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# **Fiscal Note & Local Impact Statement**

Bill:	H.B. 124 of the 131st G.A.	Date:	June 8, 2015
Status:	As Passed by the House	Sponsor:	Reps. Johnson and Huffman

#### Local Impact Statement Procedure Required: No

**Contents:** Authority to prescribe or furnish without examination a drug for a sexual partner of a patient diagnosed with chlamydia, gonorrhea, or trichomoniasis

## **State Fiscal Highlights**

• Possible minimal increase in Medicaid costs if Medicaid participants fill additional prescriptions as a result of the bill. Medicaid is a joint state and federal program under which the federal government pays approximately 60% of the costs in Ohio. Any costs would be jointly funded by the state and federal government.

## **Local Fiscal Highlights**

• Possible minimal increase in drug costs for local health departments if they choose to dispense drugs for a patient's sexual partners.

#### **Detailed Fiscal Analysis**

The bill authorizes a physician, advanced practice registered nurse, or physician assistant to prescribe or personally furnish a drug for up to two sexual partners of a patient diagnosed with chlamydia, gonorrhea, or trichomoniasis, without examining the sexual partner(s). The bill authorizes a pharmacist to dispense a drug pursuant to a prescription issued in accordance with the bill and grants immunity from civil liability, criminal prosecution, or professional discipline to a health care provider or pharmacist acting in good faith and in accordance with the bill.

The bill could lead to a minimal increase in Medicaid prescription drug costs if Medicaid participants fill prescriptions received through their partners. On the other hand, the bill could have the indirect effect of decreasing Medicaid costs if there is a decrease in the number of physician visits and laboratory costs for affected partners. In addition, the bill could have the indirect effect of decreasing Medicaid costs if there is a reduction in the number of sexually transmitted infections. Medicaid is a joint state and federal program under which the federal government pays approximately 60% of the costs in Ohio. Therefore, any costs or savings would be jointly experienced by the state and federal government.

Local health departments sometimes dispense drugs at the time of diagnosis. If they choose to dispense drugs for a patient's sexual partners, they may experience a minimal increase in drug costs. However, as with Medicaid costs, the bill could indirectly reduce costs if there is a decrease in visits to local health departments and laboratory costs for affected partners. Similarly, if there is a reduction in the number of sexually transmitted infections, there may be a decrease in the number of individuals using local health department services.

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