



Advocates for Ohio's Future
Senate Bill 263- Proponent Testimony
House Health Committee - December 8, 2020

Chairman Lipps, Vice Chair Holmes, Ranking Member Boyd and Members of the House Health Committee, my name is Kelsey Bergfeld, and I am the Coalition Manager of Advocates for Ohio's Future (AOF).

Thank you for the opportunity to provide comments in support of Senate Bill 263 which protects the intent of the 340B Drug Pricing Program by ensuring savings achieved by the program are directed to support or expand primary care services and affordable pharmaceuticals for uninsured or underinsured Ohioans.

AOF is a nonprofit, nonpartisan coalition of over 500 state and local health and human services policy, advocacy and provider organizations that promotes health and human service budget and policy solutions so that all Ohioans live better lives. Our coalition believes in investing in our state's most valuable resource—our people—to ensure that they are safe, healthy, and can access pathways to prosperity for themselves and their families.

We believe health comes first on the path to self-sufficiency and living a fulfilled life. Without access to health care, people struggling with chronic illnesses, including mental health issues and addiction would have few options for treatment. Many would not be able to afford the care and medications they need in order to provide food and shelter for their families, go to school or succeed in the workplace.

Safety net providers including but not limited to FQHCs and FQHC look-alikes, Ryan White Clinics, Hemophiliac Treatment Centers, Medicare/Medicaid Disproportionate Share Hospitals and Children's Hospitals play a vital role in helping low-income uninsured and underinsured patients access care in a cost-effective setting and significantly improve health outcomes for Ohioans and families across the state.

Under the 340B program, safety net providers are mandated to pass every penny of savings from reduced prices into activities that expand access to care for medically-underserved patients. For example, some Health Centers use 340B savings to expand beyond medical care and provide dental, pharmacy, substance abuse disorder treatment services (MAT), or to further extend hours of operation.

By prohibiting private insurers and Medicaid managed care organizations (MCOs) from capturing those savings in contract provisions as proposed in SB 263, 340B organizations retain the ability to reinvest savings to support or expand primary care services that increases patients' access to the care they need, when they need it and in the appropriate, most cost-effective setting, thus reducing costs elsewhere in the healthcare system.

Thank you for the opportunity to comment in support of SB 263. We urge you to support SB 263 and all policies that promote equitable access to quality healthcare for all Ohioans.