



135th General Assembly Bill Tracking—*March 2024*

Senate

Source: Ohio.gov **NEW INFORMATION IS HIGHLIGHTED in RED**

Bill No	Sponsor(s)	Summary	Status	Comments
SJR 2	Gavarone (R) McColley(R)	Increases percentage of votes needed to pass an initiated Constitutional Amendment to 60% from simple majority. Similar to HJR 1 but does not have the 88-county signature requirement nor does it eliminate the “cure period” for getting additional signatures if some of the signatures on the initially submitted petitions are declared invalid. Amended by committee to add the 88- county signature requirement & eliminated the cure period. These amendments would be effective 1/1/2024	Introduced 3/22/23 Referred to General Govt. Committee 3.23.23 Hearings underway. Reported out of Committee. Adopted by full Senate 26-7 4/19/23. Sen. Manning (R) joined D’s in opposing. Referred to House Constitutional Resolutions Comm 4/25/23. Hearings underway. Committee recommended approval and house passed 62-37 on 5/10/23.	Witness Mike Curtin called the August election for a single ballot issue unprecedented in Ohio history. Sponsor McColley countered by citing Ohio’s long history of August elections & said the election proposed by the bill is not a local government’s attempt to sneak in a levy when no one is looking. A Constitutional question will have plenty of publicity prior to the vote. Must be enacted by May 10, 2023, to make the August ballot. Whether it reaches a floor vote will depend on whether there are enough votes to approve. Must pass by a 60% margin. Resolution enacted with a provision that establishes an August election for the issue to come before voters. (See May 14 th OHRN legislative update for more information)
SB 1	Reineke (R) (10 co-sponsors, including	Revises education law & Dept of education duties. Gives governor authority to appoint state superintendent and more authority over the state’s education policy	Introduced 1/12/23 1/17/23 Referred to Sen. Ed. Comm. Hearings underway—proponent	Same as SB 178 considered by 134 th General Assembly minus the amendments added in lame duck. Education Committee expected to

	senate leadership)		& int. party. Passed Senate 3/1/23. Referred to House Economic & Workforce Dev. Comm. 3/14/23. 2 nd hearing proponent testimony 3/28/23. 3 rd hearing 4/2/23 opponent testimony	begin hearings in late January. Senate voted along party lines based on position that the bill is not a correction of problems but a revolution & still inadequate funding. Included in senate-passed version of the state budget (HB 33).
SB 9	S.Huffman, (R) & Schuring (R)	Creates the Medical Cannabis Oversight Committee & a new state agency. The Commission would oversee the agency housed in the Dept. of Commerce. Committee adopted substitute bill 4/18/23. Enables qualified physician to recommend medical marijuana for any debilitating condition, pharmacy board retains regulatory enforcement over dispensaries rather than Dept. of Commerce, but board not allowed to approve dispensary applications. The 13-member oversight committee becomes advisory only and a 7-member commission made up of government appointed individuals is established.	Introduced 1/12/23 1/17/23 Referred to Sen. General Govt Comm. Proponent. 4 th hearing 3/14. 6 th hearing 5/10/23. 7 th hearing scheduled.	Also in the mix is a recreational marijuana-initiated statute proposal. The legislature has until May 3 rd to pass a law based on a proposal backed by a group of medical marijuana licensees. If the General Assembly does nothing, the coalition can collect signatures to get it on the ballot. Opponents-Prosecuting attys assn. objected to having Dept of Commerce as regulating entity and concerned about allowing physician to recommend medical marijuana for essentially “any condition. 6 th hearing witness applauded expansion of the list of qualifying conditions but opposed “licensure handouts”.
SB 11	O’Brien (R)	Parent Educational Freedom act	Introduced 1/12/23. 1/17/23 Referred to Sen. Ed. Comm. Hearings underway. 3 rd hearing 3/7/23. No opponent testimony as yet	Also called the “backpack bill” that in part expands the educational voucher program many believe will take needed dollars from

				public education.
SB 28	Roegner (R)	Ratifies the PA licensure compact	1/23/23 Rereferred to Health Committee 2/8/23 Sponsor testimony 3/1/23 3 rd hearing 3/15/23. 2 nd hearing 3/8/23 proponents. 3 rd hearing 3/22/23. 4 th hearing 5/24/23. Committee unanimously favorably reported bill 6/14/23. Passed Senate unanimously 6/21/23. Introduced into House 6/22/23. Referred to House Health Provider Services Comm 6/26/23.	Would make Ohio a party to a physician assistant compact once the compact is ratified by a threshold number of 7 states. Proponents testified in late May that the PA compact will strengthen access to medical care and fill gaps created by the physician shortage, particularly in rural areas.
SB 34	Schaffer (R)	Designate July Sarcoma Awareness Month	Introduced 1/26. Referred to Health Comm 2/8/23 Testimony underway. Possible amendment 3/15/23. 2 nd hearing scheduled. Unanimously passed senate 5/17/23 & referred to house 5/22/23. Referred to House Public Health Policy Committee. House hearings 9/20/23 & 10/11/23. Reported	

			<p>out of committee unanimously 10/11/23. Passed House 11/15/23. (Voting “no” only Rep. Dean (R)) Senate concurred with House amendments. Effective 3/14/24.</p>	
SB 40	Roegner (R)	Enter Dentist/dental hygienist compact	<p>1/31/23 Referred to Health Comm 2/8/23. 2nd hearing 3/15/23 proponents; 3rd hearing 3/22/23 interested parties Unanimously approved by committee 5/31/23. Unanimously approved by senate 6/7/23. Introduced into House 6/13/23. Referred to House Health Provider Services Committee 6/20/23. 1st hearing 6/27/23. 2nd hearing 12/12/23. 3rd hearing 2/6/24 opp testimony.</p>	<p>Compact bills are proliferating across the country. If Ohio enacts the dental compact, it will be the first state to do so. The compact will not become operational until a threshold of 7 states enacts it. Opponent testimony came from dental hygienists who believe they are underrepresented in the compact. They support the compact, but cited the nurse licensure compact as an example of how the state can make certain changes in compact model language without interfering with the overall compact.</p>
SB 44	Brenner (R)	Requires occupational license agency to accept electronic applications	<p>Introduced 2/7/23 Referred to Govt. Oversight Comm 2/8/23. 2/22/23 sponsor testimony. 2nd hearing 2/28/23 proponents including Ohio Chamber of Commerce and NFIB-</p>	<p>Proponents, Ohio Chamber of Commerce b/c it reduces bureaucratic red tape</p>

			Ohio. 3 rd hearing 2/8/23, 4 th hearing 3/22/23. Unanimously approved by committee 5/31/23. Passed Senate 6/7/23. Introduced into House 6/13/23. Referred to House State & Local Govt. Comm 6.20/23.	
SB 51	Gavarone (R)	Creates Election Integrity Division in Secretary of State's (SOS) office	Introduced 2/7/23. Referred to Senate General Government Committee 2/8/23. Sponsor testimony 3/7/23	Sponsor explained that although the SOS office has an Integrity division, it serves many purposes. The bill deals solely with <u>election</u> integrity and codifies that aspect of the division's role so a future Secretary of State cannot eliminate it.
SB 57	N. Antonio (D) & N. Manning (R)	Designates May Stroke Awareness Month	Introduced 2/14/23. Referred to Health Comm. 2/22/23. Sponsor testimony 3/1/23 2 nd hearing 4/19/23.	Bipartisan sponsors
SB 59	Johnson (R) & Lang (R)	Prohibits sunlamp tanning services for anyone under age 18	Introduced 2/16. Referred to Health Comm 2/22/23 Hearings underway Sponsor testimony 3/29/23. 2 nd hearing proponent testimony 5/24/23. 3 rd hearing 6/13/23. Opponent testimony from American Sun	Proponents from various medical organizations told the committee indoor tanning increases a person's risk of skin cancer, especially for those who start before age 18. Enacting the bill would bring Ohio in line with nearly 24 states that prohibit the use of tanning beds by minors. A representative from the OSU Comprehensive Cancer Center-The

			Tanning Association.3 rd hearing 9/13/23.	James also testified saying the bill promotes the health and safety of children & reduces the future cost of health care. Opponents reported that 41% of all sunbed use occurs in non-salon sunbeds where there is no professional operator. The bill does nothing to affect this usage.
SB 60	Gavarone (R)	License certified mental health assistants (CMHAs) CMHAs would be licensed by the medical board and work under physician supervision & control. Have delegated Rx authority including some controlled substances. May not make an initial Dx or treat any condition not in DSM or engage in ECT. Must be 18 YO with a master's degree or higher from an education program approved by med. Bd. Or hold a diploma from an accredited medical or osteopathic school. Bill spearheaded by NE Oh. Med University to address Ohio's psychiatrist shortages	Introduced 2/16/23 Referred to Workforce & Higher Ed. Comm 2/22/23. Sponsor testimony 3/1/23. 2 nd hearing 3/15/23. 3 rd hearing 5/31/23. Amendment adopted. 4 th hearing 10/4/23. 6 th hearing 12/13/23. Bill remains in committee.	Companion bill in House HB 97. Bills included in Senate-passed version of budget bill (HB 33). Proponents include Ohio Chamber of Commerce, Inter-University Council, Latino Affairs Commission, Greater Akron Chamber of Commerce, & NE Ohio Medical University spearheaded the proposal. Opponents include OSMA (lack of specificity regarding educational requirements. State should strengthen providers we already have such as PAs & APRNs) Association of Physician Assistants (duplication of services already performed by PAs & APRNs. Who will supervise these new providers? Already a shortage of psychiatrists. Make Ohio more appealing to PAs by passing licensure compact). OSMA reiterated its opponent testimony & chamber and NEOMED again presented proponent testimony.

SB 61	Craig (D) & Manning (R)	Cost sharing for prescription insulin drug	Introduced 2/16/23 Referred to Health Comm 2/22/23 Sponsor testimony 3/8/23	Bipartisan sponsors Requires cost sharing in an amount exceeding \$35/month for cost of insulin. 22 states & DC have similar laws
SB 69	Antonio (D & Craig (D)	Designate Ohio Doula Awareness Week in a week that includes March 22 nd .	Introduced 2/22/23 Referred to Senate Health Comm 3/1/23	
SB 71	Gavarone (R)	Establishes the Data analysis transparency archive (DATA) in Secretary of State's Office	Introduced 2/22/23. Referred to General Government Committee 3/1/23. 1 st hearing 3/7/23. 2 nd hearing 3/14/23. Committee reported bill and senate approved 5/17/23. Both actions along party lines. Introduced into house 5/22/23. Referred to House Government Oversight Committee 5/23/23. 1 st hearing in House Committee 6/6/23, sponsor testimony. 2 nd hearing 6/13/23.	Per sponsor testimony, the bill sets forth consistent, standard election data definitions and requires data be retained, disclosed, analyzed, & archived in a modern way. Ohio is one of a few states with "bottom-up" election administration—all 88 county boards of election administer elections & are the only source of election date. Ohio will continue its decentralized approach, but there will be consistency in data definitions and expectations to facilitate accurate data analysis. The SOS would retain voter registration & other data that it would publish for the public. Suggested changes from the Ohio Association of Election Officials, many of which were technical, were not included in the senate-passed bill. House also reluctant to include changes requested by election boards' official although committee urged the Secretary of State's witness to

				listen to their concerns. Bill amended into senate-passed version of state budget (HB 33).
SB 81	Romanchuk (R)	Authorizes APRNs to admit & discharge patients and sign patient treatment documents when collaborating physician is authorized to do so at a particular institution. Pursuant to standard care agreement an APRN can also supervise home health services. Bill allows more efficient patient discharge by eliminating the delay in obtaining a physician's signature on paperwork thus freeing up a bed more quickly for another patient.	Introduced 3/7/23. Referred to Senate Health 3/8/23. 1 st hearing 9/20/23. Proponent testimony 9/27/23. Opponent testimony scheduled 10/11/23. No testimony offered. Sub bill offered 11/15/23. AARP testified in support of sub bill. Committee recommended sub bill unanimously. Passed Senate 11/15/23. Sen. Antani (R) only no vote. Introduced into House 11/16/23. Referred to House Health Provider Services Committee 11/28/23. 1 st hearing 12/5.23 Sponsor testimony. 2 nd hearing 2/6/24. Proponents included Ohio Association of PAs who testified about APRN/PA parity, compared PAs to APRNs and indicated the organization would be happy to work with the	APRNs have been seeking this authority for several sessions of the GA. Representative of Acadia Health Care assured the committee that the bill only expands the signature authority of APRNs & PAs and does not affect ongoing collaborative agreements. Committee chair Sen Steven Huffman was reassured physicians maintain ultimate authority to determine the parameters of those agreements. The witness also assured Sen. Nickie Antonio the documents are flexible & can change based on APRN's experience. Sub bill contains significant changes. The bill added PAs and limited APRNs activities with respect to the authorized practices addressed in the bill. Per the sub bill, APRNs may perform the authorized practices only in behavioral health facilities because of the urgent need to eliminate barriers to mental health services. Originally the bill applied to hospitals in general. Sponsor's testimony said the same limits applied to PAs & APRNs but

			committee on additional amendments providing “appropriate” parity among advanced practice providers.	language in the bill is not clear in that regard. When Rep. Jennifer Gross (R) an APRN & member of the house committee asked Sen Romanchuk about the discrepancy, he noted that it was because he believed PAs’ training is “slightly higher” than APRNs’. When asked if he would consider parity between APRNs and PAs he said he would “think about it.”.
SB 83	Cirino (R)	Ohio Higher Education Enhancement Act	<p>Introduced 3/14/23. Referred to committee 3/15. Hearing scheduled for 3/22/23. Sponsor is chair of the committee 3/29/23 proponent testimony.</p> <p>In a marathon 3rd hearing on 4/19/23. 8 individuals testified as proponents, 15 as interested parties and hundreds were opposed. 4th hearing scheduled 5/9/23.</p> <p>Committee recommended sub bill 5/17/23 (4-1 party line vote). Passed senate 5/17/23 (21-10 with three Rs voting “no” Blessing, Reynolds, & Manning). Introduced in</p>	<p>Seen as the latest version of a national trend by republicans to rein in what some see as “woke” ideologies in state funded colleges & universities. Sponsor calls it a “course correction” that includes provisions on collective bargaining, trustee training, faculty requirements, Chinese involvement, syllabus mandates & more, based on conversations with constituents re: free speech restrictions and grading concerns. Companion bill HB 151</p> <p>Senate president Matt Huffman called the bill a “big priority” but it is not clear when it will be moved out of committee. Some provisions in the bill may be inserted into the state budget (HB 33).</p> <p>When asked about the number of opponents, the sponsor</p>

			<p>house 5/22/23. Referred to Higher Education Committee 5/23/23. Amended into Senate-passed version of state budget bill (HB 33). Bill deleted from budget so the House will begin its hearings. Bill slated for sponsor testimony 11/1/23. Possible sub bill. 12/6/23 Sub bill accepted & committee voted (8-7) to move the bill to the full house.</p> <p>Rules & Reference Committee re-referred 1/3/24</p>	<p>responded, "Well, I guess some people might be disenchanted with it, but I don't get bullied very easily." He plans to modify some of the language that he described as minor changes while witnesses said the bill is beyond amendment. (See May 14th OHRN Legislative Update for more information) 100 people submitted written testimony. Floor speeches noted Ohio's 14 public universities generated \$68.9 billion for the state's economy, 8.8% of the state's gross state product. (Light Cast Independent consulting firm on behalf of the University Council of Ohio). Sponsor not concerned about brain drain. "Universities are going to be better, going to attract more people who have been turned away because of the liberal bias that is incontrovertible in the institutions in Ohio." OSU Board of Trustees issued a rare joint statement that opposed the bill. Sponsor says he has a substitute version of the bill that addresses some of the opponents' concerns. Faculty would still be forbidden to strike although other employees would not be. Reps Paviliga (R-Atwater) & Pizzulli (R-Furnace) voted with the</p>
--	--	--	---	---

				committee's D's. Rep Gayle Manning (R) provided the deciding vote "yes" because, as she explained, the sponsor agreed to drop the non-strike provisions & revised the collective bargaining language. Despite committee approval the bill was not scheduled for action by the full house before the holiday break. House Speaker Jason Stephens contends the votes are not there in the house, but senate president Matt Huffman disagrees.
SB 86	Brenner (R)	Regarding surgical smoke. Per bill's sponsor, protecting health care workers from the dangers of surgical smoke, requires utilization of equipment designed to capture and eliminate smoke at the point of origin before it makes contact with eyes and the respiratory tract. Bill requires hospitals to adopt and implement a policy designed to prevent human exposure to surgical smoke.	Introduced 3/21/23 Referred to Senate health committee 3/23/23. Sponsor testimony 3/29/23. 2 nd hearing proponent testimony 4/19/23. Survived Conference Committee & signed by Gov as part of budget bill 7/4/23.	Companion bill HB 104. Surgical nurse Kay Ball PhD RN (& OHRN member) testified in support. Her testimony cited her research findings that nurses working in surgery have 2X the incidence of respiratory problems compared to the general public. Bill 's language included as an amendment to the House-passed budget bill (HB 33). Bill ultimately amended into Senate-passed version of the state budget bill (HB 33).
SB 90	Roegner (R)	Enter social worker compact	Introduced 3/22/23. 1 st hearing set for 5/2/23. Bill reported out of committee 6/6/23 & approved unanimously by full senate 6/28/23. Introduced into House	

			6/29/23 Referred to Commerce & Labor Committee 9/12/23. 1 st hearing 10/3/23. Unanimously reported out of committee 1/9/24.	
SB 92	McColley (R) Gavarone (R)	Allow a special election held in August to submit to voters a statewide Constitutional ballot issue. Includes \$15 million appropriation to cover election costs. Now mirrors HB 144.	Introduced 3/22/23. Sponsor testimony 3/28/23. Proponent 3/29/23 Amended 4/18/23. Passed by Senate 4/19/23. Introduced in House 4/20/23. Referred to House Government Oversight Committee 4/25/23. 3 rd hearing set for 5/2/23.	Part of the plan to get HJR 1 or SJR 2 before voters so the 60% vote margin for approval of Constitutional amendments would apply to the November election when citizen-initiated issues are expected to be on the ballot. Secretary of State said county boards of election need extra money to fund a special election and at least 100 days' notice to "prevent a mess." Companion bill in House (HB 144). Must pass by May 10 th to provide enough time for boards of election to prepare for the election.
SB 93	Reynolds (R) Hicks-Hudson (D)	Establishes doula regulation under Board of Nursing. Defines doula services and directs board to establish training and experiential requirements	Introduced 3/23/23. Referred to Senate Health Committee 3/29/23.	
SB 95	Reynolds (R)	Authorizes operation of remote dispensing pharmacies. Some parties urged removal of the milage restrictions. Pharmacy Board wants them retained. Can be located within 10 miles of existing services only if it is part of a FQHC, or location is due to need, based on standards adopted by Pharmacy Board. Interested parties	Introduced 3/23/23. Referred to Senate Health Committee 3/29/23. 1st hearing sponsor testimony 4/19/23. 2 nd hearing proponent testimony	A remote dispensing pharmacy is where drugs are dispensed, patients are counseled, and other pharmacist care provided through a tele- pharmacy system. Companion bill HB 136.

		are also concerned about recommendations to remove the average number of prescriptions that may be dispensed due to pharmacy staffing shortages & resultant patient safety concerns.	5/24/23. 4 th hearing 6/14/23.	Ohio Chamber of Commerce testified in support saying remote pharmacies would give Ohioans greater access & help address health disparities. Cardinal Health's Dr. Maimuna Bruce told the committee "telepharmacy is a proven model with over 20 years of providing safe & effective care. 28 other states permit this model."
SB 106	Schaffer (R)	Authorizes workers comp coverage when certain medical professionals are exposed to chemical substances or bodily fluids in course of employment. Adds RNs staffing a rotorcraft or fixed wing air ambulance to the definition of emergency medical workers for purposes of workers' comp coverage.	Introduced 4/11/23. Referred to Insurance Committee 4/19/23. Second hearing 5/10/23. Proponent testimony. 5/17/23 3 rd hearing. 9/12/23 4 th hearing. 9/13/23 Committee reported sub bill 9/13/23. Passed senate unanimously 9/13/23. Referred to House Insurance Committee 9/26/23. 1st hearing, sponsor testimony 10/11/23. 2 nd hearing, proponent testimony possible amendments 11/1/23. Committee accepted amendments 12/6/23. Fourth hearing 2/7/24. Proponents included Ohio Chamber	ONA and a registered nurse testified as proponents. Interestingly, for purposes of workers comp coverage, nurses and physicians are not included in the definition of "first responders" in the Revised Code; only peace officers, fire fighters, EMTs, & correctional officers; although rotorcraft and fixed wing craft are required to be staffed by either a nurse or physician.

			of Commerce & NFIB. Committee reported amended bill. Passed full house unanimously 2/7/24.	
SB 109	Hackett (R)	Regarding Medical Board’s handling of the Richard Strauss matter. Bill a result of the study committee findings. Updates the criminal code to increase accountability of medical professional and gives more protection to the public	Introduced 4/18/23. Referred to Judiciary Committee 4/18/23. 1 st hearing sponsor testimony 4/26/23.	Sponsor Hackett is meeting with Senate leadership to get the bill moving.
SB 126	Johnson (R)	Use of non-compete provisions in health care providers’ employment contracts. At conclusion of employment the non-compete clause, if any, can only require employee to refrain for a period, not to exceed 6 months, from obtaining employment within a radius of 15 miles of the physical location where the employee was employed. Employer must identify one specific location within the 15 miles. Includes APRNs, PAs, and physicians.	Introduced 5/31/23. Referred to Senate Health Committee 6/7/23. Scheduled for a hearing but not heard. 9/27/23 Rescheduled 10/11/23. 3 rd hearing 1/24.24—opp testimony	Sponsor characterized non-compete agreements as anti-free enterprise. “They impede an individual’s ability to earn a living as he/she chooses.” Several states have enacted similar laws. Helps with recruitment & retention. When asked why bill applies only to non-profit hospitals systems, sponsor said it was because they have a huge advantage over private hospitals. Opponents included OHA & Premier Physician Network. The latter said it prefers to use noncompete clauses to insure a strong workforce that support patients.
SB 137	Gavarone (R) DeMora (D)	Prohibits use of rank order voting & withholds Local Govt. Fund distribution from a municipality or chartered county that uses rank choice voting.	Introduced 7/20/23 Referred to Senate General Govt Comm 9/13/23	

SB 144	Romanchuk (R)	Allows pharmacy techs to administer immunizations to children 5 YO and older	Introduced 8/28/23. Referred to Senate Health Committee 9/13/23. Hearing scheduled 9/20/23. 2 nd hearing scheduled 10/11/23. Eleven individuals/organizations provided testimony. Opponent testimony 11/15/23 from Ohio State Medical Association & Ohio Chapter of the American Academy of Pediatrics both expressing concern that children will forego well child visits by being able to receive their vaccinations without a well child visit. The bill is intended to address access issues but lagging vaccine compliance is not due to lack of access they argued.	Language was originally in the budget (HB 33) but deleted from final version. Proponents included the Ohio Pharmacists Association (Dave Burke) who noted pharm techs began administering vaccines per DHHHS in 2020. Bill is voluntary; pharmacies are not required to use techs in this capacity. Others said bill would help alleviate staffing concerns. Ohio Council of Retail Merchants & the Ohio Chamber of Commerce also appeared as proponents.
SB 147	Reynolds (R)	Permits voters to change party affiliation through voter registration process. Sets out bases for determining what constitutes “party affiliation”.	Introduced 9/5. Referred to Senate General Govt. Comm 9/13/23. 1 st hearing 9/26/23. 2 nd hearing 10/10/23.	
SB 177	DeMora (D) Hicks-Hudson (D)	Authorizes establishment & operation of the Ohio Health Care Plan to provide universal healthcare coverage.	Introduced 10/17/23. Referred to Senate	

			Health Committee 11/15/23.	
SB 196	Roegner (R)	Establishes global signature authority for APRNs	Introduced 11/27/23. Referred to Senate Health Committee 12/6/23. Sponsor testimony 2/28/24. Committee accepted substitute bill.	
SB 216	Lang (R) S. Huffman (R)	Phases out state income tax on non-business income over 6 years and repeals the Commercial Activity Tax in 2029. Similar but not identical to HB 386. See ANA-Ohio Legislative Update March 4, 2024, for additional information.)	Introduced 1/23/24. Referred 1/24/24 to Senate Ways & Means Committee.	

135th General Assembly Bill Tracking—As of March 2024
House

Bill No	Sponsor(s)	Summary	Status	Comments
HB 2	Cutrona (R) & Upchurch (D)	Provides \$2 billion investment in commerce, educational, and infrastructure projects. \$350 million covers 318 transformational projects using one- time money that resulted from Ohio’s strong economic health & leadership’s stewardship of state dollars”. Committee accepted sub bill that reflected local priority projects identified by house members in late 2023.	Introduced 2/15/23. Referred to Finance Committee 2/16/23. Reported out of committee 2/7/24. Passed House 2/7/24. Voting “no” were R’s Bird, Click, Dean, Fowler-Arthur, Johns, King, Lipps, McClain, Stewart, Willis, Claggett, Creech, Ferguson,	Committee held one hearing 2/6/24 with the only witness being bill sponsor, Cutrona. This bill has become a flashpoint for the infighting among the Rs and specifically Senate President Matt Huffman and House Speaker Jason Stephens.

			Gross, Kick, Lear, Manchester, Santucci, & Stolfus.	
HJR 1	B. Stewart (R)	Increases percentage of votes needed to pass an initiated Constitutional Amendment to 60% from simple majority and adds other requirements for petitioners. Changed reference to a May primary in the original resolution to August assuming bill allowing this matter to be considered in August election (HB 144/SB 92) is enacted.	Introduced 2/15. Referred to Constitutional Resolutions Comm 2/16/23. First hearing held 3/23/23 Sponsor Testimony 2 nd hearing 4/18/23, 3 rd hearing 4/19/23 & recommended for approval by committee 7-6 with one R (Hillyer) joining D's to oppose.	Mimics HJR 6 from 134 th GA except for petition gathering requirements that are more stringent than current law. 33 co-sponsors—The Merrin Team. Hearing contentious but tightly controlled by committee chair Rep. Scott Wiggam (R-Wooster). Only testimony was from sponsor, but opponents were out in force. Future testimony is by “invitation only” which has not gone over well with opponents. Slow pace of the committee led Rep Susan Manchester (R-Waynesfield) to obtain a discharge petition and begin gathering signatures to immediately move the resolution out of committee & onto the House floor for a vote. Requires 50 of the 65 republicans to sign. Speaker Stephens replaced Wiggam as committee chair. New chair is Rep. Phil Plummer (R-Dayton)
HJR 3	McClain (R) Willis (R)	Application to Congress for a Convention of States solely to impose fiscal restraints in the federal govt., limit powers of the federal govt., and establish term limits for govt. officials and members of Congress. (See March 4, 2024	Introduced 7/11/23. Referred to House Govt. Oversight Committee 9/11/23. First hearing, sponsor	Resolution has 21 co-sponsors 64 witnesses provided proponent testimony

		ANA-Ohio Legislative Update for more information)	testimony 11/14/23. 2 nd hearing 2/6/24 Pro. testimony.	
HJR 4	Wiggam (R)	Proposes adoption of an Ohio Constitutional Amendment that prohibits individuals from being compelled to wear a mask or other facial covering in a place of public accommodation.	Introduced 9/26/23. Referred to Public Health Policy Committee 10/3/23. First hearing 11/1/23.	Bill has 30 cosponsors. Broadly defines “place of public accommodation” and notable includes the professional office of a health care provider, publicly accessible areas of a hospital, childcare centers, pharmacy, senior citizen centers, all schools public or private, homeless shelters and many many more.
HR 56	Skindell (R)	Calls on legislators at state and federal levels to support an amendment to the U.S. Constitution that would abolish corporate personhood and the doctrine of money as speech.	Introduced and referred to House Government Oversight Committee 3/28/23. Sponsor testimony 5/16/23	
HB 6	J Powell (R)	“Save Women’s Sports Act” Requires schools & colleges to designate single sex teams and sports for each sex	Introduced 2/15 referred to Higher Ed Comm 2/16/23 Testimony underway 3/8/23. 2 nd hearing 3/29/23 proponent testimony. 3 rd hearing 4/19/23 opponent testimony Committee voted on 5/10/23 to advance the bill to the full house Rep. Gayle Manning joined Ds in	Similar to legislation that did not pass in 134 th GA. Sponsor characterized bill as a” fairness issue to “preserve the integrity of women’s sports”. Amended into HB 68 by Public Health Policy Committee 6/14/23. Amended HB 68 passed house 6/21/23

			voting “no”, 8-6 final committee vote	
HB 7	White (R) & Humphrey (D)	“Strong Foundations Act” addresses maternal and infant mortality to improve health & development outcomes. Bill expands early head start programs, provides grants to incentivize enhanced childcare partnership programs, Leverages federal dollars to expand access to evidence-based home visit and parental support programs to include not only low birth weight infants but also infants with other complications, and continues Medicaid coverage for children 3 and under. Expresses GA’s intent to support strong foundations for mothers and babies to address infant mortality & improve developmental outcomes. Bill is called the Strong Foundations Act. Focus is on the first 1000 days of life.	Introduced 2/15 Referred to Families & Aging Comm 2/16/23. Sponsor testimony 4/25/23. Ohio is one of the 5 worst states with respect to infant mortality 2 nd hearing slated for 5/2/23. Reported sub bill. 6/7/23. Referred to House and Rules & Reference & re-referred to House Finance 6/13/23. First hearing 9/26/23. 2 nd hearing 10/4/23.	Bipartisan sponsors. Likely to become a vehicle for language that regulates doulas under the Board of Nursing. This was considered in the 134 th GA but not enacted. Senate also will have a similar bill with bipartisan sponsorship. (SB 93) Rep. Somani noted that the bill does nothing to address the problem that many Ohio counties lack OB/GYN professionals which she attributed to Ohio’s restrictions on abortion services. Sponsors expect to submit sub bill. A scaled-back version of the proposal was included in the final version of the budget bill (HB33). The sub bill will seek additional money which some committee members describe as a very heavy lift.
HB 8	Swearingen (R) Carruthers (R)	Parents Bill of Rights Ohio public school districts create policies that require parental notification of sexually explicit content. Amended in committee to replace sexually explicit content to “sexuality content”. Requires schools to inform parents of changes to a student’s health & well-being including any request by a student to identify as a gender	Introduced 2/15/23. Referred to Primary & Secondary Ed Comm 2/16. Committee held 6 hearings and recommended approval 6/14/23 on a party line vote.	Four proponent witnesses, 38 opposition witnesses including the School Counselors Association, National Assn of Social Workers-Ohio Chapter, OEA, & Children’s Defense Fund. “Sexuality content” is defined

		that does not align with the student’s biological sex.	House approved 65-29 6/21/23. Callender (R-Concord) only R voting “no”.	as any oral or written instruction, presentation, image, or de2scription of sexual concepts or gender ideology.” Lessons on diseases spread through sex, child sexual abuse, and sexual violence prevention are exempt.
HB 15	Gross (R) Lear(R)	Revised informed consent before abortion— requires physician who is to perform the abortion to set up ultrasound equipment so ultrasound images are visible to the woman and heartbeat sounds can be heard. The physician must also explain what the woman is seeing and hearing.	Introduced 2/15/23. Referred to House Public Health Policy Committee 2/16/23.	
HB 22	Schmidt (R) & Hall (R)	Requires collection of stroke care data & recognition of thrombectomy capable stroke ctrs	Introduced 2/15 Referred to Health Providers Services Comm 2/16/23 Hearings to begin 3/7/23. 2 nd hearing 3/14/23. Committee reported amended bill 3/22/23. Awaiting full House vote. House passed.3/29/23. Only “no” vote Rep. Scott Wiggam (R-Wooster) Referred to Senate Health Committee 4/19/23.	Proponents making a push to remind legislators not to run out of time to pass this like they did in 134 th GA. This was included in one omnibus amendment to the budget bill. Not part of the bill the senate passed. Was included in final version of the budget.

HB 24	White (R)	Require health plans & Medicaid to cover biomarker testing	Introduced 2/15 Referred to Insurance Committee 2/16/23 Testimony underway 3/15/23. 2 nd hearing 3/29/23. Proponent testimony—OSMA a proponent witness. 3 rd hearing scheduled for 5/3/23. Bill deleted from Committee schedule	Bipartisan co-sponsors include physicians Liston & Somani both D's. Less than 50% of patients with cancer are tested for biomarkers. Barriers include lack of physician knowledge, inadequate tumor material from the biopsy to do the test, and variability in insurance coverage & reimbursement.
HB 28	Humphrey (D)	Designate March as triple Neg Breast Cancer Awareness Month	Introduced 2/15 Referred to Public Health Policy committee 2/16/23. 1 st hearing sponsor testimony 4/19/23 After 2 nd hearing committee unanimously agreed to favorably report the bill out of committee.4/26/23. Passed house 87-1 (Dean opposed) 5/24/23. Introduced in senate 5/30/23. Referred to Senate Health Committee 5/31/23.	
HB 33	Edwards (R)	State budget bill	Introduced 2/15/23 Not yet officially	Establishes operation appropriations for FYs 24 & 25

			<p>referred to a standing comm. but hearings have begun in Finance Comm and in Finance subcommittees. Subcommittees will finish work and committee hearings will be held the weeks of March 27th and April 3rd at which time the 1st round of amendments are due. After spring break (April 10-14) the House will finalize its budget work during the last 2 weeks in April. House Finance Committee accepted substitute bill 4/17/23 and conducted hearings with the goal being to have the bill on the House floor by the last week of April. Committee favorably recommended amended sub bill and House approved</p>	<p>Must be enacted by July 1st Bill is already over 1,000 pages & will include multiple policy issues, eliminate some existing programs and establish new and modified ones. Bill is now over 5300 pages and will receive extensive amendments and possibly another substitute version will be accepted before the bill moves to the full House. Once on the floor of the House, more amendments will be considered and added on House floor before being referred to the Senate. Senate has already begun holding preliminary hearings. Bipartisan approval in House. Voting “no” were the following— Republicans: Claggett, Gross, Dean, Kick, Lear, McClain, Stoltzfus, Willis, Manchester, Merrin, Arthur, King, Creech, Ferguson, John, Powell, Wiggam. Democrats voting “no” J. Miller III and Forham. Senate has completed its informal hearings and the reports from those hearings will be presented to the Finance Committee in mid-May.(See May 14th OHRN Legislative Update for more information).</p>
--	--	--	--	--

			4/26/23 (78-19.) Introduced into senate 4/27/23 & referred to finance committee 5/4/23. Finance committee reported sub bill 6/14 on 9-3 party line vote. Passed senate 24-7 on party line vote 6/15. (Not voting Schuring & Antani). Conference Committee report adopted 6/30/23. Signed by Gov 7/4/23.	May 17 th was deadline for amendments. Expect to see omnibus amendment the week of May 29 th . (See June 10 and June 17, and July 17 th updates on ANA-Ohio website).
HB 36	Miranda (D)	Makes additions to medical identifying devices law	Introduced 2/15 Referred to Health Provider Services Committee 2/16/23	
HB 47	R. Brown (D) Bird (R)	Requires AEDs in schools. Under current law schools are encouraged but not required to have an AED on site & to implement an emergency action plan. Also requires controlling authorities of municipal sports & recreation locations to place AEDs in each site under their control.	Introduced 2/15 Referred to Health Provider Services Committee 2/16/23. Hearings to begin 3/7/23 Sponsor testimony. Committee favorably reported the bill with no witnesses coming forward during the final committee hearing 4/26/23.	Applies to all schools including charter nonpublic schools and at sports and recreation locations that are municipally owned or operated where sporting events occur. 20 proponents testified in support, and 1 opponent whose concern was based on cost, calling it an unfunded mandate. In testimony before Senate Health Committee sponsor said over 90% of schools have

			<p>Passed house 6/14/23 84-6 (Voting “no”: Brennan, Ferguson, King, Lear, Wiggam, Gross, Klopfenstein, & Powell. Introduced in Senate 6/16/23. Referred to Senate Health Comm 6/21/23. 1st hearing scheduled 10/11/23 sponsor testimony. 2nd hearing 12/6/23. Over 40 witnesses testified in support. One asked that the bill be amended to apply to all fitness spaces.</p>	<p>purchased AEDs. Committee chair asked if the bill creates a barrier to people wanting to be coaches.</p>
HB 49	Ferguson (R) & Barhorst (R)	<p>Requires hospitals to make price information available to the public. Those that don’t could not hire debt collectors or utilize the court system or file credit reports against patients with outstanding medical bills</p>	<p>Introduced 2/15 referred to Insurance Committee 2/16/23. Testimony underway 2nd hearing- proponents 3/15/23. 3rd hearing 3/22/23, no witnesses. 4th hearing 3/39/23— opponents OHA and Children’s hospitals association. Bill favorably reported 3/29/23. Passed</p>	<p>28 co-sponsors—primarily Merrick supporters. Includes gross & payor negotiated charges and discounted cash prices. All standard charges must be made available digitally and “shoppable” service charges must be available in a “consumer friendly” list. “No” votes R’s Cutrona (Canfield), Patton (Strongsville), Robb Blasdel (Columbiana), Manning (N. Ridgeville), & Pavliga (Portage County).</p>

			<p>house 90-5 6/27. Introduced in senate 9/12/23 Referred to Senate Small Business & Economic Development Opportunity Committee 9/13/23. First hearing 9/26/23.</p>	<p>Supporters told senate committee the bill adds state oversight because federal enforcement has been lax. Much of the proponent testimony came from advocacy groups that have backed similar legislation in other states. Ohio hospital association did not testify in opposition but submitted opponent commentary & disputed claims of non-compliance. Also said Ohio's bill goes beyond federal regulations.</p>
HB 68	Click (R) (39 cosponsors)	SAFE Act—Physicians shall not perform gender reassignment surgery on a minor or prescribe cross-sex hormone blocking Rx for a minor for the purpose of assisting the minor with gender transition. Mental health prof cannot dx or treat a minor who presents with gender-related condition without consent of legal custodian or minor's guardian	<p>Introduced 2/27/23 Referred to House Public Health Policy Comm 2/28/23. 1st hearing sponsor testimony 4/19/23. 2nd hearing proponent testimony 4/25/23. 19 witnesses including the Catholic Conference of Ohio & Ohio Values Voters and individuals who described their experiences as teens & as parents regarding gender confusion.</p>	<p>The final proponent witness on 4/25, Stuart Long was not an invited witness, but committee chair Scott Lipps permitted him to testify. Eventually Lipps politely asked Long to take a seat. The witness warned members that "demons are influencing people allowing their bodies to run Satan's agenda. When committee member Rep. Beth Liston asked if he was referring to non-Christian members of the GA as demons, he responded he was not calling them demons, just bringing up the fact that they might be possessed.</p>

			<p>3rd hearing-opponent testimony 5/24/23. Over 200 individuals testified in opposition and several health care organizations including OSMA, OPA, Ohio Children’s Hospitals and individual institutions such as Cleveland Clinic, Cincinnati Children’s & Nationwide Children’s. Committee recommended approval 6/14/23 by a 7-6 vote. No votes from D’s Abdullahi, Baker, Grim, Skindell (who temporarily replaced Somani on this committee), Liston, & (R)White. House passed 64-28 on 6/21/23. R’s voting “no” Hillyer (Urichsville) & Callender (Concord). Introduced in Senate 9/12/23. Referred to Senate Govt.</p>	<p>Some opponents characterized the bill as taking away parents’ rights and turning them over to the state. Self-identified republican & lobbyist, Rick Colby, who has a transgender son said, “Banning all medical intervention for any individual under 18 with gender dysphoria... will most likely result in suicides, depression, and substance abuse.” Committee amended HB 6 (Save Women’s Sports Act) into the version recommended to the full house. For more information on bill see June 17 & July 17th Update on ANA-Ohio website. House vote to override along party lines. Bill will now go to the Senate where an override is likely. In a floor speech supporting the veto, Rep. Beth Lear’s (R-Galena) remarks likening transchildren to birds were front page news in the Columbus Dispatch. The final version of the bill includes a provision that allows minors who are already undergoing medical care to continue their treatment.</p>
--	--	--	---	---

			<p>Oversight Committee 9/13/23. 1st hearing 11/15/23 sponsor testimony. 2nd hearing 11/28/23. 3rd hearing 12/6/23. 12/13/23, bill reported out of committee on party line vote, senate passed on party line vote, house concurred with senate changes on party line vote. Sent to governor 12/18/23. Gov. vetoed 12/29/23. Veto overridden by House 1/10/24.</p>	
HB 73	Gross (R) & Loychik (R)	<p>Authorizes the prescribing of off-label drugs & if prescribed requires their dispensing. Sets out requirements the prescriber must meet and prohibits action by licensure board for publicly expressing a medical opinion that does not align with the board. Health-related licensing boards or Board of Pharmacy cannot consider any activities by the prescriber or pharmacist to be unlawful, unauthorized, or unprofessional conduct & cannot pursue disciplinary action against prescriber or pharmacist. Bill does NOT provide any immunity for the nurse who may be administering the drug!</p>	<p>Introduced 2/27/23 referred to Health Provider Services Comm. 2/28/23. Sponsor testimony 3/28/23. 2nd hearing 4/25/23 proponent testimony. Several physicians said off-label prescribing is common medical practice that became controversial during</p>	<p>Per testimony of Rep. Gross (an APRN) the bill will protect health care providers' ability to prescribe any FDA approved medication without retaliation from health or state licensing agency. Rep. Loychik said bill was named after a couple who died of COVID after being denied treatment because they weren't vaccinated. Committee member Rep Somani (D) a physician cautioned about legislating without knowing the</p>

			<p>COVID. See it as a “free speech” issue. OSMA a proponent also asked for an amendment to add a provision requiring 3rd party coverage for these scripts. 3rd hearing 5/2/23—opponent Ohio Pharmacist Association. 4th hearing 6/13/23. 10 proponents—all written testimony. Passed House 73-17 on 6/21/23. Physician Beth Liston (D-Dublin) voted in favor while physician Anita Somani (D-Dublin) voted no.</p>	<p>full circumstances. Former state legislator and current ED of the Ohio Pharmacists Association Dave Burke submitted a letter describing the unintended consequences of the bill. Using a drug with “perceived benefits” could lead to a shortage of that drug for patients who utilize & rely on it for its intended purpose—as happened during the COVID pandemic. In written testimony from the Council of Retail Merchants, the organization expressed deep concerns that the language would undermine the pharmacists’ duty to serve their patients. The Ohio Hospital Association in its written testimony said it did not oppose codifying the practice of prescribing off label medications but described the framework in this bill as particularly unsafe for hospital patients and takes away the ability of care providers to perform their role in a patient’s clinical care.</p>
HB 80	Lipps (R)	Adds to pharmacist scope of practice per protocols the authority to conduct screenings, order lab tests and other diagnostic tests and to evaluate the test results and treat the condition when the dx is flu,	Introduced 2/27/23 Referred to House Health Provider Services Committee	

		COVID 19 or strep throat. Also, can initiate drug therapy		
HB 89	Hillyer (R) & Abdullahi (D)	Defines intimate physical exams as a pelvic, prostate, or rectal exam. Physicians, PAs and APRNs cannot perform an intimate exam on an anesthetized or unconscious patient with some exceptions. Violating the prohibition would result in licensure board disciplinary action	Introduced 3/7/23 Referred to House Public Health Policy Committee 3/14/23. 1 st hearing 4/19/23 sponsor testimony. Second hearing 5/4/23 proponent testimony.	18 proponent witnesses testified including one physician from Baltimore Maryland and a representative from Ohio Health and the Alliance to End Sexual Violence. Most of the witnesses were medical students. Amendments to the bill are expected.
HB 92	T. Young (R) & Santucci (R)	Establishes the Canadian Rx drug Importation Program under the auspices of the Board of Pharmacy	Introduced 3/7/23 Referred to House Public Health Policy Committee 3/14/23. 1 st hearing scheduled for 5/3/23.	
HB 97	Pavliga (R)	Creates Certified Mental Health Assistant	Introduced 3/7/23 Referred to House Health Provider Services Committee 3/14/23. Sponsor testimony 5/23/23. 2 nd hearing scheduled for 6/20/23. Included in senate-passed version of state budget bill (HB 33) 6/15/23. In 6/20 hearing committee chair Al Cutrona (R-Canfield) asked Meridith Craig, the	Companion bill to SB 60. Sponsor said the bill is needed because Ohio does not have enough mental health professionals to meet the need. This person would function much like a PA. Committee member Jennifer Gross APRN asked if sponsor had considered freeing nurses from the collaborative agreements required for APRNs in Ohio. Sponsor had not investigated that approach. In subsequent hearings Gross continued to press witnesses about the collaborative arrangement that

			Director of Health for the Ohio Chamber of Commerce whether the Chamber would continue to support the bill if it were to address scope of practice. Craig replied, "We would have a different conversation!"	is required for APRNs to practice in Ohio. Witnesses danced around the question saying that issue was independent of HB 97.
HB 99	Manchester (R)	Emergency services payments. Adds mental health to defn. of emergency medical conditions. Insurance. entities can't reduce or deny a claim for reimbursement when a reasonably prudent person would reasonably expect an emergency condition existed. Enrollees not required to self-diagnose. Per OSMA the bill strengthens Ohio's prudent layperson standards. If a person with an average amount of medical knowledge believes they are experiencing a medical emergency that ED visit should be considered a medical emergency for billing purposes.	Introduced 3/9/23 Referred to House Insurance Comm. 3/14/23. 1 st hearing sponsor testimony 4/19/23. Second hearing May 10 th proponent testimony, Proponent witnesses included OSMA, OHA, Cleveland Clinic, Ohio Fire Chiefs Assn, MetroHealth and ED physician representatives. 3 rd hearing 6/14/23. Opponents included NFIB and health plan representatives. 4 th hearing 9/20/23.	Opponents speaking on behalf of small business owners expressed concerns that premiums would increase for employers and those costs are a major concern for small businesses. Per health plans, the average ER visit costs \$2200 with a 2 hour wait time. Urgent care \$180 with a 30-minute wait. Self-insured companies would be immune from the cost impact. Bill encourages the use of EDs for non-ED scenarios.

HB 102	T. Young (R), & M. John (R)	License advanced practice respiratory therapists	Introduced 3/14/23. Referred to House Health Provider Services Committee 3/22/23. 1 st hearing scheduled for 5/2/23. 3 rd hearing opponent testimony 10/12/23. Scheduled for hearing but removed from the agenda 10/17/23.	Advanced RT would work under supervision of physician—much like a PA. Must hold a master's or doctorate. Sponsor explained an advanced practice RT is a new type of non-physician provider that will improve access to cardiopulmonary care by making use of the RT's expertise to support physicians. Ohio Society for Respiratory Care helped draft the bill. According to proponents, the advanced RT is being proposed as a way to address the predicted shortage of cardiologists and pulmonologists. Currently, training is occurring in hospitals, but OSU is offering a Master's in RT and certification is available.
HB 104	Robb-Blasdell (R)	Surgical smoke legislation	Introduced 3/14/23. Referred to House Health Public Policy Committee 3/22/23. Included in senate-passed version of budget bill (HB 33).	G A has considered this bill before. Companion bill in the Senate sponsored by Sen. Andy Brenner (SB 86). Included in final budget
HB 130	Miller, K. (R)	Establishes an exemption to prior authorizations for health insurer plans and Medicaid	Introduced 3/23/23. Referred to House Insurance Comm 3/28/23. 1 st hearing sponsor testimony 4/19/23. 2 nd hearing	Preauthorization data must be made available to the public in a readily accessible and informative format. If there is a preauthorization request & the insurer approves at least 80% of

			6/7/23. 29 proponents testified including OSMA & OSU Med. Ctr. 3 rd hearing 2/4/24.	the requests, the insurer shall not require health care providers to comply with preauthorization for that service or device for at least 12 months
HB 136	Holmes (R) & Stewart (R)	Operating remote dispensing pharmacy	Introduced 3/28/23 Referred to Health Provider Services Committee 4/18/23. Sponsor testimony 6/6/23. 2 nd hearing pro testimony 10/17/23. Third hearing 12/5/23. ED of Ohio Pharmacists Association, former legislator Dave Burke called the bill a great start but is seeking 4 amendments to preserve small local pharmacies.	Companion bill SB 95. A remote dispensing pharmacy is where drugs are dispensed, patients are counseled, and other pharmacist care provided through a tele- pharmacy system. Five proponent witnesses including the Chamber of Commerce and Walgreens. Telepharmacy largely is a response to the closure of many pharmacies. 50% of states now permit telepharmacy including Michigan & Indiana. Burke's request on 12/5: (1). Right of first refusal before registering a remote pharmacy (2) allow pharmacies to mail Rxs to their patients, (3) allow Board of Pharmacy to add additional long-acting injectables that can be injected by pharmacists, & (4) Ensure FQHCs and FQHC look- alikes participating in this service are limited to pharmacies attached to their physical property.

HB 141	LaRe (R) Robb-Blaisdel (R)	Caps cost sharing (co-pays) for PT, OT and chiropractic services to align with outpatient office visit copays.	Introduced 3/28/23 Referred to Insurance Committee 4/18/23 1 st hearing 5/3/23 sponsor testimony. 2 nd hearing proponents 6/14/23. 3 rd hearing 9/20/23 for opponent testimony. 4 th hearing all testimony. Possible vote	Bill considered in 134 th GA. Per bill's co-sponsors, co-payments for these services are often so high people cannot afford them, which can lead to over-reliance on pain medications and life-long issues. Bill would cap co-pays to what is received by primary care physicians
HB 142	Young, B. (R) & Young, T. (R)	Requires health insurers & Medicaid to cover treatment & services related to Pediatric Autoimmune Neuropsychiatric Disorders Associated with Strep Infections (PANDAS) & Pediatric Acute Onset Neuropsychiatric Syndrome (PANS)	Introduced 3/28/23. Referred to House Insurance Committee 4/18/23. Hearing scheduled 5/3/23.	Per bill's co-sponsors, up to 200 Ohio children ages 3-12 are affected by this disorder which begins with a strep infection followed by an acute onset neuropsychiatric disorder. PANDAS are recognized in the ICD-11. Ten states have passed insurance coverage bills.
HB 144	Manchester (R)	Allow August special election for certain purposes that include a initiated amendment to the Ohio Constitution	Introduced 3/29/23. Referred to House Government Oversight Committee 4/18/23. Sponsor testimony 4/25.23. 4/27/23 opponents testified. MOOT point now.	Companion to SB 92. Sponsor downplayed concerns about the traditionally low voter turnout for August elections saying 5% or 10% is still the voice of Ohioans.
HB 151	Demetriou (R) Williams (R)	Ohio Higher Education Enhancement Act	Introduced 4/6/23. Referred to House Higher Education	Companion bill to SB 83. Senate bill 83 sponsor Jerry Cirino. joined his house colleagues in

			<p>Committee 4/18/23. Sponsor testimony 5/10/23. Deleted from committee agenda 5/24/23. SB 83 was heard. 2nd hearing 5/17/23 Opponent testimony with over 170 witnesses providing testimony either in person or in writing. 3rd hearing 6/14/23 with 10 opponent or interested party witnesses.</p>	<p>offering sponsor testimony. All sponsors faced extensive questions from both sides of the aisle. 8 proponents also testified. (See May 14th Update for more information) SB 83 amended into senate-passed version of the state budget bill (HB 33). HB 83 language deleted from budget.</p>
HB 154	Skindell (D) Humphrey (D)	Ohio Patient Protection Act	<p>Introduced 4/19/23. Referred to House Health Provider Services Committee 4/25/23.</p>	<p>Establishes minimum nurse-to-patient staffing ratios, requires hospitals to post staffing ratios daily for each shift, prohibits a hospital from violating the bill's requirements or taking adverse action against a nurse who exercises a right conferred by the bill.</p>
HB 156	Manning (R) Oeslager (R)	Defines physician administered drugs and prohibits health plans from requiring or incentivizing the use of a specific pharmacy or affiliated pharmacy with certain caveats. Plan may not exclude coverage if the drug is not dispensed by an affiliated pharmacy if the drug is otherwise covered under the plan.	<p>Introduced 4/25/23. Referred to Insurance Committee 5/2/23.</p>	
HB 159	Lipps (R)	Requires Medicaid to collect certain data regarding applied behavioral analysis for children with autism	<p>Introduced 4/25/23. Referred to</p>	

		and requires reporting of the data and outreach efforts to improve access to behavioral analysis for these individuals.	Behavioral Health Committee 5/2/23. First hearing 12/6/23, sponsor testimony.	
HB 161	Miranda (D) Hillyer (R)	Eliminates spousal exception for certain sexual offenses	Introduced 4/26/23. Referred to house Criminal Justice Committee 5/2/23. Proponent testimony 5/23/23. 6/6/23 Proponent testimony 13 witnesses including Ohio domestic violence Network. 6/13/23 3 rd hearing. 6/20/4 th hearing. Forensic Nurses Association Ohio Chapter testified as proponents.	Sponsors noted that Ohio is one of 11 states with a loophole in its laws that keeps some spouses from prosecution for sexual offenses with the only exception being the presence of force or threat of violence. Bill introduced previously with bipartisan support, but it has not been considered a priority. Forensic nurses cited long term physical & mental effects of spousal violence that is made worse because the injured spouse cannot under Ohio obtain justice.
HB 168	Callender (R) Weinstein (D)	Legalizes the recreational use of marijuana. Allows for the cultivation, purchase, & possession of marijuana. Establishes a 10% sales tax divided between K-12 education, communities that host dispensaries, anti drug addiction & trafficking efforts, & the general revenue fund. The Medical Marijuana Control Program would oversee the industry	Introduced 5/8/23. Referred to Finance Committee 5/23/23	Both lawmakers were primary sponsors of similar legislation in the previous General Assembly. The bill comes amid efforts to provide voters a chance to legalize the use of marijuana through an initiated statute effort undertaken by the Coalition to Regulate Marijuana like Alcohol. That group began to collect a second round of signatures to get the issue on

				the November ballot after lawmakers failed to take any action by the early May deadline that resulted when proponents successfully completed the first round of the initiated statute process.
HB 169	Hillyer (R)	Regarding tanning by minors	<p>Introduced 5/9/23. Referred to House Health Provider Services Committee 5/23/23. 1st hearing 6/6/23 sponsor testimony. 6/27 /23 3rd hearing. 8 proponents testified including OSMA ODA, OSU --The James. Opponent testimony 9/27/23. Proponent testimony at 4th hearing 10/10/23. The Ohio Dermatological Society & OSMA jointly provided proponent testimony. Scheduled for hearing but removed from agenda 10/17/23. Fifth hearing 12/5/23. Committee accepted</p>	<p>Opposition sees this as government over-reaching. Witnesses stressed the link between using tanning beds starting in one's teens that often results in Melanoma. Opponents focused on non-salon based tanning beds (41%) that are not regulated by the bill, and according to studies, pose higher risks to users than commercial beds where there is a professional operating the bed. The bill will drive more people to use at home devices & increasing the risk said opponents.</p>

			without objection an amendment that requires legal guardian be present.	
HB 174	Skindell (D) Grim (D)	Establishes Ohio Health Care Plan—Universal Health Care for the state	Introduced 5/22/23 Referred to House Ins. Comm. 5/23/23. 1 st hearing 9/20/23.	Establishes the Ohio Health Care Agency to oversee the plan. Covered services range from inpatient & outpatient provider services, home care, hospice care Rx drugs, lab tests and medical equipment, rehab, emergency services, vision, dental, and eye care. No funding stream is provided. Sponsors say funding would come from federal, state, & local government sources. Similar legislation introduced in previous Gas
HB 177	Manchester (R)	Requires health insurance corporations to include the cost sharing amount paid by the enrollee or on behalf of the enrollee to determine whether the enrollee has met the cost sharing cap set by the insurer.	Introduced 5/22/23. Referred to House Insurance Committee 5/23/23. Re-referred to House Public Health Policy Comm 6/13/23. 1 st hearing scheduled 9/20/23. 2 nd hearing scheduled 10/11/23. Over 35 proponents testified. 3 rd hearing opp. 11/1/23. Five witnesses representing health	Insurance plans argued coupons and rebates raise premium costs because they encourage patients to use more expensive drugs. Statement refuted by proponents who said that has not happened in the 19 other states that have enacted similar legislation.

			insurance plans. 11/16/23 Bill reported out of committee unanimously.	
HB 183	Bird (R) Lear (R) Bill has 19 cosponsors	Requires K-12 and college students to use bath and locker rooms that match their sex at birth. Also prohibits schools from letting students share overnight accommodations with the opposite biological sex. Does not apply to students under age 10 assisted by a parent or to persons with developmental disabilities	Introduced 5/22/23. Referred to House Higher Education Committee 6/7/23. 1 st hearing 10/4/23 2 nd hearing 10/11/23 opponent testimony 3 rd hearing 10/18.23, proponent testimony. Hearing scheduled for 12/6/23 was not held so members could have time to digest a late-arriving sub bill. Sponsor believes the bill is on track to pass. Sub bill accepted by committee 1/10/24. It includes exemptions for parents,	Approximately 100 provided opponent testimony, some describing their own experiences as transgender men or women when they were forced to use the bathroom that matched their assigned sex at birth. Opponents included Dioceses of the Episcopal Church, Ohio, Gahanna-Jefferson School Board, ACLU Ohio, YWCA Columbus, Children’s defense Fund, Columbus Board of education, Ohio Education Association. Approximately 34 provided proponent testimony including National School Board’s Leadership Council Mom’s for America, Ohio Values Voters, Women’s Liberation Front, Ohio Parents Rights in Education, Western Ohio Advocacy Network, & Tree of Life Christian Schools. Emphasis was the need to provide safety for girls. Others supported the bill’s provisions that allow local

			custodians, & some others but according to witnesses the bill still does not address many other concerns that arise with this ban in effect. 5 th hearing 2/7/24.	school districts to make their own decisions about the issue.
HB 188	Brewer (D) Baker(D)	Recognize National Nurse Assistants Week, the 2 nd full week in June.	Introduced 5/24/23. 1 st hearing 6/13/23 Sponsor testimony. Committee unanimously recommended for passage 6/21/23.	
HB 190	Brent (D) White (R)	Designate April 11-17 Black Maternal Health Week.	Introduced 5/30/ 27. Referred to House Public Health Policy Committee 6/7/23. 2 nd hearing opp. or pro. testimony 11/1/23. Bill reported out of committee 11/15/23.	
HB 208	Hall (R)	Requires voter to register as a member of a political party to participate in that party's primary election 30 days prior to a primary election.	Introduced 6/7/23. Referred to house Government Oversight Committee 6/13/23. 1 st hearing 10/3/23.	

HB 210	Gross (R) Click (R)	Requires voter to register as a member of a political party to participate in that party's primary election and establishes deadline for doing so as the last day of December preceding the next primary election.	Introduced 6/13.23. Referred to Government Oversight Comm 6/13.23. First hearing 12/5/23, sponsor testimony. Faced questions from both sides of the aisle most of which focused on the timing for declaring a party. HB 208 requires 30 days. Similar language was nixed for SB 147 because per the sponsor it overshadowed the intent of the bill.	Depending on the primary election date (varies from March to May) someone who newly registers to vote AFTER 12/31 would not be able to declare a political party and vote in a primary election. Sponsors contend that the bill prevents "meddling" by D's in GOP primary. Opponents responded that elections are not a game & the change creates a hyper-partisan environment. How independent voters are handled was questioned by Rep Seitz. Currently these voters can cast a provisional ballot. Sponsors could not answer his questions.
HB 211	Gross (R)	Free to Speak legislation that requires a public body to permit members of the public to speak about matters of public concern before the body at its public meeting.	Introduced 6/13/23. Referred State & Local govt Comm 6/20/23	
HB 220	Lightbody (D)	Prohibits certain licensed health care providers (including APRNs) from engaging in conversion therapy for a minor.	Introduced 6/21/23. Referred to Public Health Policy Comm 6/26/23.	Defines conversion therapy and requires licensure boards for these practitioners to suspend, revoke, refuse to issue or renew a license for violating the prohibition.
HB 229	Sweeney (D) Patton (R)	Requires health care practitioners (including APRNs) to provide information on sudden unexpected death in epilepsy (SUDE) to at risk patients.	Introduced 6/27/23. Referred to House Health Provider Services Committee	The required written information is set out in the bill & includes evidence-based information developed by the

			<p>9/12/23. Reported out of committee 12/13/23. Passed house unanimously 1/10/24. Introduced in senate 1/16/24. Referred to Senate Health Committee 1/24/24.</p>	<p>CDC about SUDE risk factors & conditions. That information may be obtained through a link ODH is required to establish.</p>
HB 236	Miller, M (R) Lear (R)	Prohibits a congregate care setting from denying a patient or resident access to an advocate. "Never Alone Act"	<p>Introduced 7/5/23. Referred to House Health Provider Services Comm. 9/11/23. Sub bill accepted by committee 9/27/23 at its first hearing. Proponent testimony 10/12/23. Seventeen proponents testified, many relating anecdotal experiences of loved ones during the pandemic. A psychologist described the importance of having access to loved ones especially in stressful situations. Advocates for Medical Freedom that supports vaccine choice, parental</p>	<p>"Advocate" is defined as a spouse, family member, companion, guardian, etc. Applies to hospitals, hospices. Nursing homes, residential care facility, recovery housing and more. The sub bill adds exceptions to who can be an advocate including anyone who physically obstructs health care to which the patient agreed and anyone engaging in criminal behavior toward employees. The sub bill also excludes hospice patient's residences from the bill largely because the sponsor said patients in their own homes are already surrounded by loved ones. The bill is not trying to micromanage that. Both sponsors do not believe the bill would allow an abusive parent to slip through the cracks. 9 witness testified in support citing personal</p>

			rights, & repeal of the governor’s emergency powers provided testimony that also was largely anecdotal. Scheduled for hearing but removed from agenda 10/17/23. 4 th hearing 2/6/24.	experiences when loved ones receiving health care did not have access to each other. Ohio Hospice and the Ohio Alliance of Recovery Providers testified as interested parties both thanking the bill’s sponsors for addressing their concerns and excluding home hospice care & recovery housing & residential facilities from the bill.
HB 238	Fowler-Arthur (R) & Klopenstein (R)	Notice of intent to enact legislation to revise and streamline occupational regulation to better accommodate the state’s workforce	Introduced 7/11/23	
HB 246	Cutrona (R) & Brewer (D)	Applies to Medicaid Passport, home care waiver, and community-based care waiver programs.	Introduced 7/20/23	Streamlines the process for certifying & training self-directed services workers. Specifies they are not health care providers. Allow workers to work 60 days without a background check or training.
HB 249	Galonski (D) & Hillyer (R)	For purposes of involuntary hospitalization of a mentally ill person (pink slipping), modifies requirement that someone must be at a substantial risk of physical harm by deleting qualifier that the risk must of a physical nature. Adds state highway trooper as someone who may “pink slip” an individual. Adds to the definition of substantial risk of harm impaired judgment, lack of understanding of mental illness or the need for treatment, refusing treatment or not adhering to treatment, or having been diagnosed with specific mental	Introduced 8/1/23. Referred to House Behavioral Health Comm 9/11/23. 1 st hearing 9/26/23 Sponsor testimony. 2 nd hearing 10/31/23—proponent testimony	By establishing a psychiatric deterioration standard, the court system can intervene before an individual exhibits violent or suicidal tendency. 21 states have already incorporated this standard. Bill is the same as one that passed the Ohio House last year. Committee members asked why the state highway patrol was added to the list of those having

		illnesses that if not treated would lead to deterioration.		the authority It was at the request of OSHP said the sponsor
HB 256	K. Miller (R) Creech (R)	Allows organ donors to specify during an application for a hunting or fishing license that the person is willing to make anatomical gifts. Issuers of the license will register the individual in the donor registry maintained by BMV.	Introduced 8/16/23. Referred to House Public Health Policy Comm. 9/12/23. 1 st hearing scheduled 10/11/23. 2 nd hearing all testimony, possible amendments 11/1/23. Bill unanimously reported 11/15/23. House approved unanimously 11/29/23. Introduced in Senate 12/5/23, referred to Senate Health Committee 12/6/23.	
HB 266	Wiggam (R)	Req. school districts to update emergency mgt plans to include evacuation procedures for persons with disabilities as of 1/1/25. A student's IEP must include a specific evacuation description of accommodations for evacuating the student for an emergency.	Introduced 9/8/23. First hearing, sponsor testimony 12/12/23.	
HB 275	Young, T. (R) Plummer (R)	Revise the law governing the review of patient information in the Ohio Automated Rx Reporting System, to establish requirements on the prescribing and dispensing of opioid analgesics, to establish the Medical Marijuana Control Program Fund and provide for a cash transfer, and to amend	Introduced 9/18/23. Referred to Health Provider Services Committee 9/26/23.	Adds to prescribing requirements for opioids given for more than 5 days. Prescribers must provide patients counseling regarding the risks of opioid addiction &

		the version of section 4723.481 of the Revised Code that is scheduled to take effect on September 30, 2024, to continue the changes to that section on and after that date.		the importance of proper medication storage & disposal. Applies to physicians, PAs & APRNs. Licensure boards are to adopt guidelines regarding the counseling. Also in Section 4723.487, the current exclusion for reporting in OARRS when drugs are prescribed for less than 7 days would be deleted.
HB 285	Ghanbari (R) Rogers (D)	Nurse staffing and loan-to grant program for individuals pursuing nursing degrees.	Introduced 10/2/23 Referred to Health Provider Services Committee 10/3/23	Bill has bipartisan co-sponsors including Beth Liston a physician who is also on the committee hearing the bill. Neither of the nurses in the GA have signed on to co-sponsor nor did physician Anita Somani ranking member on the committee. Both nurses are committee members too. Sponsor Ghanbari described the bill at a press conference, as a work in progress & said he is working with hospitals to make it “workable” for them.
HB 291	Liston (D) Carruthers (R)	During a plan year, it prohibits health benefit plans from switches to prescriptions and medication benefits. Cannot increase person’s cost sharing burden, move a drug to a more restrictive tier, remove a drug from a plan’s formulary except for clinical safety reasons, it is not sold in the US, or manufacturing has been interrupted. Does not prohibit substituting generically equivalent drugs	Introduced 10/3/23. Referred to Insurance Committee 10/10/23.1 st hearing sponsor testimony 11/1/23. Second hearing proponent testimony. Witnesses included OSMA and various physician	

			specialty organizations and the American Diabetes Association.	
HB 300	Baker (D) Ray (R)	Establishes pilot program for remote methadone treatment during FY 2024-2025. No more than 10 programs representing varied geographic areas	Introduced 10/18/23. Referred to Behavioral Health Committee 10/24/23. 1 st hearing sponsor testimony 10/31/23.	
HB 303	Hall (R) Santucci (R)	Establishing process for revisions of training subjects for EMS personnel. A person may petition the regulatory board to include a topic in a training or CE program in addition to topics already required by law. If approved the board shall require the topic and establish the number of required hours for it.	Introduced 10/18/23. Referred to Homeland Security Committee. 1 st hearing 12/6/23. 2 nd hearing 2/7/24. Proponent testimony.	
HB 318	Gross (R) Wiggam (R)	Conscientious Right to Refuse Act.	Introduced 11/8/23. Referred to House Health Provider Services Committee 11/14/23.	Prohibits discrimination against individuals for refusing certain medical interventions for matters of conscience including religious convictions. Applies to businesses including health care facilities & affects vaccines, biologics, & gene editing. Cannot terminate or deny employment, deny a service, deny access to commerce, segregate the individual, penalize, or use financial incentives, or treat the individual differently.

HB 343	Somani (D) Liston (D)	Reproductive Care Act. Repeals numerous statutes addressing abortion & women's health access.	Introduced 11/29/23. Referred to House Public Health Policy Committee 12/6/23.	Both sponsors are physicians.
HB 352	Baker (D) Carruthers (R)	Establishes Adverse Childhood Experiences (ACEs) study commission.	Introduced 12/4/23. Referred to House Behavioral Health Committee 12/4/23.	Commission is made up of 21 appointees 17 of which are named by the governor with the remaining 4 being GA members appointed by senate & house leadership. Commission is to recommend strategies to the legislature for addressing the prevalence & effects of ACEs. It is to issue annual reports and will cease to exist after it submits its 4 th report. No nurses are explicitly named as potential commission members but could fit other criteria for appointment.
HB 356	Carruthers (R)	Healthy Cardiac Monitoring Act	Introduced 12/6/23. Referred to House Public Health Policy Committee 12/12/23.	Establishes requirements for athletic participation examinations applicable to schools & youth sports organizations. Affects APRNs as well as physicians, & PAs performing these examinations. (More details are provided in the Legislative Update of January 5, 2024.)
HB 362	Baker (D) Robb-Blasdell (R)	Removes supervisory language for CRNAs & replaces it with consulting. Bill has 18 bipartisan co-sponsors. Neither of the physician house members are included on that list.	Introduced 12/12/23. Referred to House Health Provider	Sponsors noted there are 150 facilities where CRNAs are the sole anesthesia providers. The bill would help rural facilities to

			Services Committee 1/9/24.	provide needed services. (More information is provided in the Legislative Update of January 5, 2024.)
HB 371	Dean (R) Gross (R)	Issue 1 Implementation Act. Eliminates jurisdiction of all Ohio courts with respect to all claims attempting to enforce or implement Issue 1 (Women’s Reproductive Rights Amendment) added to Ohio’s Constitution in November 2023.	Introduced 1/3/24. Referred to House Civil Justice Committee 1/9/24.	
HB 384	Abdullahi (D) Hall (R)	Caps cost-sharing for prescribed insulin drugs & diabetes devices at \$35 in aggregate/month for drugs and \$100 in aggregate/month for devices. Copays, co-insurance, and other cost sharing apply to the covered person.	Introduced 1/24/24 Referred to House Insurance Committee 2/6/24	29 bipartisan cosponsors including physicians Liston & Somani & APRN Baker.
HB 386	Mathews (R) Lampton (R)	Eliminates state income tax by 2030. Similar to SB 216 but the bills are not identical in the approach used to phase out the tax. (See ANA-Ohio March 4, 2024 Legislative Update for additional information.)	Introduced 1/24/24. Referred to Ways & Means Committee 2/6/24	Expecting to hold numerous townhall meetings across the state to obtain stakeholder feedback and input.
HB 397	Hoops (R) Baker (D)	Increase awareness of cognitive impairment dementia.	Introduced 2/5/24. Referred to House Public Health Policy Committee 2/6/24.	
HB 399	Brown (D) Lampton (R)	Modifies existing income tax credit for organ donors & creates income tax credit for employers who provide leave to organ donors.	Introduced 2/5/24. Referred 2/6/24 to House Ways & Means	
HB 417	Grim (D) Abdullahi (D)	Prohibits person charged with or convicted of first-degree domestic violence from possessing a firearm.	Introduced 2/21/24	
HB 418	Brown (D) Isaacsohn (D)	Repeals changes made by previous General Assembly that eliminated training requirements to obtain a concealed carry license.	Introduced 2/21/24	
HB 419	Robinson (D) & Isaacsohn (D)	Requires universal background checks	Introduced 2/21/24	

HB 420	Brewer (D) Abdullahi (D)	Establishes Office of Firearm Safety within Dept. of Children & Youth.	Introduced 2/21/24	
HB 421	Brewer (D)	Establishes a task force on gun violence	Introduced 2/21/24	
HB 433	Blackshear (D)	Prohibits carrying mass casualty weapons	Introduced 2/27/24	
HB 434	Loychik (R)	Creates the Traumatic Brain Injury (TBI) Treatment Accelerator Pilot Program for the purpose of advancing scientific research about and to develop treatments for TBI, and to promote Ohio as a biohub for TBI research.	Introduced 2/27/24	