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## Legislative Update - June 2022

*Prepared by DeLeone and Associates*

### Active Legislation

#### **House Bill 135** - Representatives Susan Manchester (R - Waynesfield) and Thomas West (D - Canton)

*Status:* House Bill 135 was passed by the Ohio House on March 30 with an 89-0 vote. Referred to the Senate Health Committee but has yet to receive a hearing.

*Analysis:* House Bill 135 requires health insuring corporations and sickness and accident insurers to apply amounts paid by or on behalf of covered individuals toward cost-sharing requirements. The bill also exempts situations where a generic version of a brand name drug exists, but the prescribing physician prescribes the brand name drug without it being medically necessary.

*Proponents:* Susan G. Komen, American Heart Association, National MS Society, PhRMA, Akron Children's Hospital, ailment groups and most provider groups

*Opponents:* Pharmaceutical Care Management Association, Ohio Association of Health Plans, and America's Health Insurance Plans

*Interested Parties:* None

#### **House Bill 203** - Representative Jena Powell (R - Arcanum)

*Status:* House Bill 203 was passed by the Ohio House with a 56-33 vote on June 1.

*Analysis:* The bill establishes a licensure reciprocity program for professions requiring state licensure. Provisions of the bill include insurance agents as a profession subject to licensure reciprocity.

*Proponents:* NFIB Ohio, Americans for Prosperity, Ohio Society of Professional Engineers, Ohio Veterinary Medical Licensing Board, Ohio Casino Control Commission, several research think-tanks

*Opponents:* Affiliated Construction Trades, Ohio State Building and Construction Trades Council, Ohio Dental Hygienists Association

*Interested Parties:* Professional Certification Coalition, Ohio Foot and Ankle Medical Association, Buckeye Institute, several research think-tanks

**House Bill 270** - Representatives Susan Manchester (R - Waynesfield) and Terrence Upchurch (D - Cleveland)

*Status:* House Bill 270 has received three committee hearings in the Ohio House Insurance Committee. At the last hearing on May 18, the committee accepted a substitute bill.

*Analysis:* House Bill 270 regulates the practice of reducing healthcare benefits related to emergency services if a condition is determined, after the fact, to not be an emergency.

*Proponents:* American College of Emergency Physicians - Ohio Chapter, Cleveland Clinic, Ohio Hospital Association, MetroHealth, Ohio State Medical Association

*Opponents:* America's Health Insurance Plans, Ohio Association of Health Plans

*Interested Parties:* NFIB Ohio

**House Bill 344** - Representative Jason Stephens (R - Kitts Hill)

*Status:* House Bill 344 received its third hearing in House Insurance Committee on November 17, 2021. The bill was scheduled for a fourth hearing and vote on April 6, but was pulled from the committee agenda during committee.

*Analysis:* House Bill 344 prohibits specified terms from being included in health care contracts between a dental care provider and a contracting entity (any person that has the primary business purpose of contracting with participating providers for the delivery of health care services). The bill prohibits a contracting entity from requiring that a dental care provider accept a payment amount set by the contracting entity for dental care services unless those services are covered services, and imposes disclosure requirements on health plan issuers regarding dental care services that are not covered services.

*Proponents:* Ohio Dental Association

*Opponents:* Delta Dental of Ohio, Westfield Insurance, Ohio Association of Health Plans, OCSEA Union Benefits Trust, National Association of Dental Plans, Ohio Chamber of Commerce

*Interested Parties:* N/A

**House Bill 443** - Representative Kyle Koehler (R - Springfield)

*Status:* House Bill 443 has received three committee hearings in the House Ways and Means Committee. The committee received opponent testimony on March 8, 2022.

*Analysis:* Authorizes a refundable business tax credit equal to 1.3% of the premiums paid by an employer for a group health plan for employees who are Ohio residents.

*Proponents:* NFIB Ohio, Ohio Chamber of Commerce and the Ohio Association of Health Plans

*Opponents:* Ohio Municipal League

*Interested Parties:* N/A

**House Bill 451** - Representatives Gayle Manning (R - North Ridgeville) and Scott Oelslager (R - Canton)

*Status:* House Bill 451 has received five committee hearings in the House Insurance Committee. The committee recently heard additional proponent testimony on May 25, 2022.

*Analysis:* The bill prohibits a health benefit plan from requiring that physician-administered drugs be dispensed by a pharmacy or affiliated pharmacy (white-bagging), limiting coverage when such drugs are not dispensed by a pharmacy or affiliated pharmacy, or covering such drugs with higher cost-sharing if dispensed in a setting other than a pharmacy.

*Proponents:* Aultman Medical Group, Nationwide Children's Hospital, Ohio Hematology Oncology Society, UC Health, Cincinnati Children's Hospital Medical Center, Akron Children's Hospital, Cleveland Clinic, Ohio Hospital Association, Healthcare Distribution Alliance, MetroHealth, Ohio State University Cancer Center - James/Solove, the US Oncology Network, Ohio State Medical Association, National Infusion Center Association, and the Coalition of State Rheumatology Organizations

*Opponents:* Ohio Association of Health Plans, Ohio Association of Health Underwriters, Pharmaceutical Care Management Association, NFIB Ohio, Summa, Anthem, Cigna

*Interested Parties:* N/A

**House Bill 675** - Representative Bill Dean (R - Xenia)

*Status:* House Bill 675 has received two committee hearings in the Ohio House Insurance Committee.

*Analysis:* House Bill 675 removes several prohibitions regarding certain forms of solicitation of Medicare supplement policies.

*Proponents:* National Association of Insurance and Financial Advisors - Ohio

*Opponents:* N/A

*Interested Parties:* Ohio Association of Health Underwriters

**Senate Bill 261** - Senator Steve Huffman (R - Tipp City)

*Status:* Passed the Ohio Senate with a 26-5 floor vote on December 15, 2021 and has received three hearings in the Ohio House Government Oversight Committee.

*Analysis:* Expands the use of medical marijuana and also revises the laws governing the regulated cultivation of marijuana.

*Proponents:* Ohio Cannabis Industry Association, Gordon Bibart, LLC, Ohio Patient Network, Green Thumb Industries, Sensible Movement Coalition, Rivera Creek Holdings and NORML

*Opponents:* The Center for Christian Virtue, Prevention Action Alliance, Ohio Prosecuting Attorneys Association

*Interested Parties:* Wellspring Fields, Galenas, Ascension Biomedical, FireRock, Nationwide Children's Hospital, Pure Ohio, Mother Grows Best, OhIGrow, Ohio Clean Leaf, Highlands Venture Partners, and Klutch Cannabis

### Inactive Legislation

**House Bill 125** - Representatives Crossman (D - Parma) and Mary Lightbody (D - Westerville)

*Status:* House Bill 125 was introduced in February of 2021. The bill has received one committee hearing in the House Insurance Committee.

*Analysis:* House Bill 125 repeals outright suspended provisions that allowed health insurers to pass on the cost of reinsurance to certain high risk individuals. The bill also codifies into state law the federal Patient Protection and Affordable Care Act's (ACA's) limitations on premium charges. The bill also codifies into state law the ACA's ban of annual and lifetime limits, the ACA's ban on preexisting condition exclusions, the ACA's provisions requiring health plans to offer certain essential health benefits, the ACA's cost sharing limitations and the ACA's requirement that a health plan provide benefits that are actuarially equivalent to at least 60% of the full actuarial value of the benefits provided.

*Proponents:* N/A

*Opponents:* N/A

*Interested Parties:* N/A

**House Bill 153** - Representatives Beth Liston (D - Dublin) and Sara Carruthers (R - Hamilton)

*Status:* Pending in House Insurance Committee. The bill received its most recent hearing in June 2021.

*Analysis:* The bill prohibits health insurers from taking certain actions with respect to drugs during a health benefit plan year, including increasing cost-sharing, reducing coverage, and removing drugs from plan formularies.

*Proponents:* UC Health, Ohio Association of Rheumatology, Ohio Bleeding Disorders Council, American Diabetes Association, Ohio Dermatological Association, Ohio Hematology Oncology

Society, Ohio Psychiatric Physicians Association, National MS Society and the Ohio State Medical Association

*Opponents:* Ohio Chamber of Commerce, OhioNFIB, Ohio Association of Health Plans, Pharmaceutical Care Management Association

*Interested Parties:* None

**House Bill 160** - Representative Adam Holmes (R - Nashport)

*Status:* Pending in House Insurance Committee. The bill received sponsor testimony in March 2021.

*Analysis:* The bill makes revisions to Ohio's health care transparency laws including requirements that certain healthcare providers provide patients cost estimates for nonemergency healthcare products prior to the procedure. The bill specifies that it is the General Assembly's intent in enacting the bill's health care price transparency provisions to provide patients with the information they need to make informed choices regarding their health care, to maximize health care cost savings for all Ohio residents, and to reduce the burden of health care expenditures on government entities, including Medicaid.

*Proponents:* N/A

*Opponents:* N/A

*Interested Parties:* N/A

**Senate Bill 253** - Senators Teresa Fedor (D - Toledo) and Nickie Antonio (D - Lakewood)

*Status:* Senate Bill 253 was referred to the Senate Insurance Committee in October 2021. The bill has not received a hearing.

*Analysis:* Senate Bill 253 creates a single-payer health care system.

*Proponents:* N/A

*Opponents:* N/A

*Interested Parties:* N/A

**House Bill 305** - Representatives Beth Liston (D - Dublin) and Gayle Manning (R - North Ridgeville)

*Status:* House Bill 305 received sponsor testimony on October 12, 2021.

*Analysis:* House Bill 305 prohibits a health plan issuer from imposing cost-sharing on a prescription insulin drug in an amount that exceeds \$35 for a 30-day supply.

*Proponents:* N/A

*Opponents:* N/A

*Interested Parties:* N/A

**House Bill 336** - Representatives Scott Lipps (R - Franklin) and Thomas West (D - Canton)

*Status:* House Bill 336 is pending in House Insurance Committee. The bill has not received a hearing.

*Analysis:* House Bill 336 prohibits a health plan issuer from taking certain actions that would favor the issuer's affiliated pharmacies or would result in a covered person being required to use an affiliated pharmacy or restricted from using an unaffiliated but in-network pharmacy. The bill prohibits a health plan issuer from preventing a pharmacy from joining the issuer's network if the pharmacy agrees to reasonable terms of the issuer's pharmacy provider contract and is otherwise in compliance with the law. Additionally the bill prohibits a health plan issuer from requiring a pharmacy, as a condition for joining its network, to meet accreditation standards or certification requirements that are inconsistent with or in addition to those of the Board of Pharmacy.

*Proponents:* N/A

*Opponents:* N/A

*Interested Parties:* N/A

**Senate Bill 139** - Senator George Lang (R - West Chester)

*Status:* Senate Bill 139 is pending in Senate Insurance Committee and has not received a sponsor testimony.

*Analysis:* House Bill 139 expands the definition of groups eligible to be chartered as multiple employer welfare arrangements (MEWAs), and allows these entities greater flexibility to operate in the insurance marketplace. The bill increases the dollar amount of insurance policies written by MEWAs. Thus, the bill is likely to increase MEWA application and certification revenue to the Department of Insurance Operating Fund (Fund 5540), by perhaps up to a few thousand dollars per year. Notably, if the bill results in additional amounts of written insurance, it would indirectly affect receipts from the domestic and foreign insurance taxes.

*Proponents:* N/A

*Opponents:* N/A

**Senate Bill 220** - Senators Hearcel Craig (D - Columbus) and Nathan Manning (R - North Ridgeville)

*Status:* Senate Bill 220 received a second hearing on September 22, 2021 in the Senate Insurance Committee.

*Analysis:* Senate Bill 220 prohibits a health plan issuer from imposing cost-sharing on a prescription insulin drug in an amount that exceeds \$35 for a 30-day supply.

*Proponents:* Insulin Affordability, the American Diabetes Association, and AARP

*Opponents:* N/A

### Enacted Legislation

#### **House Bill 193** - Representatives Al Cutrona (R - Canfield) and Gail Pavliga (R - Atwater)

*Status:* The bill cleared the Ohio Senate with a 31-1 floor vote and a unanimous concurrence vote in the Ohio House on June 1. The bill is awaiting the Governor's signature.

*Analysis:* House Bill 193 limits pharmacist dispensing of schedule II controlled substances to those prescribed electronically, rather than in writing or electronically as under current law. The bill also establishes the requirement that a prescriber issue an electronic prescription when prescribing a schedule II controlled substance, but also allows for the issuance of a written prescription in specified circumstances. The Ohio Senate Health Committee accepted several amendments to the bill. An overview of these amendments can be found [here](#).

*Proponents:* Americans for Prosperity, Ohio Pharmacy Association and the Ohio Council of Retail Merchants

*Opponents:* None

*Interested Parties:* Ohio Dental Association, Ohio State Medical Association, Ohio Hospital Association and the American College of Emergency Physicians

#### **Senate Bill 236** - Senators Steve Wilson (R - Maineville) and George Lang (R - West Chester)

*Status:* Senate Bill 236 was unanimously approved by the Ohio House of Representatives and Ohio Senate. The bill is awaiting Governor DeWine's signature.

*Analysis:* Senate Bill 236 deems purchasing a policy of insurance through an online website or application to be consent to receiving communication related to the policy via electronic transmission.

The bill makes such communications subject to the requirements of the Insurance Automated Transaction Law. Additionally, the bill specifies that such consumers may request and receive all communication related to the policy via paper.

*Proponents:* Chubb Insurance

*Opponents:* N/A

*Interested Parties:* N/A

**Senate Bill 273/House Bill 530** - Senators Bob Hackett (R - London) and Jay Hottinger (R - Newark)  
Representative Brian Lampton (R- Fairborn)

*Status:* Senate Bill 273 and House Bill 530 are companion bills. Senate Bill 273 was passed unanimously by the House on June 1 and is awaiting Governor DeWine's signature.

*Analysis:* According to the bill sponsor, House Bill 530 is agreement between life and health insurance companies on both the national level and state level. House Bill 530 is model legislation from the National Association of Insurance Commissioners (NAIC) and has been passed by thirty four other states across the country. The bill expands the base of insurance companies who contribute to an assessment by including health insuring corporations, otherwise known as HMOs. The bill also broadens the assessment base in the event of a long-term care insolvency by splitting the assessment between life and health insurance companies.

*Proponents:* Aetna, Anthem Blue Cross Blue Shield, Coalition of Health Insurers, Ohio Chamber of Commerce

*Opponents:* N/A

*Interested Parties:* Ohio Life and Health Insurance Guaranty Association, Ohio Association of Health Plans, Ohio Association of Ohio Life Insurance Companies

**Senate Bill 21** - Senators Nathan Manning (R - North Ridgeville) and Nickie Antonio (D - Lakewood)

*Status:* Senate Bill 21 became law on September 21, 2021.

*Analysis:* Senate Bill 21 requires the State Board of Emergency Medical, Fire, and Transportation Services to develop guidelines for the assessment, triage, and transport to hospitals of stroke patients. The act directs each emergency medical service organization to base its stroke patient protocols, required by continuing law, on the State Board's guidelines. The law now requires the State Board to make available to the public copies of stroke patient protocols established by emergency medical service organizations. Additionally, the act requires each emergency medical service organization to provide to its emergency medical service personnel training in the assessment and treatment of stroke patients.

*Proponents:* Ohio Ambulance and Medical Transportation Association, Ohio Occupational Therapy Association, Cleveland Clinic, American Heart Association, and various private citizens

*Opponents:* N/A

*Interested Parties:* Ohio State University Wexner Medical Center



**Senate Bill 22** - Senators Terry Johnson (R - McDermott) and Robert McColley (R - Napoleon)

*Status:* Senate Bill 22 became state law on June 23, 2021.

*Analysis:* Senate Bill 22 establishes legislative oversight of the executive branch's executive orders related to certain public health orders and establishes the Ohio Health Oversight and Advisory Committee.

*Proponents:* Private citizens

*Opponents:* Various local health departments, the Ohio State Medical Association, the Ohio Department of Public Health, Premier Health, Summa Health, the Cleveland Clinic, the Ohio Chapter of American Academy of Pediatrics, University Hospitals, Ohio Mayors Alliance, Ohio Osteopathic Association,

*Interested Parties:* N/A

**House Bill 122** - Representatives Mark Fraizer (R - Newark) and Adam Holmes (R - Nashport)

*Status:* House Bill 122 became law on March 23, 2022.

*Analysis:* The Act expands existing law's provisions on telemedicine services (renamed as telehealth services) by applying them to psychologists and school psychologists; audiologists and speech-language pathologists; occupational therapists and physical therapists; occupational therapy assistants and physical therapist assistants; professional clinical counselors, independent social workers, and independent marriage and family therapists; independent chemical dependency counselors; certified Ohio behavior analysts; dietitians; optometrists with therapeutic prescriptive authority; pharmacists; chiropractors; respiratory care professionals; and genetic counselors. Prohibits a health benefit plan from imposing cost sharing for telehealth services that exceeds the cost sharing for comparable in-person services and prohibits cost sharing for communications that meet specified criteria.

*Proponents:* Americans for Prosperity, Ohio Academy of Nutrition and Dietetics, American Diabetes Association, American Heart Association, American Kidney Fund, Cleveland Clinic, March of Dimes, National MS Society, Ohio Physical Therapy Association, Ohio State Wexner Medical Center, UC Health, Ohio State Chiropractic Association, AARP, Buckeye Health, American Cancer Society Action Network, American Telemedicine Association

*Opponents:* Smile Direct Club, American Teledentistry Association

*Interested Parties:* Ohio Association of Health Plans, Buckeye Institute

**House Bill 37** - Representative Gayle Manning (R - North Ridgeville)

*Status:* Effective on June 1, 2022.

*Analysis:* The bill increases from one to three the number of times that a pharmacist may dispense without a prescription certain drugs to a specific patient within a 12-month period. Additionally, the bill requires a health insurer to cover prescription drugs dispensed under the bill if those drugs are already covered under the insurer's health benefit plan. Finally, the proposed legislation prohibits a health insurer from imposing on a drug dispensed in accordance with the bill's provisions a cost-sharing requirement that is greater than that imposed on a drug dispensed with a prescription.

*Senate Amendments:* The Senate Health Committee adopted an amendment that clarifies that a health plan issuer that covers a prescription drug under a health benefit plan must provide coverage for that drug if it is dispensed pursuant to the bill's emergency refill dispensing provisions (a pharmacist may dispense not more than three times in a 12-month period under the bill as passed by both the House and Senate).

*Proponents:* UC Health, Ohio Pharmacists Association, Ohio Council of Retail Merchants, Ohio State Medical Association, Ohio #insulin4all, American Diabetes Association, Be A Part of It Foundation, and dozens of private citizens

*Opponents:* None

*Interested Parties:* Pharmaceutical Care Management Association