insurance premiums for people who rely on comprehensive insurance coverage. Significantly, the impact of the legislation will be a threat to the stability of the individual marketplace, leaving individuals with diabetes with two bad options: higher premiums and fewer choices for an ACA-compliant plan, or a non-ACA-compliant plan with severely limited coverage and high out-of-pocket costs.

In comparison to the consumer protections that apply to ACA-compliant health insurance, non-compliant plans fail to provide the same degree of certainty and security for patients and consumers.

Reliable, comprehensive health coverage is one of the few things that stands between illness and medical and financial ruin. The American Diabetes Association® urges you to reject SB 100 and maintain the stability of the individual health insurance market as well as meaningful access to comprehensive coverage for people with pre-existing conditions.

Thank you very much for your attention. 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.

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