



OHIO LEGISLATIVE SERVICE COMMISSION

Sub. Bill Comparative Synopsis

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Sub. S.B. 332

131st General Assembly
(H. Finance)

This table summarizes how the latest substitute version of the bill differs from the immediately preceding version. It addresses only the topics on which the two versions differ substantively. It does not list topics on which the two bills are substantively the same.

Topic	Previous Version (As Passed by the Senate)	Sub. Version (L-131-2202-13)
<p>Qualified community hubs (R.C. 5167.173)</p>	<p>Defines a "qualified community hub" as a community-based agency that meets both of the following:</p> <p>(1) Demonstrates to the Director of Health that it uses an evidenced-based, pay-for-performance community care coordination model (endorsed by the federal Agency for Healthcare Research and Quality, the National Institutes of Health, and the Centers for Medicare and Medicaid Services or their successors).</p> <p>(2) Has a plan (approved by the Medicaid Director) specifying how the community hub ensures that children served by it receive appropriate developmental screenings specified</p>	<p>Instead, defines a "qualified community hub" as a central clearinghouse for a network of community care coordination agencies that meet the requirements in (1) and (2), as well as demonstrates to the Director of Health that it has achieved, or is engaged in achieving, certification from a national hub certification program.</p>

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	in a publication from the American Academy of Pediatrics, as well as appropriate early and periodic screening, diagnostic, and treatment (EPSDT) services.	
Crib bumper pads and mesh crib liners	Prohibits the manufacture and sale of crib bumper pads (R.C. 3713.021).	<p>Excludes mesh crib liners from this prohibition, but:</p> <p>--Prohibits the manufacture and sale of mesh crib liners that do not comply with consumer product safety standards governing such liners promulgated by the U.S. Consumer Product Safety Commission, for the purpose of ensuring sufficient permeability and breathability so as to prevent infant suffocation; and</p> <p>--Prohibits the sale and manufacture of mesh crib liners beginning three years after the bill's effective date if the standards described above are not promulgated. (R.C. 3713.01 and 3713.022.)</p>
Central intake and referral system (R.C. 3701.611)	Requires the Ohio Department of Health (ODH), with input from the Ohio Department of Developmental Disabilities (ODDD), to select, through competitive bidding, one or more persons or government entities to create and operate a central intake and referral system for all home visiting programs operating in Ohio, including those that provide Part C early intervention services.	Instead, requires both ODH and ODDD to create the system and permits both to select one or more system operators through competitive bidding. Specifies that the system is for Part C early intervention services and home visiting services. Also requires the system to comply with federal regulations governing Part C early intervention services.

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Membership – Ohio Home Visiting Consortium (R.C. 3701.612)	Specifies the membership of the Ohio Home Visiting Consortium.	Same, but requires the Consortium's membership to include one individual who represents county boards of developmental disabilities (recommended by the Ohio Association of County Boards of Developmental Disabilities).
Membership – Commission on Infant Mortality (R.C. 3701.68)	No provision.	Adds to the Commission's membership under existing law the Director of Developmental Disabilities or the Director's designee.
ODH infant mortality scorecard – sudden unexpected infant death information (R.C. 3701.953)	Requires ODH to create an infant mortality scorecard that includes, among other things, the state's sudden unexpected infant death rate.	Instead, requires ODH to include on the scorecard preliminary data in its possession on the state's sudden unexpected infant death rate.
Stillborn education program; stillbirth rate	No provision. No provision. No provision. No provision.	Requires the Director of Health to establish the Stillborn Education Program (R.C. 3701.97). Requires ODH to determine the state's stillbirth rate on a quarterly basis (R.C. 3701.951). Requires the ODH infant mortality scorecard to report the state's stillbirth rate (R.C. 3701.953). Requires the Ohio Department of Medicaid (ODM) infant mortality scorecard to report fee-for-service Medicaid's and each Medicaid managed care organization's performance on reducing the stillbirth rate (R.C. 5162.135).



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<p>Professional school curricula for practice within a patient-centered medical home model of care</p> <p>(R.C. 3701.928)</p>	<p>Requires the Director of Health or, at the Director's request, the Patient Centered Medical Home Education Advisory Group, to collaborate with health professional schools to develop appropriate curricula to prepare health professionals to practice within a patient-centered medical home model of care. Also specifies that a component of the curricula include preconception care and family planning.</p>	<p>Removes the Director's ability to request involvement from the Patient Centered Medical Home Education Advisory Group, which no longer exists.</p>
<p>Progesterone prescribed for pregnant women – prior approval form and grants</p>	<p>Requires Medicaid managed care organizations, if they use a prior approval form for progesterone therapy, to use a uniform form not longer than one page (R.C. 5167.171).</p> <p>Requires that certain ODH grants to facilities that include LARC First practices be used to purchase long-acting reversible contraception and progesterone (Section 8).</p>	<p>Clarifies that such progesterone therapy is for pregnant women (R.C. 5167.171 and Section 8.)</p>
<p>Housing</p>	<p>Requires the Ohio Housing Finance Agency (OHFA) and the Ohio Development Services Agency (ODSA) to include pregnancy as a priority in its housing assistance and local emergency shelter programs (R.C. 175.14).</p> <p>Requires OHFA and ODSA to investigate current investment in state-funded programs that support middle- to low-income homebuyers in communities with high levels of infant mortality and evaluate whether current investment should be rebalanced (R.C. 175.14).</p>	<p>No provision.</p> <p>No provision.</p>



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Stakeholder group – social determinants of health (Section 5)	Requires the Legislative Service Commission (LSC), not later than 30 days after the bill's effective date, to contract with a nonprofit organization to convene and lead a stakeholder group concerned with matters regarding the social determinants of health for infants and women of child-bearing age.	Same, but limits LSC to using up to \$500,000 for the contract.
Controlled child desertion	No provision.	Makes various changes to the law permitting controlled desertion of a new born child, including permitting the use of newborn safety incubators to place a child (R.C. 2151.3515, 2151.3516, 2151.3517, 2151.3518, 2151.3519, 2151.3521, 2151.3522, 2151.3523, 2151.3524, 2151.3525, 2151.3526, 2151.3528, 2151.3529, 2151.3530, 2151.3531, 2151.3532, 2151.3534, and 2151.3535).

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