



May 15, 2024

Ohio House of Representatives
 77 South High Street
 Columbus, OH 43215

Re: HB 24 – biomarker testing legislation

Dear Chairman Lampton and Members of the Ohio House Insurance Committee,

We appreciate the ongoing conversations regarding HB24, legislation that would improve access to comprehensive biomarker testing for Ohioans. On May 8th, you held the 5th hearing on this bill. At this

hearing, you heard proponent testimony from the Ohio Chamber of Commerce, Alzheimer's Association, ALS Association, and The Michael J. Fox Foundation. During the five hearings on this bill, you have received 32 pieces of proponent testimony and only two pieces of opponent testimony. To date, 17 states have passed legislation to expand coverage of biomarker testing. On behalf of the patients and health care providers we represent across Ohio, we are calling on you to pass this bill out of the House Insurance Committee, so that Ohioans will have insurance coverage for biomarker testing when supported by scientific and medical evidence.

Timely access to guideline-indicated comprehensive biomarker testing will enable more patients to access the most effective treatments for their disease.^{i,ii} Progress in improving health outcomes increasingly involves the use of precision medicine, which uses information about a person's own genes or proteins to diagnose and treat diseases. Access to precision medicine often requires biomarker testing, which analyzes biological samples to identify biomarkers (genetic mutations, molecular signatures) that may impact treatment decisions.

During the most recent committee hearing, a few questions were raised during the discussion on HB24. There were questions regarding costs for biomarker testing and cost savings by utilizing informed treatment. 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 a commercial insurer per biomarker test is just \$224ⁱⁱⁱ, the out-of-pocket cost to a patient when insurance does not cover the needed test can exceed \$10,000 for some tests.

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. 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 biomarker testing can result in overall savings in treatment costs. In a study sponsored by CVS Health looking at total cost of care for non-small cell lung cancer patients who received broad panel biomarker testing in comparison to narrow panel biomarker testing; broad panel testing had an average additional up-front cost increase of approximately \$1,200 in comparison to narrow panel biomarker testing. However, those patients who underwent broad panel biomarker testing experienced a savings of approximately \$8,500 per member per month in total cost of care, as a result of more optimal treatment.^{iv}

Other studies have found upfront broader biomarker testing results in substantial cost savings for commercial payers^v and decreased expected testing procedure costs to the health plan.^{vi} Some studies have found minimal cost increases as a result of the costs of more effective treatment and prolonged patient survival.^{vii, viii}

We respectfully ask that you schedule HB24 for a committee vote as soon as possible. Please reach out to Leo Almeida, ACS CAN Government Relations Director for Ohio at Leo.Almeida@cancer.org with any questions.

Sincerely,

American Cancer Society Cancer Action Network
Ohio Osteopathic Association
Ohio Chapter of the American Academy of Pediatrics

Ohio State Medical Association
Cleveland Clinic
The Academy of Medicine of Cleveland & Northern Ohio

Ohio Hospital Association
Ohio Association of Community Health Centers
Susan G. Komen
National Organization for Rare Disorders
Ohio Jewish Communities
Exon 20 Group
AdvaMed
Little Hercules Foundation
KRAS Kickers
National Marrow Donor Program
Fight Colorectal Cancer
Ohio Urological Society
Ohio Hematology Oncology Society
ICAN, International Cancer Advocacy Network
Triage Cancer
Crohn's and Colitis Foundation
American Kidney Fund
GO2 Foundation for Lung Cancer
National Psoriasis Foundation
American Association of Clinical Urologists, Inc.
Lupus and Allied Diseases Association, Inc.
Ohio Nurses Association
American Lung Association in Ohio
Global Colon Cancer Association
Association for Clinical Oncology
Community Oncology Alliance
American Urological Association
Ohio Academy of Family Physicians
The Ohio State University Comprehensive Cancer Center –
James Cancer Hospital and Solove Research Institute
Ohio Life Sciences
Nationwide Children's Hospital

Case Western Reserve University – Case Comprehensive
Cancer Center
OhioHealth
Premier Health
Southeastern Ohio Regional Medical Center
UC Health
Aimed Alliance
The Ohio Chapter of the American College of Surgeons
ALS Association
CancerCare
Cancer Support Community/Gilda's Club
CLL Society
Coalition of State Rheumatology Organizations
End Preeclampsia
International Foundation for Autoimmune &
Autoinflammatory Arthritis (AiA)
Lung Cancer Research Foundation
One Cancer Place
LUNGeivity Foundation
Melanoma Research Foundation
Oncology Nursing Society
Patients Rising Now
PDL1 Amplifieds
Transplant Life Foundation
VHL Alliance
Colorectal Cancer Alliance
Heal Collaborative
University Hospitals
Ohio Chapter of the American College of Cardiology
Alzheimer's Association
The Michael J. Fox Foundation

ⁱ Biomarker Testing Can Direct Care, but Only If Clinicians Perform the Right Tests. Evidence-Based Oncology, February 2020, Volume 26, Issue 2. <https://www.ajmc.com/view/biomarker-testing-can-direct-care-but-only-if-clinicians-perform-the-right-tests>

ⁱⁱ Mikyung Kelly Seo & John Cairns. Do cancer biomarkers make targeted therapies cost-effective? A systematic review in metastatic colorectal cancer. PLOS. September 26, 2018 <https://doi.org/10.1371/journal.pone.0204496>

ⁱⁱⁱ 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>

^{iv} Brito RA, Cullum B, Hastings K, et al. Total cost of lung cancer care associated with broad panel versus narrow panel sequencing. Journal of Clinical Oncology 2020; 38, no. 15_suppl; 7077. https://ascopubs.org/doi/abs/10.1200/JCO.2020.38.15_suppl.7077

^v 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.

^{vi} 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>

^{vii} 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>

^{viii} 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