



OHIO OSTEOPATHIC ASSOCIATION Legislative Update

The Ohio House of Representatives opened its legislative flood gates, June 20, and started passing dozens of bills after weeks of inaction. The backlog was caused by the sudden resignation of Speaker Cliff Rosenberger for possible wrong-doing and a failure of majority Republicans to reach a majority vote on his successor.

This year's law-making timeline is also disrupted, since 2018 is a major election year. The Legislature has recessed for the summer to allow all members of the Ohio House of Representative to campaign for the November election. House members will be joined on the campaign trail by a third of Ohio's state senators, who are also on the ballot; and, Ohioans will also be choosing a new Governor, State Auditor, Treasurer, Attorney General, one of our US Senators, along with two members of the Ohio Supreme Court.

Rep. Terry Johnson, DO, who has been a tireless advocate for the osteopathic profession during his eight years in the House, is term-limited and will not be running for reelection. That will leave Rep. Steve Huffman, MD – who is running for an open seat in the Senate – as the only other physician in the Ohio General Assembly if he wins his election.

The 132nd session of the Ohio General Assembly will end in December. The new Speaker of the House, Rep. Ryan Smith, has scheduled 12 voting sessions, although five of those are only being held on an "as-needed" basis. Senate President Larry Obhof, has not yet announced the Senate's schedule. In the meantime, OOA continues to monitor and advocate for numerous bills, as we prepare for a marathon lame-duck session after the November election.

Here is a run-down on the current status of key health care legislation of interest to the OOA.

- **Substitute HB 7 (Addresses medical claims and provider immunities)** After numerous hearings and amendments in Committee, the bill passed the House, June 27, and now heads to Senate for committee assignment and additional hearings. The amended bill provides qualified immunity for physicians and EMTs during disasters; clarifies the definition of a "medical claim" and the "I'm Sorry" statute; and sets new timelines for discovering additional plaintiffs and potential medical claims not in the original complaint.
- **Substitute HB 72/SB 56 (Establishes requirements for step therapy protocols)** OOA has been a key proponent for this bill during interested party meetings. Identical substitute versions have been accepted by the House and Senate Health Committees. The Ohio Association of Health Plans continues to oppose both bills, although the Ohio Chamber of Commerce chose not to testify as an opponent after amendments were made that address their concerns. The Legislative Services Commission has helped calm opposition in the business community by ruling that the bill is NOT an "insurance mandate."
- **HB 145 (Establish confidential program to treat impaired practitioners)** The bill was signed into law by the Governor, February 8, and was effective 90 days later. The Medical Board of Ohio has recently promulgated rules to implement the law, but OOA is part of the Medical Association Coalition opposing the rules as drafted and seeking changes through normal rule-making channels.

- **Substitute HB 131 (Modify physical therapy laws)** OOA and other physician associations initially opposed this bill, which would have allowed physical therapists (PTs) to order tests and diagnose physical disabilities. OOA representative, Jason Dapore, DO, of Columbus, testified on behalf of the association and participated in several interested party meetings with the bill sponsors. OOA is now neutral on the bill since it only allows PTs to make a limited physical therapy diagnosis for reimbursement purposes only. The bill passed the House and has been referred to the Health, Human Services and Medicaid Committee in the Senate.
- **HB 191 (Regards practice of registered nurse anesthetist)** The OOA remains opposed to this bill, which allows CRNAs to prescribe medications. OOA has been participating in interested party discussions. The bill remains in the House Health Committee without further hearings scheduled at this time. Alternatives are being explored in the Senate.
- **Substitute HB 167/SB 119 (Address opioid prescribing and addiction treatment)** These bills originally imposed rigid opioid prescribing guidelines on primary care physicians and dentists that have since been addressed in emergency rules of prescriber licensing boards at the request of Gov. John Kasich. The bill, called “Daniel’s Law,” now focuses on access to emergency treatment for opioid addiction and amends the Ohio Revised Code to allow pharmacists to dispense a short-term supply of buprenorphine/naloxone in emergency situations when the prescriber is unavailable. The bill has been favorably reported by both the House and Senate Committees and is expected to be passed by both chambers before the legislature adjourns in December.
- **Amended HB 226 (Regarding fireworks, fireworks moratoriums, fees, and sales)** This bill creates a Fireworks Study Group to consider legalization of consumer discharge of dangerous 1.4g fireworks in Ohio and would end a moratorium against discharging such fireworks purchased in Ohio by 2020 if a study committee fails to make a decisive prohibition recommendation to the Ohio General Assembly. OOA has joined Prevent Blindness Ohio in visiting senators in opposition to the bill. HB 226 was approved in the House by a vote of 77-12. Hearings continue in the Senate Government Oversight and Reform Committee.
- **HB 273 (Prohibit requiring physicians to have maintenance of certification)** This bill remains in committee as physician specialty associations remain divided on the intent. William J. Burke, DO, of Columbus, testified as an interested party on behalf of the Ohio and American Osteopathic Associations to explain the Osteopathic Continuous Certification requirements. Meanwhile, the American Board of Medical Specialties and the American Osteopathic Association are seeking to address concerns about maintenance of certification and continuous osteopathic certification through medical channels.
- **Substitute HB 286 (Identify need and provide support for palliative care)** This bill creates the Palliative Care and Quality of Life Interdisciplinary Council to consult with and advise the Ohio Department of Health on matters related to palliative care initiatives. James Preston, DO, of Sandusky, and Cleanne Cass, DO, of Dayton, have joined OOA staff in advocating for the bill, which passed the Ohio House, and is currently being revised in Senate Health Committee.
- **HB 317 (Allow tax deduction to physician providing free services)** OOA and AOA submitted joint written testimony in support of this legislation, although allowed deductions are minimal. The bill remains in the House Ways and Means Committee.
- **Substitute HB 326 (Authorize psychologists to prescribe psychotropics)** Substitute versions of this bill have been accepted in the House Health Committee to require psychologists to have consult

agreements with a physician and to increase education requirements in order to prescribe. OOA remains opposed to the latest substitute version, with the Ohio Psychiatric Physicians Association (OPPA) taking the lead in opposition. OPPA President William Resch, DO, testified against the latest version and physician groups continue to seek changes.

- **HB 416 (Requiring cost estimates for scheduled health care services)** This bill was introduced by Rep. Steve Huffman, MD, as an alternative to current law that requires physicians to furnish an estimate of health care services to patients when an appointment is scheduled. In November 2017, the OOA joined the Ohio Hospital Association and Ohio State Medical Association to file a lawsuit in Williams County Court of Common Pleas, challenging provisions that were included in the state budget. An injunction against implementation was granted, but a hearing has been delayed until the fall as a result of State Rep. Jim Butler's decision to intervene in the lawsuit.
- **HB 464 (Recognize stroke centers and establish stroke protocols)** This bill has been approved by the Ohio House Representatives and is waiting for assignment to a committee in the Ohio Senate. The bill creates a process for state recognition of hospitals as comprehensive stroke centers, primary stroke centers, or acute stroke ready hospitals. It further requires the establishment of written protocols for use by emergency medical service personnel when assessing, treating, and transporting stroke patients.
- **HB 479 (Disclose drug price information to patients)** HB 479 was initiated by the Ohio Pharmacists Association to prevent Pharmacy Benefit Managers (PBMs) from imposing claw backs and gag orders that prevent pharmacists from providing alternative drug pricing information to patients. The bill unanimously passed the Ohio House of Representatives and now heads to the Senate for assignment to Committee, where opposition from PBMs is increasing.
- **Substitute SB 259 (Revise physician assistant practice laws)** The OOA and other physician organizations are now neutral on the latest version of the bill, which is awaiting action by the Senate after being favorably reported out of the Health Committee. The bill increases to five (from three) the number of PAs that can be supervised by a physician at any one time. It also makes procedural changes in the PA Drug Formulary process and streamlines licensure requirements with the state medical board.

For questions about any of the legislation, contact the OOA office at 614-2992107.