



December 17, 2024

Ohio Senate Insurance Committee
 1 Capitol Square
 Columbus, OH 43215

Re: **HB 24 – biomarker testing legislation**

Dear Chairman Hackett and Members of the Ohio Senate Insurance Committee,

On behalf of all our organizations and the hundreds of thousands of patients and providers we represent across Ohio, we respectfully request that you pass House Bill 24, which will ensure Ohioans covered by state-regulated insurance plans, including Medicaid, have coverage for biomarker testing when medically appropriate.

On June 26th, the Ohio House of Representatives passed HB 24. To date, 20 states have passed similar legislation to expand coverage of biomarker testing. You have now had three hearings on this bill in the Senate Insurance Committee and have heard from numerous supporters of this bill.

It is our understanding that there have been recent conversations about adding language to the bill to put a cap on the reimbursement of biomarker testing. **This proposal would not help patients but could push testing providers out of the state in an attempt to save money for insurance companies.** ACS CAN and our partners are concerned that an arbitrary cost cap could limit access to innovation and create an additional barrier to appropriate testing – resulting in inadequate access for patients. To date, lawmakers in many states including Texas, Indiana, Iowa, Georgia, and Kentucky have passed strong bills to expand coverage of biomarker testing (when supported by medical and scientific evidence) without this unnecessary and potentially problematic provision.

The purpose of this legislation is to enable more Ohioans to access appropriate testing; currently the cost of biomarker testing – when not covered by insurance – is a significant barrier for many patients. There is a wide range of costs for biomarker tests, depending on the size and complexity of the appropriate test for a particular patient. Although the average cost to an insurer per biomarker test is just \$224ⁱ, the out-of-pocket cost to a patient when insurance does not cover the needed test can exceed \$10,000 for some tests.

Currently, the legislation does not address reimbursement levels at all. It establishes biomarker testing as a covered service under certain circumstances. Insurance companies would still be able to negotiate with providers of biomarker testing and other services. There is no reason to set an arbitrary cap on reimbursement.

Timely access to guideline-indicated comprehensive biomarker testing can help achieve the triple aim of health care including better health outcomes, improved quality of life, and reduced costs. Comprehensive biomarker testing looks for recommended biomarkers based on clinical guidelines. This testing can lead to treatments with fewer side effects, longer survival, and allow patients to avoid treatments that are likely to be ineffective or unnecessary. Exposure to these ineffective treatments can exacerbate the physical, emotional, and economic burdens of disease.

Often paying more upfront for comprehensive testing can result in overall savings in treatment costs.

Studies have found upfront broader biomarker testing results in substantial cost savings for commercial payersⁱⁱ and decreased expected testing procedure costs to the health plan.ⁱⁱⁱ Some studies have found minimal cost increase as a result of the costs of more effective treatment and prolonged patient survival.^{iv, v}

We appreciate your consideration and encourage you to pass HB 24 forward without the addition of an arbitrary monetary cap on testing costs. Please reach out to Leo Almeida, ACS CAN Government Relations Director for Ohio at Leo.Almeida@cancer.org with questions and concerns.

Sincerely,

The Academy of Medicine of Cleveland & Northern Ohio
AdvaMed

Aimed Alliance
ALS Association
Alzheimer's Association

American Association of Clinical Urologists, Inc.
American Cancer Society Cancer Action Network
American Lung Association
American Kidney Fund
American Urological Association
Association for Clinical Oncology
CancerCare
Cancer Support Community/Gilda's Club
Case Western Reserve University – Case Comprehensive
Cancer Center
Crohn's and Colitis Foundation
Coalition of State Rheumatology Organizations
Colorectal Cancer Alliance
Cleveland Clinic
CLL Society
Community Oncology Alliance
Crohn's and Colitis Foundation
End Preeclampsia
Exon 20 Group
Fight Colorectal Cancer
Global Colon Cancer Association
Global Liver Institute
GO2 Foundation for Lung Cancer
Heal Collaborative
ICAN, International Cancer Advocacy Network
Infusion Access Foundation
International Foundation for Autoimmune &
Autoinflammatory Arthritis (AiA)
KRAS Kickers
Little Hercules Foundation
Lung Cancer Research Foundation
LUNgevity Foundation
Lupus and Allied Diseases Association, Inc.
Melanoma Research Foundation
The Michael J. Fox Foundation
National Marrow Donor Program

National Organization for Rare Disorders
National Ovarian Cancer Coalition
National Psoriasis Foundation
Nationwide Children's Hospital
OhioHealth
Ohio Academy of Family Physicians
Ohio Association of Community Health Centers
Ohio Chapter of the American Academy of Pediatrics
Ohio Chapter of the American College of Cardiology
The Ohio Chapter of the American College of Surgeons
Ohio Hematology Oncology Society
Ohio Hospital Association
Ohio Life Sciences
Ohio Jewish Communities
Ohio Nurses Association
Ohio Osteopathic Association
Ohio State Medical Association
The Ohio State University Comprehensive Cancer Center –
James Cancer Hospital and Solove Research Institute
Ohio Urological Society
Oncology Hematology Care
Oncology Nursing Society
One Cancer Place
Patients Rising
PDL1 Amplifieds
Premier Health
Sharsheret
Susan G. Komen
Transplant Life Foundation
Triage Cancer
Southeastern Ohio Regional Medical Center
UC Health
University Hospitals
VHL Alliance
ZERO Prostate Cancer

ⁱ Dieguez, G. Carioto, J. The landscape of biomarker testing coverage in the United States. Milliman.
<https://www.milliman.com/en/insight/the-landscape-of-biomarker-testing-coverage-in-the-US>

ⁱⁱ Economic Impact of Next-Generation Sequencing Versus Single-Gene Testing to Detect Genomic Alterations in Metastatic Non-Small-Cell Lung Cancer Using a Decision Analytic Model
DOI: 10.1200/PO.18.00356 JCO Precision Oncology - published online May 16, 2019.

ⁱⁱⁱ Budget Impact of Next-Generation Sequencing for Molecular Assessment of Advanced Non-Small Cell Lung Cancer
<https://doi.org/10.1016/j.jval.2018.04.1372>

^{iv} Budget Impact of Next-Generation Sequencing for Molecular Assessment of Advanced Non-Small Cell Lung Cancer
<https://doi.org/10.1016/j.jval.2018.04.1372>

^v Budget impact analysis of comprehensive genomic profiling in patients with advanced non-small cell lung cancer
Source: James Signorovitch, Zhou Zhou, Jason Ryan, Rachel Anhorn & Anita Chawla (2019) Budget impact analysis of comprehensive genomic profiling in patients with advanced non-small cell lung cancer, Journal of Medical Economics, 22:2, 140-150, DOI: 10.1080/13696998.2018.1549056