



February 12, 2018

Tim Boyd, MPH  
Director of State Policy  
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Members, Health, Human Services and Medicaid Committee  
Ohio State House  
1 Capitol Square  
Columbus, OH 43215

**Re: Support for Senate Bill 56**

Dear Members of the Health, Human Services and Medicaid Committee:

On behalf of the 1-in-10 Ohioans with one of the nearly 7,000 known rare diseases, the National Organization for Rare Disorders (NORD) thanks the Committee for the opportunity to provide comments on SB 56, legislation concerning step therapy protocols.

NORD is a unique federation of voluntary health organizations dedicated to helping people with rare "orphan" diseases and assisting the organizations that serve them. We are committed to the identification, treatment, and cure of rare disorders through programs of education, advocacy, research, and patient services. NORD believes strongly that every patient deserves the medical care that is best suited for their medical situation and that will give them the best results. Based on the reports we receive from member organizations and individuals, step therapy policies (also known as fail first) are increasingly being applied by health plans in Ohio with little regard for a patient's treatment history and specific medical needs.

Step therapy is a procedure by which insurers (public or private) require a patient to take one or more alternative medications before being put on the medicine preferred by their provider. While this is done by insurers as an attempt to control health care costs, it has been increasingly applied to patients with little regard to their medical situation or treatment history. As a result, in many cases, these requirements can delay appropriate treatment and ultimately increase costs, not lower them.

As the use of step therapy has increased (at least 60 percent of commercial health plans have implemented it)<sup>1</sup>, so has the need for states to ensure that these requirements do not needlessly interfere with appropriate care for patients. For instance, in some cases, patients switching insurance plans may be required to stop taking a successful treatment and start taking a less effective medicine, simply because it is less expensive.

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<sup>1</sup> Pharmaceutical step therapy interventions: a critical review of the literature. J Manag Care Pharm. 2011 Mar;17(2):143-55.



SB 56 will address this issue by providing new protections for patients when health plans implement fail first policies. First, this legislation requires that step therapy be based on medical criteria and clinical guidelines developed by independent experts. Second, it will create a simple and accessible appeals process for patients and providers. Finally, it will allow patients to be exempted from step therapy completely based on a proven medical need.

To ensure patient safety, Ohio needs to ensure that fail first policies do not interfere with appropriate care. By implementing the protections created in SB 56, the Committee will be protecting patients while still enabling health plans to achieve the cost saving benefits of step therapy when it is appropriate.

Thank you again for the opportunity to comment on this legislation. If NORD can supply additional information, please do not hesitate to let me know. I can be reach directly at (202) 545-3830 or via email at [tboyd@rarediseases.org](mailto:tboyd@rarediseases.org).

Sincerely,

Tim Boyd, MPH  
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