

Ohio Legislative Service Commission

Office of Research and Drafting

Legislative Budget Office

H.B. 675 134th General Assembly

Bill Analysis

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Version: As Reported by House Insurance

Primary Sponsor: Rep. Dean

Logan Briggs, Attorney

SUMMARY

- Prohibits the Superintendent of Insurance from prohibiting certain forms of solicitation of Medicare supplement policies.
- Allows the Superintendent of Insurance to prohibit in-person solicitation at nursing homes and residential care facilities.

DETAILED ANALYSIS

Current law requires the Superintendent of Insurance to adopt reasonable rules to establish minimum standards for benefits, claims payment, advertising and marketing practices and compensation arrangements, and reporting practices, for Medicare supplement policies and certificates. The bill restricts what the Superintendent may do via such rules. Specifically, the Superintendent may not prohibit the following types of solicitation of Medicare supplement policies and certificates:

- Print solicitation such as leaflets, flyers, or door hangers left at residences or on motor vehicles;
- In-person solicitations of individuals at the individual's residence or in public or common areas such as parking lots, hallways, lobbies, or sidewalks;
- Telephonic or electronic solicitation such as electronic voicemail messages, text messages, or direct social media messages.¹

However, the bill does allow the Superintendent to prohibit in-person solicitation of Medicare supplement policies and certificates in both nursing homes and residential care

¹ R.C. 3923.332(D)(1).

facilities.² In this context, a nursing home is a home used for the reception and care of individuals who by reason of illness or physical or mental impairment require skilled nursing care and of individuals who require personal care services but not skilled nursing care. As such, nursing homes provide both personal care services and skilled nursing care. By contrast, a residential care facility does not necessarily have to provide any skilled nursing care, and may provide only supervision and personal care services (if providing accommodations for at least 17 residents and care to at least three of those residents). Including both means in-person solicitation may be prohibited regardless of whether skilled nursing care is provided in a facility.³

Subject to certain exceptions, a Medicare supplement policy is defined as a group or individual policy of sickness and accident insurance or a subscriber contract of health insuring corporations or any other issuer that is advertised, marketed, or designed primarily as a supplement to reimbursements under Medicare for the hospital, medical, or surgical expenses of persons eligible for Medicare.⁴

HISTORY

Action	Date
Introduced	05-16-22
Reported, H. Insurance	11-30-22

ANHB0675RH-134/tl

Page | 2

H.B. 675

² R.C. 3923.332(D)(2).

³ R.C. 3721.01, not in the bill.

⁴ R.C. 3923.33, not in the bill.