

Ohio Association of Health Underwriters

Legislative Update

February 18, 2014

Prepared by John T. McGough

Enacted Legislation

[HB 123](#) **TELEHEALTH SERVICES** (Gonzales & Wachtmann) Regarding health care peer review committee proceedings and Medicaid coverage of telehealth services. The bill passed the House on June 26, 2013 and the Senate on January 29, 2014 and has been sent to the Governor for his signature.

[SB 206](#) **MEDICAID REVISIONS** (Burke) (Effective 3/20/2014) To require implementation of certain Medicaid revisions, reform systems, and program oversight, and to make an appropriation. The bill establishes the Joint Medicaid Oversight Committee comprised of five House and five Senate members to oversee the Department of Medicaid's implementation of reforms in the Medicaid program. Policies and strategies are to encourage Medicaid recipients to become self-sufficient and to reduce the use of the Medicaid program.

[HB 83](#) **PSYCHOLOGY LAWS** (Hackett) (Effective 3/20/2014) To revise laws governing the practice of psychology.

[HB 126](#) **POWER OF ATTORNEY** (Kunze & Stinziano) (Effective 3/20/2014) To allow a person who creates a durable power of attorney for health care to authorize the attorney in fact to obtain health information about the person, to make an individual who is designated as an alternate attorney in fact ineligible to witness the instrument that creates a durable power of attorney for health care, to permit the principal to nominate a guardian in a durable power of attorney for health care, and to establish a presumption that a valid living will declaration revokes all prior declarations.

[SB 4](#) **NEWBORN SCREENING** (Manning & Oelslager) (Effective 9/27/2013) To require a pulse oximetry screening for each newborn born in a hospital or freestanding birthing center.

[SB 9](#) **(OPEN ENROLLMENT CHANGES)** (Bacon) (Effective 9/4/2013)

S.B. 3 does the following:

- (1) Requires health insuring corporations to file any changes in a solicitation document with the Superintendent of Insurance 30 days prior to use for informational purposes. The Superintendent may disapprove any solicitation document or require that the document be amended if the Superintendent finds that the document fails to comply with the necessary requirements.
- (2) Suspends the operation of the following programs during the period beginning January 1, 2014, and expiring January 1, 2018: Ohio's Open Enrollment Program, Ohio's Health Reinsurance Program, and the option to convert certain health insurance contracts and policies.

- (3) Requires that if the applicable sections of the federal Patient Protection and Affordable Care Act of 2010, related to health insurance coverage, do not take effect January 1, 2014, or become ineffective prior to the expiration of the suspension on January 1, 2018, then the suspended sections in either their present form or as they are later amended, again become operational.

[HB 3](#) INSURANCE AGENTS & NAVIGATORS (Sears) (Effective 7/30/2013)

To specify licensing and continuing education requirements for insurance agents involved in selling, soliciting, or negotiating sickness and accident insurance through a health benefit exchange; to specify training and certification requirements for navigators providing services in a health benefit exchange; and to make changes to copayments, cost sharing, and deductibles for health insuring corporations.

Opiate related Legislation

[HB 381](#) CONTROLLED SUBSTANCES (Sears) (Introduced 12/11/2013) To require a retail terminal distributor of dangerous drugs to verify identification when dispensing a controlled substance or tramadol. The bill is pending in the House Health & Aging Committee.

[HB 92](#) SYRINGE EXCHANGE (Antonio & Sears) (Introduced 3/5/2013) To authorize the establishment of syringe exchange programs. The bill passed the House on October 2, 2013 and has been referred to the Senate Medicaid, Health & Human Services Committee.

[HB 170](#) DRUG OVERDOSES (Johnson & Stinziano) (Introduced 5/21/2013) To provide that a licensed health professional authorized to prescribe naloxone, if acting with reasonable care, may prescribe, administer, dispense, or furnish naloxone to a person who is, or a person who is in a position to assist a person who is, apparently experiencing or who is likely to experience an opioid-related overdose without being subject to administrative action or criminal prosecution, to provide that a person who is in a position to assist a person who is apparently experiencing or who is likely to experience an opioid-related overdose is not subject to actions of professional licensing boards, administrative action, or criminal prosecution for a drug offense or practicing medicine without a license if the person, acting in good faith, obtains naloxone or a naloxone prescription from a licensed health professional and administers it to a person for an opioid related overdose, and to provide that peace officers and licensed emergency responders who are acting in good faith are not subject to administrative action or criminal prosecution for a drug offense or practicing medicine without a license for administering naloxone to a person who is apparently experiencing an opioid-related overdose.

The bill passed the House on October 16, 2013 and is scheduled for its fourth hearing and a possible vote this week in the Senate Medicaid, Health & Human Services Committee.

[HB 315](#) HOSPITAL REPORTING (Wachtmann) (Introduced 10/24/2013) To require hospital reporting of neonatal abstinence syndrome. The bill passed the House Health & Aging on January 22, 2014 and is scheduled to receive its first hearing this week in the Senate Medicaid, Health & Human Services Committee.

[HB 314](#) **MINOR PRESCRIPTIONS** (Baker & Kunze) (Introduced 10/24/2013) To require a prescriber to obtain written informed consent from a minor's parent, guardian, or other person responsible for the minor before issuing a controlled substance prescription to the minor and to establish sanctions for a prescriber's failure to comply with this requirement. The bill passed out of the House on January 15, 2014 and is scheduled for its second hearing in the Senate Medicaid, Health & Human Services Committee this week.

[HB 332](#) **PAIN MEDICATION** (Wachtmann & Antonio) (Introduced 11/05/2013) To establish standards and procedures for opioid treatment of chronic, intractable pain resulting from non cancer conditions and to require that professional disciplinary action be taken for failing to comply with those standards and procedures. The bill is scheduled to have its eighth hearing in the House Health & Aging Committee's Opiate Addiction Treatment & Reform Subcommittee this week.

[HB 341](#) **CONTROLLED SUBSTANCES** (Smith) (Introduced 11/7/2013) To prohibit a controlled substance that is a schedule II drug or contains opioids from being prescribed or dispensed without review of patient information in the State Board of Pharmacy's Ohio Automated Rx Reporting System. The bill is scheduled to receive its sixth hearing in the House Health & Aging Committee's Opiate Addiction Treatment & Reform Subcommittee this week.

[HB 359](#) **PRESCRIPTION DRUGS** (Sprague) (Introduced 11/21/2013) To require disclosure of the addictive nature of certain prescription drugs. The bill received sponsor testimony in the House Health & Aging Committee on January 8, 2014 and is scheduled to receive its fifth hearing in the Committee's Opiate Addiction Treatment & Reform Subcommittee this week.

[HB 363](#) **GOOD SAMARITAN** (Sprague, Driehaus) (Introduced 11/26/2013) To provide an immunity from arrest, prosecution, conviction, or supervised release sanctioning for a minor drug possession offense for a person who seeks or obtains medical assistance for self or another person who is experiencing a medical emergency as a result of ingesting drugs or alcohol or for a person who is experiencing such a medical emergency and for whom medical assistance is sought. The bill has been referred to the House Judiciary Committee.

[HB 366](#) **CONTROLLED SUBSTANCES** (Sprague) (Introduced 12/2/2013) To require hospice care programs to establish procedures to prevent diversion of controlled substances that contain opioids. The bill passed out of the House Health & Aging Committee on February 12, 2014.

[HB 367](#) **DRUG ABUSE PREVENTION** (Driehaus & Sprague) (Introduced 12/2/2103) To require the health curriculum of each school district to include instruction in prescription opioid abuse prevention. The bill is scheduled for its second hearing in the House Education Committee this week.

[HB 369](#) **MEDICAID COVERAGE** (Sprague) (Introduced 12/3/2013) To require the Medicaid program and health insurers to cover certain services for recipients with opioid addictions; to establish requirements for boards of alcohol, drug addiction, and mental health services regarding treatment services for opioid addiction to help defray payroll costs associated with a court's employment of drug court case managers; to provide a state share of the capital costs of

recovery jousting projects; and to make appropriations. The bill is scheduled to receive its fourth hearing this week in the House Health & Aging Committee. It is anticipated that the health insurer coverage mandate provisions included in the bill will be removed in a substitute version of the bill.

[HB 378](#) **OPIOID ADDICTION TREATMENTS** (Smith & Sprague) (Introduced 12/5/2013) To prohibit a physician from prescribing or personally furnishing certain drugs to treat opioid dependence or addiction unless the patient is receiving appropriate behavioral counseling or treatment. The bill is scheduled to receive its fifth hearing in the House Health & Aging Committee's Opiate Addiction Treatment & Reform Subcommittee this week.

Active Pending Legislation

[SB 230](#) **CANCER DRUGS** (Manning & Oelslager) (Introduced 11/07/2013) To establish standards for the delivery of non-self injectable cancer drugs. The bill passed out of the Senate on January 22, 2014 and has been referred to the House Health & Aging Committee.

[SB 99](#) **MEDICATIONS** (Oelslager & Tavares) (Introduced 4/9/2013) Regarding insurance coverage for orally administered cancer medications. The bill passed out of in the Senate Insurance & Financial Institutions Committee on December 4, 2013.

[HB 361](#) **BRAIN INJURY COVERAGE** (Gonzales & Smith) (Introduced 11/26/2013) To prohibit health insurers from excluding coverage related to acquired brain injuries. The bill is scheduled for its second hearing in the House Health & Aging Committee this week.

[HB 264](#) **DIABETES** (Wachtmann & Barnes) (Introduced 9/12/2013) Regarding care for students with diabetes in schools. The bill passed out of the House Health & Aging Committee on February 12, 2014.

[HB 320](#) **HEALTH CARE SERVICES** (Young) (Introduced 10/29/2013) To create a state income tax deduction regarding certain health care services provided at a free clinic; to extend qualified immunity from civil liability for certain volunteer health care services provided to individuals eligible for or receiving Medicaid; to authorize a person practicing under a volunteer's certificate to provide health care services to any person; to create a volunteer's certificate for retired nurses; and to designate December as "Free Clinic Appreciation Month." The bill passed the Ohio House on February 12, 2014.

[SB 258](#) **PHARMACY AUDITS** (Balderson) (Introduced 12/16/2013) To establish standards for the performance of pharmacy audits. The bill is scheduled for its fourth hearing this week in the Senate Insurance & Financial Institutions Committee.

[HB 394](#) **IMMUNIZATIONS** (Smith & Antonio) (Introduced 12/23/2013) Regarding the authority of pharmacists and pharmacy interns to administer immunizations. The bill is scheduled to receive its fourth hearing in the House Health & Aging Committee this week with a possible vote.

[HB 232](#) **PROFESSIONAL COUNSELORS** (Sears & Milkovich) (Introduced 07/17/2013) To modify the laws governing professional counselors, social workers, and marriage and family therapists. The bill passed the Ohio House on November 6, 2013 and is pending in the Senate Medicaid, Health & Human Services Committee.

[HB 384](#) **PHARMACIST IMMUNIZATIONS** (Antonio & Smith) (Introduced 12/10/2013) To decrease the minimum age of the patients for whom a pharmacist may administer certain immunizations. The bill is pending in the House Health & Aging Committee.

[SB 240](#) **PHARMACIST CONSULT PACTS** (Burke) (Introduced 11/18/13) To revise the laws governing pharmacist consult agreements and to authorize a pharmacist to prescribe and administer drugs under a consult agreement. The bill is pending in the Senate Medicaid, Health & Human Services Committee.

[HB 348](#) **COLLEGE HEALTH PLANS** (Henne & C. Hagan) (Introduced 11/14/2013) To prohibit state institutions of higher education from requiring students to be covered by a health insurance policy as a condition of enrollment or from automatically enrolling students in such policies or plans. The bill is pending in the House Education Committee.

Other Pending Legislation

[HB 159](#) **DENTAL SERVICES** (Hackett & Schuring) (Introduced 05/07/2013) To prohibit a health insurer from establishing a fee schedule for dental providers for services that are not covered by any contract or participating provider agreement between the health insurer and the dental provider. The bill has received eight hearings in the House Insurance Committee.

[SB 140](#) **INSURANCE HOLDING COMPANIES** (Bacon) (Introduced 6/4/2013) To make changes to the law governing insurance holding company systems, to eliminate the petition requirement for domestic mutual companies that wish to merge or consolidate with another company, to eliminate the commission created to hear and determine petitions for merger and consolidation, to provide the requirements for maintaining a risk management framework and completing an own risk and solvency assessment, and to provide guidance and instructions for filing an own risk and solvency assessment summary report with the superintendent of insurance. The bill received its fifth hearing in the Senate Insurance & Financial Institutions Committee on October 23, 2013 where a substitute bill was brought before the committee.

[HB 313](#) **INSURANCE LAWS** (Kunze & Hackett) (Introduced 10/24/2013) This bill is identical to S.B. 140. The bill received its third hearing in the House Insurance Committee on November 19, 2013.

[SB 228](#) **CONTROLLING BOARD** (Widener) (Introduced 11/05/2013) To limit the Controlling Board's authority to approve the expenditure of certain funds and to require state agencies to provide certain information to the Controlling Board regarding requested purchases from out-of state suppliers. The bill passed out of the Senate on November 20, 2013 and is pending in the House State & Local Government Committee.

[HB 398](#) **HEALTH CARE** (Sears) (Introduced 12/23/2013) To create the Veterans and Medicaid Eligibility Study Committee and the Health Care Access and Innovation Study Committee. The bill has been referred to the House Health & Aging Committee.

[HB 353](#) **VETERANS HEALTH CARE** (Wachtmann) (Introduced 11/19/2013) To create the Ohio Veterans Health Care System. The bill received sponsor testimony in the House Health & Aging Committee on December 3, 2013.

[SB 145](#) & [HB 208](#) **MEDICAID** (Burke) & (Amstutz & Sykes) (Both Introduced 6/13/2013) To require the Medicaid Director to implement certain reforms to the Medicaid program, to require the Director of Job and Family Services to implement certain reforms to workforce development activities, to create the Joint Medicaid Oversight Committee to review proposed rules regarding the Medicaid and workforce development activity reforms, to require the Joint Medicaid Oversight Committee to issue reports recommending certain changes to the Medicaid program, and to abolish the Joint Legislative Committee on Health Care Oversight and the Joint Legislative Committee on Medicaid Technology and Reform. S.B. 145 has received sponsor testimony in the Senate Finance Medicaid Subcommittee and H.B. 208 received its third hearing in the House Finance & Appropriations Committee on December 3, 2013.

[HB 117](#) **CAPTIVE INSURANCE COMPANIES** (Hackett) (Introduced 04/08/2013) To provide for the operation of captive insurance companies in Ohio. The bill passed the House on June 4, 2013 and has received four hearings in the Senate Insurance & Financial Institutions Committee.

[HB 351](#) **ABORTION** (Becker) (Introduced 11/13/2013) To prohibit insurers from offering coverage for abortion services. The bill has been referred to the House Insurance Committee.

[HB 316](#) **BEHAVIORAL HEALTH** (Wachtmann) (Introduced 10/24/2013) Regarding Medicaid-covered community behavioral health services. The bill has been referred to the House Health & Aging Committee and received sponsor testimony on November 6, 2013.

[HB 317](#) **MEDICAID** (Sears) (10/24/2013) Regarding reforms relating to Medicaid, fraud committed against the state, penalties for certain drug offenses committed against pregnant women, non-opiate medication for released inmates, prescription-related identification requirements, and education for individuals without a high school diploma. The bill is pending in the House Health & Aging Committee.

[SB 79](#) **VACCINATIONS** (Kearney) (Introduced 03/13/2013) To decrease the minimum age for which a pharmacist may administer certain vaccinations. The bill received its fourth hearing in the Senate Medicaid, Health & Human Services Committee on November 20, 2013.

[HB 258](#) **LICENSED SPECTACLE DISPENSING OPTICIANS** (Gonzales) (Introduced 9/4/2013) Authorizes a “licensed spectacle dispensing optician” to engage in both of the following:

- Dispensing of optical aides other than contact lenses
- Dispensing of contact lenses if the only action necessary is to match the description of the contact lenses that is on the packaging to a written prescription. The bill passed the Ohio House

on November 6, 2013 and had its second hearing in the Senate Medicaid, Health & Human Services Committee on November 20, 2013.

[HB 94](#) **HEALTH PLANS** (Gonzales) (Introduced 3/6/2013) To require a health insuring corporation, public employee benefit plan, or sickness and accident insurer to reimburse a board of health for any services provided to an individual by the board that is covered by a plan issued to the individual by the health insuring corporation, public employee benefit plan, or sickness and accident insurer upon request submitted by the board of health. The bill has received two hearings in the House Insurance Committee.

[SB 49](#) **PHYSICIAN DESIGNATIONS** (Patton) (Introduced 2/25/2013) To establish standards for physician designations by health care insurers. The bill has received two hearings in the Senate Insurance & Financial Institutions Committee.

[SB 117](#) **MEDICAID** (Smith) (Introduced 04/30/2013) To permit the Medicaid program to cover the eligibility expansion group authorized by the Patient Protection and Affordable Care Act and to make an appropriation. The bill has been referred to the Senate Finance Committee.

[SB 118](#) **TELEMEDICINE** (Tavares) (Introduced 04/30/2013) Regarding insurance and Medicaid coverage of telemedicine services. The bill has received sponsor testimony in the Senate Insurance Committee.

[HB 125](#) **MEDICAID EXPANSION** (Carney & Antonio) (Introduced 4/16/2013) To permit the Medicaid program to cover the eligibility expansion group authorized by the Patient Protection and Affordable Care Act and to make an appropriation. The bill has been referred to the House Finance & Appropriations Committee.

[SB 104](#) **HEALTH CARE** (Skindell) (Introduced 04/16/2013) To establish and operate the Ohio Health Care Plan to provide universal health care coverage to all Ohio residents. The bill has been referred to the Senate Medicaid, Health & Human Services Committee.

[SB 100](#) **PROMPT PAYMENT** (Tavares) (Introduced 04/09/2013) To specify that the Ohio prompt payment law applies to payment of claims by Medicaid managed care organizations. The bill has been referred to the Senate Insurance & Financial Institutions Committee.

[HB 60](#) **MATERNITY UNITS** (Huffman) (Introduced 2/12/2013) To require that rules governing maternity units, newborn care nurseries, and maternity homes include certain provisions pertaining to the authority to make decisions regarding the transfer of patients to other facilities and to specify procedures for granting variances or waivers of any requirement in the rules governing operation of such facilities. The bill has received three hearings in the House Health & Aging Committee.

[SB 39](#) **HPV VACCINE** (Brown & Schiavoni) (Introduced 2/12/2013) To require insurance providers to cover human papillomavirus screenings and vaccines. The bill has received one hearing Senate Insurance & Financial Institutions Committee.