

# **Ohio Legislative Service Commission**

Jacquelyn Schroeder

## **Fiscal Note & Local Impact Statement**

**Bill**: H.B. 34 of the 131st G.A. **Date**: October 8, 2015

**Status**: As Passed by the House **Sponsor**: Reps. Retherford and Boose

Local Impact Statement Procedure Required: No

**Contents**: Enters Ohio into the Health Care Compact

#### **State Fiscal Highlights**

• There could be costs to the state associated with participation in the Interstate Advisory Health Care Commission such as program support, administration, and travel.

### **Local Fiscal Highlights**

• No direct fiscal effect on political subdivisions.

#### **Detailed Fiscal Analysis**

The bill enters Ohio into the Health Care Compact, which allows Ohio, with the permission of the United States Congress, to suspend all federal laws, rules, regulations, and orders regarding health care that are inconsistent with Ohio laws adopted pursuant to the Compact. The bill requires Ohio, as a member state of the Compact, to receive each federal fiscal year (FFY), the estimated current federal funding for health care in the state, updated for population and inflation, to be used to support health coverage. The bill establishes the Interstate Advisory Health Care Commission and requires the Commission to collect information to assist the member states in regulating health care. Member states must fund the Commission as agreed upon by the members. The bill also requires the Governor to appoint one individual to the Commission, though two individuals may be appointed.

The bill is largely contingent upon the consent of Congress. If Congress consents, every FFY, member states will be provided federal funding based on an amount that is equal to the federal health care spending in FFY 2010 in the state, adjusted for the population growth and inflation. According to the bill, Ohio's base funding level is estimated to be approximately \$35 billion. Also, there could be costs to the state associated with participation in the Interstate Advisory Health Care Commission such as program support, administration, and travel.

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