

Ohio Legislative Service Commission

Office of Research and Drafting Legislative Budget Office



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Version: As Passed by the House

Primary Sponsor: Rep. Miranda

Local Impact Statement Procedure Required: No

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Highlights

There may be minimal one-time costs for medical service providers, law enforcement, and health care practitioners to conform existing emergency practices to those authorized by the bill and to appropriately equip and train personnel.

Detailed Analysis

The bill modifies the law governing the use of medical identifying devices, including (1) recognizing identifying devices that contain bar codes or quick response codes and (2) permitting the devices to be scanned by designated persons in an emergency to determine an incapacitated person's medical information.

Existing law allows law enforcement officers to search for medical identifying devices and identification cards in an emergency involving a person in a disabled condition (replaced by the term "incapacitated" in the bill). The bill specifically authorizes a law enforcement officer to scan an identifying device containing a bar code or quick response code.

Existing law requires a "medical practitioner," defined as a medical or osteopathic physician, and a trained paramedic, when examining or treating an incapacitated person, to search for and examine a medical identifying device or card. The bill permits rather than requires these actions, and expands authorized persons to "health care practitioner" (defined as medical or osteopathic physician, physician assistant, registered nurse, certified nurse practitioner, and clinical nurse specialist) and "emergency medical service provider" (EMT-basics, EMT-intermediates, EMT-paramedics, and first responders).

Because of the bill, emergency medical services (EMS) organizations or other practitioners or health care facilities that choose to obtain and utilize technology capable of scanning bar codes and quick response codes that do not already have it, may incur minimal costs to acquire and maintain scanning technology, as well as train providers on how to use it. Since the bill does not require the use or purchase of any specific type of equipment, a provider could presumably download a bar code and quick response code-scanning application onto their telephone or other device. LBO research indicates that there are multiple applications available for different types of devices at little to no cost.

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