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**Ohio Speech and Hearing GAC
Legislative Activities Report
March 2021**

Work continues on the DeWine Administration's proposed biennial budget bill (HB 110), which was introduced in February. The proposed legislation appropriates nearly \$75 million in GRF spending over the next two years. The budget proposal does not increase taxes and also does not borrow from the state's "rainy day" fund. Helping Ohio's financial situation was the federal government taking on an increased share of Medicaid spending. The increase in the Federal Medical Assistance Percentage has saved the state about \$300 million per quarter. While it is uncertain whether this assistance will be extended past 2021, it has allowed the state to redirect resources away from Medicaid to other programs. Debate on the measure has started in the House and they will be reviewing amendments throughout the month of March before making changes and sending it to the Senate in mid-to-late April. The Ohio Constitution requires the main operating budget to be signed by the governor by June 30th.

In her testimony, Ohio Department of Health (ODH) Director Stephanie McCloud said the budget, totaling \$1.2 billion in Fiscal Year (FY) 2022 and \$888 million in FY 2023, includes \$143.4 million in General Revenue Funds in FY 2022 and \$126.7 million in FY 2023. Priorities include programs to support children, such as expanding home visiting programs and initiatives to address infant mortality, particularly in the African American community. Efforts to eradicate lead poisoning include expanding the Lead-Safe Housing Fund statewide and providing tiered enforcement authority for lead abatement contractors. Efforts focused on health equity include steps to address the social determinants of health through local partnerships and expanded access to care in underserved communities through federally qualified health centers, she said. The budget also takes steps to rebuild the state's public health infrastructure, which the COVID-19

pandemic has shown to have been underfunded and neglected in recent years, she said. Also included in ODH's budget is funding for the "Mothers and Children Safety Net Services" fund. \$200,000 per year from that fund is to be used to assist families with hearing-impaired children under 21-years of age in purchasing hearing aids.

Hearings continue on HB 122, the Telehealth Expansion Act, introduced by Reps. Mark Fraizer and Adam Holmes. In their testimony, SmileDirectClub (SDC) asked the House Insurance Committee to amend the bill to include dentists in the list of health care professionals covered by the telehealth legislation. The witness said the legislation includes virtually every health care profession as a provider of telehealth in the state with the notable exception of dentists. The group recognizes that some traditional stakeholders would prefer that teledentistry continue to be narrowly defined as it currently stands in the Ohio Revised Code but said there are compelling public policy reasons to reject that approach. Rep. Fraizer asked if it would change the group's operating model if teledentistry remains out of the bill. SDC said they feel they should be treated the same as every other health care professional and questioned why they are not included. Fraizer noted that there are other healthcare groups not included in the bill in addition to dentists. HB 122 has received three hearings thus far in the House Insurance Committee. Last session, a similar measure (HB 679) was passed by the House by a vote of 91-3.

Governor DeWine said he will be vetoing a bill that would allow lawmakers to repeal health orders issued by the governor or the Ohio Department of Health. SB 22 would allow lawmakers to vote concurrently and overturn health orders soon after they are issued. The bill would also cap declarations of emergencies in Ohio to 90 days and would allow the legislature to peel back an emergency declaration after 30 days. SB 22 also creates a bicameral committee to review executive orders and states of emergency. DeWine said he feels the bill is unconstitutional. He said if it became law, it would grant the General Assembly the power to overturn and modify lawful actions by the executive branch by passing a concurrent resolution. He said this goes against Ohio's Constitution. DeWine said it would be irresponsible for him to do anything but veto the bill. SB 22 passed the House by a 57 to 35 vote, with almost all Republicans voting 'yes' and all Democrats voting 'no.' The legislation then passed the Senate by a 25-8 margin. Leaders in both chambers have signaled that they are confident that they have enough votes to override any veto by the governor.

The Ohio Speech and Hearing Professionals Board has appointed Steven Griffin, a speech-language pathologist from Delaware County to serve on the Ohio Dyslexia Committee, which was created in HB 436 from last session. HB 436, introduced by Rep. Brian Baldrige, aims to improve dyslexia screening, intervention and remediation within Ohio's schools. The

Ohio Dyslexia Committee is composed of experts in the field. The Committee is charged with establishing a guidebook for schools by December 31st, 2021. The Committee has yet to hold its initial meeting as other appointments are still being made.

Below is a list of legislation we are currently tracking during the 134th Ohio General Assembly:

HB1 CREATE NEW SCHOOL FINANCING SYSTEM (CALLENDER J, SWEENEY B) To create a new school financing system for fiscal year 2022 and each fiscal year thereafter.

Current Status: 3/1/2021 - House Finance Primary and Secondary Education Subcommittee, (Fourth Hearing)

HB13 MODIFY THE CAMPAIGN FINANCE LAW (GRENDALL D, FRAIZER M) To modify the campaign finance law and to declare an emergency.

Current Status: 2/4/2021 - Referred to Committee House Government Oversight

HB60 PERMIT MEDICAL MARIJUANA FOR AUTISM (BRENT J, SEITZ B) To authorize the use of medical marijuana for autism spectrum disorder.

Current Status: 2/9/2021 - House Health, (First Hearing)

HB90 OVERSIGHT OF GOVERNOR'S AND HEALTH ORDERS (WIGGAM S, EDWARDS J) To establish legislative oversight of the Governor's executive orders, certain public health orders, and emergency rules, including by establishing the Ohio Health Oversight and Advisory Committee.

Current Status: 2/24/2021 - **SUBSTITUTE BILL ACCEPTED**, House State and Local Government, (Third Hearing)

HB10 REGARDS ADOPTION/DURATION EMERGENCY RULES (MERRIN 3 D) Regarding the adoption and duration of emergency administrative rules.

Current Status: 2/24/2021 - House State and Local Government, (First Hearing)

HB11 OPERATING BUDGET (OELSLAGER S) To make operating appropriations for the
0 biennium beginning July 1, 2021, and ending June 30, 2023, to levy taxes, and to
provide authorization and conditions for the operation of state programs.

Current Status: 3/11/2021 - House Finance, (Seventh Hearing)

HB12 TELEHEALTH SERVICES (FRAIZER M, HOLMES A) To establish and modify
2 requirements regarding the provision of telehealth services.

Current Status: 3/10/2021 - House Insurance, (Third Hearing)

**HB12 HEALTH INSURANCE PREMIUMS/ BENEFITS (CROSSMAN J, LIGHTBODY
5 M)** Regarding health insurance premiums and benefits.

Current Status: 2/24/2021 - House Insurance, (First Hearing)

HB16 HEALTH CARE COST ESTIMATES (HOLMES A) Regarding the provision of
0 health care cost estimates.

Current Status: 3/10/2021 - House Insurance, (First Hearing)

HB20 VOID ORDERS REQUIRING FACIAL COVERINGS (POWELL J) To void the
2 order of the Interim Director of Health requiring the use of facial coverings throughout
the state and prohibit the Governor or other administrative department heads from
requiring the use of facial coverings without approval by the General Assembly.

Current Status: 3/10/2021 - Introduced

**HB20 REQUIRE OCCUPATIONAL LICENSE IF EXPERIENCED IN OTHER
3 STATE (POWELL J)** To require an occupational licensing authority to issue a license
or government certification to an applicant who holds a license, government
certification, or private certification or has satisfactory work experience in another state
under certain circumstances and to amend the version of section 3319.22 of the Revised
Code that is scheduled to take effect on April 12, 2023, to continue the changes on and
after that date.

Current Status: 3/10/2021 - Introduced

SB3 NURSE LICENSURE COMPACT (ROEGNER K) To enter into the Nurse Licensure Compact.

Current Status: 3/3/2021 - Referred to Committee House Health

SB5 PHYSICAL THERAPY LICENSURE COMPACT (ROEGNER K) To enter into the Physical Therapy Licensure Compact.

Current Status: 3/9/2021 - **REPORTED OUT**, House Health, (Second Hearing)

SB6 MEDICAL LICENSURE COMPACT (ROEGNER K, HUFFMAN S) To enter into the Interstate Medical Licensure Compact.

Current Status: 3/17/2021 - Senate Health, (Fourth Hearing)

SB7 OCCUPATIONAL THERAPY LICENSURE COMPACT (ROEGNER K) To enter into the Occupational Therapy Licensure Compact.

Current Status: 3/9/2021 - **REPORTED OUT AS AMENDED**, House Health, (Second Hearing)

SB9 REDUCE REGULATIONS (MCCOLLEY R, ROEGNER K) To require certain agencies to reduce the number of regulatory restrictions in their administrative rules.

Current Status: 3/10/2021 - **PASSED BY SENATE**; Vote 25-8

SB22 LEGISLATIVE OVERSIGHT-PUBLIC HEALTH ORDERS (JOHNSON T, MCCOLLEY R) To establish legislative oversight of orders issued by the executive branch, including by establishing the Ohio Health Oversight and Advisory Committee.

Current Status: 3/10/2021 - Consideration of House Amendments; Senate Does Concur, Vote 25-8

SB60 MEDICAID ESTATE RECOVERY-INFORMED CONSENT (SCHAFFER T) To require Medicaid applicants to certify that they have been notified about the Medicaid estate recovery program.

Current Status: 2/10/2021 - Referred to Committee Senate Health

