



Senate Bill 100/House Bill 99: Serious Risks for Ohioans with Pre-Existing Conditions

Our nonpartisan, nonprofit organizations are ***committed to helping Ohioans get the comprehensive, affordable health coverage we need to live healthy, productive lives.*** Together, representing millions of Americans who live with serious or chronic disease, we support policies and legislation that achieve these goals *without excluding or discriminating against the 30 percent of Ohio adults under age 65 who live with pre-existing conditions.*¹

SB 100/HB 99 authorizes the sale of unregulated health products that could discriminate against Ohioans with pre-existing conditions. These bills would leave Ohioans exposed to medical and financial harm.

We urge lawmakers to reject SB 100/HB 99!

SB 100/HB 99 plans look like health insurance, but offer NO safeguards for Ohioans

- SB 100/HB 99 plans may look into your medical history when you get ill and cancel coverage.
- SB 100/HB 99 plans won't have to follow consumer protection laws other insurers have to follow.
- The Ohio Department of Commerce and Insurance Department will have no power to help consumers with complaints and Ohioans will have no meaningful appeals process.

Ohioans may be left without coverage, face significant costs, or be denied coverage

- SB 100/HB 99 plans will not have to comply with requirements that limit out-of-pocket costs for patients, could impose caps on coverage, or could exclude coverage of certain benefits like mental health care and specialist visits, leaving Ohioans with potentially catastrophic costs if they get sick.
- Individuals with pre-existing conditions who obtain coverage may be subject to unspecified waiting periods resulting in unplanned and unexpected out-of-pocket health care costs. In other states, similar products require a 6-month waiting period for all contracts and a 9-month waiting period for maternity or family contracts. In some cases, additional waiting periods may apply.²
- Individuals with pre-existing conditions who are denied benefits may be unable to access benefits under the Affordable Care Act (ACA) because of the limited enrollment window – leaving them uninsured and vulnerable.

SB 100/HB 99 plans don't provide affordable options for many Ohioans

- SB 100/HB 99 plans may cherry-pick healthy customers and reject people with histories of illness (something that other Ohio insurers can't do). This could drive up costs for other privately insured consumers.

¹ <https://www.kff.org/health-reform/issue-brief/pre-existing-condition-prevalence-for-individuals-and-families/>

² <https://fbhealthplans.com/plans/individual-family-plans/core-choice/>