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**Ohio Speech & Hearing Governmental Affairs Coalition
Legislative Activities Report
September 2014**

State lawmakers are well into their “summer” break, allowing them the opportunity to meet with constituents in their districts prior to the election in November. Although party leaders have indicated the chance of a few session days before the election, we expect the most substantial work to be put off until after the election. Despite legislators being on recess, capitol square has remained busy with things like summer study committees, preparing for the hectic lame duck session, and even prepping for next session’s main operating budget. That being said, the 2014 General Election will still remain the main focus of Ohio’s policy makers until November 4th.

This year’s election will determine the direction of the state for years to come as all statewide office holders, two Supreme Court Justices, all members of the U.S. and Ohio House of Representatives, and half of the members of the Ohio Senate are on the ballot. At the state level, Republicans hold a strong majority in both the House (60-39) and Senate (23-10). We expect the composition of the Ohio Senate to remain relatively the same; however, with all 99 House seats on the ballot this fall and due to term limits, the Ohio House, while remaining under Republican control, could look very different this fall with the possibility of over 20 new members as well as a new leadership team.

On that same front, the race to become the next Ohio House speaker has taken center stage as two frontrunners recently came to an agreement that put Rep. Cliff Rosenberg (R-Clarksville) in the lead to succeed Speaker Bill Batchelder next year, with Rep. Ron Amstutz (R-Wooster) serving in the number two slot. While the alliance represents a significant development toward settling a contentious rivalry in the protracted speaker’s race, members of other leadership factions vowed to continue fighting. Those other groups are led by Rep. Jim Butler (R-Oakwood) and Rep. Kristina Roegner (R-Hudson), who recently came together to broaden their support. The House speaker is one of the most powerful elected offices in state government,

playing a key role in deciding what bills come to the floor for votes, what those bills look like, and the chairs of each committee.

Also keeping legislators busy over the recess are various committee's focused on healthcare issues that have continued meeting over the summer months. The first committee meeting over the summer is the Joint Medicaid Oversight Committee (JMOC), which was created by the high-profile Medicaid overhaul legislation (SB 206). JMOC is charged with reviewing Medicaid-related policies as well as the effectiveness of health care entitlement in Ohio. Since its creation, JMOC has met to appoint executive director and has received multiple presentations from Ohio Department of Medicaid Director John McCarthy and Office of Health Transformation Director Greg Moody.

When legislators return this November they will begin a period during the end of each session referred to as "lame duck" session. Due to term limits and election night losses, this period of time is often the last chance for many legislators to push issues before they are forced to leave office. This creates a hectic environment, where it is not uncommon for multiple bills to move quickly or to be combined into one larger bill. This occurs because any legislation left pending at the end of the year will need to be reintroduced next session. The upcoming "lame duck session" promises to be particularly challenging this year with the large number of issues still pending before members. GAC remains very hopeful that our internet hearing aid legislation, HB 109, will pass the Senate and head to the Governor for a signature during lame duck session. Similarly, advocates are hopeful that HB 234, legislation which would allow hunters to use suppressors for hearing protection, will also pass during lame duck. GAC has testified in support of that bill in both the House and Senate and would like to see it pass this year.

While lame duck session is on the horizon, it is never too early to begin thinking about Ohio's next biennial budget process. The Ohio Office of Budget and Management (OBM) recently issued its budget planning guidance to agencies for the fiscal year 2016-2017 spending cycle. The guidance document, will be the foundation for the biennial budget bill expected to be introduced next February. According to the budget guidance document, a future budget bill will include Governor Kasich's oft-stated goal of reducing the personal income tax, as well as continue to hold the line on general revenue fund spending. Also expected in next year's budget bill is another debate over Medicaid expansion as the governor will push to continue Medicaid expansion over the next two years. Although, Medicaid expansion language was introduced in the most recent biennial budget (HB 59), the proposal to expand Medicaid coverage up to 138% of the federal poverty level received pushback from Republican members of the General Assembly and it was ultimately removed from the bill. The Kasich Administration was ultimately able to move the policy forward until fiscal year 2015 through the Controlling Board process; however, going through the Controlling Board will not be a viable option in the future.

Also on the budget front, OBM Director Tim Keen announced the state ended fiscal year 2014 roughly \$800 million above projections. The surplus was due mainly to underspending in Medicaid and higher-than-expected tax revenues. The additional funding will be used for the income tax cuts contained in the mid-biennial budget review (MBR) proposal, as well as for \$76 million in tax relief for lower-income citizens and a \$300 million deposit into Medicaid Reserve Fund. The administration also plans to send between \$100 and \$200 million to the general revenue fund.

Outside of the Legislature, GAC has worked steadily over the summer with our school-based SLP workgroup, which includes representatives from the Ohio Department of Education, Ohio's universities with SLP master's programs, the statewide professional associations (OSLHA & OSSPEAC), the Supervisory Network, and the Ohio Board of Speech-Language Pathology and Audiology. This workgroup is focused on initiatives to help with education, recruitment and retention of SLPs in the schools.

Various data shows that more than 200 school-based SLP are likely to retire from the schools at the end of the 2014 – 2015 school year. Accordingly, our proposed solutions (provided as a separate document) address ways to stem the tide of school-based retirements and improve working conditions for all school-based SLPs such that more quality services can be provided to Ohio's school children. The workgroup plans to meet several more times this fall in order to finalize our recommendations and present them to ODE.

On the audiology front, the Ohio Department of Health's hearing aid assistance program (OHAAP) is now up and running. Finalized at the end of June, the program allows families with incomes at or below 400 percent of the federal poverty guidelines to receive assistance in purchasing their child's hearing aids. Depending on income limits, families who apply for hearing aids may be required to pay an "out of pocket" fee up to \$500.00. The fee is for the audiological services to assess the child for the hearing aid as well as needed follow up to evaluate aid. Children enrolled or who can qualify for Medicaid or the Children with Medical Handicaps Program (BCMh) are not eligible for OHAAP.

Licensed audiologists interested in serving as OHAAP providers must have a signed agreement in place with ODH. Families who qualify and are interested in the program must complete the Family Application Form. Both of these forms can be found at the ODH website: <http://www.odh.ohio.gov/odhprograms/cmh/hearaidasst/Hearing%20Aid%20Assistance%20Program.aspx> .

We have been tracking the following legislation that has been introduced during the 130th General Assembly:

- HB3** **HEALTH INSURANCE ACCOUNTABILITY ACT** (SEARS B, KUNZE S) To specify licensing and continuing education requirements for insurance agents involved in selling, soliciting, or negotiating sickness and accident insurance through a health benefit exchange.
Current Status: 4/30/2013 - **SIGNED BY GOVERNOR**; Eff. 7/30/2013
- HB59** **BIENNIAL BUDGET** (AMSTUTZ R) To make operating appropriations for the biennium beginning July 1, 2013, and ending June 30, 2015; to provide authorization and conditions for the operation of state programs.
Current Status: 6/30/2013 - **SIGNED BY GOVERNOR**; Eff. 6/30/2013; Some Eff. 9/29/2013; Others Various Dates
- HB91** **HEALTH CARE FREEDOM ACT** (YOUNG R, THOMPSON A) To enact the Health Care Freedom Act.
Current Status: 4/24/2013 - House Health and Aging, (Second Hearing)
- HB98** **OCCUPATIONAL LICENSING LAW** (GONZALES A, RETHERFORD W) To revise the Occupational Licensing Law regarding military service members and veterans.
Current Status: 11/15/2013 - **SIGNED BY GOVERNOR**; Eff. 11/15/2013
- HB109** **HEARING AIDS** (DAMSCHRODER R) To specify individuals who are permitted to recommend and fit hearing aids and to prohibit specified sales of hearing aids via mail.
Current Status: 11/6/2013 - **REPORTED OUT**, Senate Commerce and Labor, (Fourth Hearing)
- HB121** **OHIO HEALTH SECURITY ACT** (HAGAN R, FOLEY M) To enact the Ohio Health Security Act to establish and operate the Ohio Health Care Plan to provide universal health care coverage to all Ohio residents.
Current Status: 4/17/2013 - Referred to Committee House Insurance
- HB123** **TELEHEALTH SERVICES** (GONZALES A, WACHTMANN L) Regarding Medicaid and health insurance coverage of telehealth services.
Current Status: 2/18/2014 - **SIGNED BY GOVERNOR**; Eff. 5/20/2014
- HB125** **MEDICAID EXPANSION** (CARNEY J, ANTONIO N) To permit the Medicaid program to cover the eligibility expansion group authorized by the Patient

Protection and Affordable Care Act and to make an appropriation.

Current Status: 4/17/2013 - Referred to Committee House Finance and Appropriations

HB176 **MEDICAID REFORMS (SEARS B)** To require the Medical Assistance Director to implement Medicaid reforms, to permit the Medicaid program to cover an additional group under certain circumstances, to revise the duties of the Joint Legislative Committee on Medicaid Technology and Reform, and to make an appropriation.

Current Status: 10/16/2013 - House Health and Aging, (First Hearing)

HB208 **MEDICAID REFORMS (AMSTUTZ R, SYKES V)** To require the Medicaid Director to implement certain reforms to the Medicaid program, to require the Director of Job and Family Services to implement certain reforms to workforce development activities, and to create the Joint Medicaid Oversight Committee.

Current Status: 1/8/2014 - House Finance and Appropriations, (Fourth Hearing)

HB227 **HEALTH CARE COMPACT (RETFERFORD W, BOOSE T)** To enter into the Health Care Compact.

Current Status: 4/1/2014 - **REPORTED OUT**, House State and Local Government, (Fourth Hearing)

HB234 **HUNTING GUN LAW (GROSSMAN C, BECKER J)** To allow a person to use a noise suppressor attached to a gun while hunting game birds or wild quadrupeds.

Current Status: 6/4/2014 - Senate Civil Justice, (Third Hearing)

HB255 **MEDICAID ELIGIBILITY (BECKER J)** To revise the law governing eligibility for the Medicaid program and to abolish the Medicaid Buy-In for Workers with Disabilities Program.

Current Status: 10/16/2013 - House Health and Aging, (First Hearing)

HB271 **HEALTH CARE-IMMUNITY EXPANSION (BECKER J)** To expand the immunity from liability for health care professionals, health care workers, and nonprofit health care referral organizations when providing specific care to an indigent and uninsured person.

Current Status: 10/8/2013 - House Insurance, (First Hearing)

HB276 **UNANTICIPATED OUTCOME-MEDICAL CARE (STAUTBERG P)** To

provide that certain statements and communications made regarding an unanticipated outcome of medical care are inadmissible as evidence, and to require a plaintiff in a medical claim to establish that the defendant's act or omission is a deviation from the required standard of medical care.

Current Status: 5/28/2014 - **REPORTED OUT AS AMENDED**, House Judiciary, (Fourth Hearing)

HB317 **MEDICAID REFORM MEASURES (SEARS B)** Regarding reforms relating to Medicaid, fraud committed against the state, penalties for certain drug offenses committed against pregnant women, non-opiate medication for released inmates, prescription-related identification requirements, and education for individuals without a high school diploma.

Current Status: 10/30/2013 - Referred to Committee House Health and Aging

HB342 **STRAIGHT A PROGRAM (BRENNER A, DRIEHAUS D)** To permit an educational service center to be a partner or the lead applicant of an education consortia seeking a grant under the Straight A Program and to modify the goals of projects supported by the program.

Current Status: 3/11/2014 - **SIGNED BY GOVERNOR**; Eff. 3/11/2014

HB361 **HEALTH CARE INSURERS-ACQUIRED BRAIN INJURY COVERAGE (GONZALES A, SMITH R)** To prohibit health insurers from excluding coverage related to acquired brain injuries.

Current Status: 3/12/2014 - House Health and Aging, (Third Hearing)

HB431 **WORKERS' COMPENSATION-MEDICAID ELIGIBILITY STUDY COMMITTEE (SEARS B, HENNE M)** To create the Workers' Compensation and Medicaid Eligibility Study Committee.

Current Status: 2/25/2014 - Referred to Committee House Health and Aging

HB434 **DISABILITY ACCOMMODATIONS THROUGH TECHNOLOGY COUNCIL (BARNES, JR. J)** To create the Disability Accommodations through Technology Council.

Current Status: 2/25/2014 - Referred to Committee House Health and Aging

HB472 **MBR-MID-BIENNIUM BUDGET REVIEW (MCCLAIN J)** To make operating

and other appropriations and to provide authorization and conditions for the operation of state programs.

Current Status: 3/26/2014 - House Ways and Means, (Third Hearing)

HB483 **MBR-OPERATION OF STATE PROGRAMS** (AMSTUTZ R) To make operating and other appropriations and to provide authorization and conditions for the operation of state programs.

Current Status: 6/11/2014 - Sent to Governor for Signature

HB485 **MBR-OFFICE OF HUMAN SERVICES INNOVATION** (SMITH R, JOHNSON T) To establish the Office of Human Services Innovation in the Department of Job and Family Services.

Current Status: 5/14/2014 - Senate Medicaid, Health and Human Services, (Second Hearing)

HB492 **MBR-TAXATION** (SCHERER G) To provide authorization and conditions for the levy and administration of taxes in this state.

Current Status: 6/11/2014 - Sent to Governor for Signature

HB546 **LICENSURE-MUSIC THERAPISTS** (DOVILLA M, ANTONIO N) To require the licensure of music therapists and to require the to regulate the licensure and practice of music therapists.

Current Status: 5/27/2014 - Referred to Committee House Health and Aging

HCR6 **FEDERAL EXCISE TAX-MEDICAL DEVICES** (BRENNER A, HUFFMAN M) To urge the Congress of the United States and the President of the United States to repeal the new federal excise tax on medical devices.

Current Status: 4/30/2013 - Referred to Committee Senate Medicaid, Health and Human Services

SB9 **HEALTH INSURANCE LAWS** (BACON K) To make changes to Ohio's health insurance laws related to implementation of the Federal Affordable Care Act.

Current Status: 6/4/2013 - **SIGNED BY GOVERNOR**; Eff. 9/4/2013

SB21 **THIRD-GRADE READING GUARANTEE** (LEHNER P) To revise the requirements for reading teachers under the Third-Grade Reading Guarantee.

Current Status: 6/4/2013 - **SIGNED BY GOVERNOR**; Eff. 6/4/2013

- SB104** **OHIO HEALTH CARE PLAN (SKINDELL M)** To establish and operate the Ohio Health Care Plan to provide universal health care coverage to all Ohio residents.
Current Status: 4/16/2013 - Referred to Committee Senate Medicaid, Health and Human Services
- SB117** **MEDICAID PROGRAM (SMITH S)** To permit the Medicaid program to cover the eligibility expansion group authorized by the Patient Protection and Affordable Care Act and to make an appropriation.
Current Status: 5/8/2013 - Referred to Committee Senate Finance
- SB131** **HEALTH CARE PROFESSIONAL REQUIREMENT (TAVARES C)** To require certain health care professionals to complete instruction in cultural competency.
Current Status: 5/22/2013 - Referred to Committee Senate Medicaid, Health and Human Services
- SB132** **HEALTH CARE PROFESSIONAL LICENSE DISPLAY (TAVARES C)** To require certain health care professionals to wear, when providing direct patient care, an identification card, badge, or similar device that includes a photograph of the professional and specifies the license held by the professional.
Current Status: 5/22/2013 - Referred to Committee Senate Medicaid, Health and Human Services
- SB145** **MEDICAID REFORMS (BURKE D, CAFARO C)** To require the Medicaid Director to implement certain reforms to the Medicaid program, to require the Director of Job and Family Services to implement certain reforms to workforce development activities, and to create the Joint Medicaid Oversight Committee.
Current Status: 6/19/2013 - Senate Medicaid Finance Subcommittee, (First Hearing)
- SB166** **MEDICAID (CAFARO C)** To revise the law governing the Medicaid program.
Current Status: 9/26/2013 - Referred to Committee Senate Finance
- SB206** **MEDICAID (BURKE D, CAFARO C)** To require implementation of certain Medicaid revisions, reform systems, and program oversight, and to make an appropriation.
Current Status: 12/19/2013 - **SIGNED BY GOVERNOR**; Eff. 3/20/2014
Except as Provided by Law

- SB213** **NOT-FOR-PROFIT QUARTER AUCTIONS** (GARDNER R) To permit charitable organizations to conduct not-for-profit quarter auctions.
Current Status: 11/12/2013 - Senate State Government Oversight and Reform, (Second Hearing)
- SB221** **STROKE CENTER HOSPITALS** (GARDNER R) To provide for state recognition of hospitals that are comprehensive stroke centers, primary stroke centers, and acute stroke ready hospitals.
Current Status: 1/8/2014 - Senate Medicaid, Health and Human Services, (First Hearing)
- SB257** **HEARING AID COVERAGE** (BROWN E) To require health insurers to offer coverage for hearing aids.
Current Status: 2/4/2014 - Senate Insurance and Financial Institutions, (First Hearing)