Ohio Legislative Service Commission

Sub. Bill Comparative Synopsis

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Sub. H.B. 248

131st General Assembly
(H. Health & Aging)

This table summarizes how the latest substitute version of the bill differs from the immediately preceding version. It addresses only the topics on which the two versions differ substantively. It does not list topics on which the two bills are substantively the same.

Topic	Previous Version (As Introduced)	Sub. Version (LSC 131 0237-11)
Coverage of/access to abuse-deterrent opioid analgesic drug products	Requires that the following provide coverage for all abuse-deterrent opioid analgesic drug products: (1) Health insuring corporations, sickness and accident insurers, multiple employer welfare arrangements, and public employee benefit plans providing prescription drug coverage; (2) The Medicaid program, including Medicaid managed care organizations. *(R.C. 1739.05(B), 1751.691(B)(1), 3923.851(B)(1), and 5164.091(B).)*	Instead, requires that the insurers and Medicaid provide access to abuse-deterrent opioid analgesic drug products in their formularies or lists of covered drugs. *(R.C. 1739.05(B), 1751.691(B), 3923.851(B), and 5164.091(B).)*

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Reimbursement	Specifies that reimbursement for an abuse-deterrent opioid analgesic drug product cannot be excluded or denied solely due to the drug's cost. *(R.C. 1739.05(B), 1751.691(B)(2), 3923.851(B)(2), and 5164.091(B).)*	No provision.
Cost-sharing requirements	Specifies that any cost-sharing requirements cannot exceed the lowest cost-sharing requirements applied to opioid analgesic drugs without abuse-deterrent properties. Also provides that an insurance policy, contract, agreement, or plan or the Medicaid program cannot achieve compliance with the bill's cost-sharing provision by increasing prescription cost-sharing requirements. *(R.C. 1739.05(B), 1751.691(D), 3923.851(D), and 5164.091(D).)*	No provision. No provision.
Prior authorization and utilization review – all forms of opioid analgesics	No provision.	Requires that an insurer or the Medicaid program apply prior authorization requirements or utilization review measures as conditions of providing coverage of opioid analgesic drug products, including abuse-deterrent forms prescribed for the treatment of chronic pain, except when the drug product is prescribed under any of the following circumstances: (1) To a hospice patient in a hospice care program; (2) To any other patient diagnosed with a terminal condition; (3) To treat cancer or another condition associated with cancer. *(R.C. 1739.05(B), 1751.691(E), 3923.851(E), and 5164.091(E).)*

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	No provision.	When implementing the required prior authorization or utilization review for opioid analgesic drug products, the insurer or Medicaid program must consider all of the following: (1) If the course of treatment with the drug continues for more than 90 days, the current law requirements regarding physician management of chronic pain; (2) If the morphine equivalent daily dose for the drug exceeds 80 milligrams, the current opioid prescribing guidelines established by the Governor's Cabinet Opiate Action Team; (3) If the individual is being treated with a benzodiazepine at the same time the opioid analgesic is prescribed, the current opioid prescribing guidelines established by the Governor's Cabinet Opiate Action Team. *(R.C. 1739.05(B), 1751.691(E), 3923.851(E), and 5164.091(E).)*
	Provides that any prior authorization requirements or utilization review measures that an insurer or the Medicaid program applies to opioid analgesic drugs, and any coverage denials made pursuant to them, cannot require treatment failure of nonabuse-deterrent forms in order to access forms that are abuse-deterrent. *(R.C. 1739.05(B), 1751.691(C), 3923.851(C), and 5164.091(C).)*	Same, but also provides that such requirements or measures, and any coverage denials made pursuant to them, cannot be any more restrictive for abuse-deterrent opioid analgesic drug products than for opioid analgesic drug products that are not abuse-deterrent. *(R.C. 1739.05(B), 1751.691(C), 3923.851(C), and 5164.091(C).)*
	No provision.	Specifies that the bill cannot be construed to prevent an insurer or the Medicaid program from

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		applying utilization review requirements to abuse-deterrent opioid analgesic drug products, including prior authorization or nonopioid analgesic drug step therapy, provided that the same requirements are applied to all opioid analgesic drug products. *(R.C. 1739.05(B), 1751.691(D), 3923.851(D), and 5164.091(D).)*

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