



OHIO LEGISLATIVE SERVICE COMMISSION

Synopsis of House Committee Amendments*

Lisa Musielewicz

Sub. S.B. 332

131st General Assembly
(H. Finance)

Modifies the Senate-passed definition of "qualified community hub" by specifying that it is a central clearinghouse for a network of community care agencies (rather than a community-based agency) and adds that it must demonstrate to the Director of Health that it has achieved, or is engaged in achieving, certification from a national hub certification program.

Excludes mesh crib liners from the Senate-passed provision prohibiting the manufacture and sale of crib bumper pads, but prohibits (1) the manufacture and sale of mesh crib liners that do not comply with consumer product safety standards promulgated by the U.S. Consumer Product Safety Commission, and (2) the manufacture and sale of mesh crib liners beginning three years from the bill's effective date if no federal standards are promulgated.

Modifies the Senate-passed version to require that both the Ohio Department of Health (ODH) and the Ohio Department of Developmental Disabilities (ODDD) (rather than ODH with input from ODDD) create a central intake and referral system for all home visiting programs, as well as for Part C early intervention services, and permits (rather than requires) both agencies to select one or more system operators through competitive bidding.

Requires the central intake and referral system to comply with federal regulations governing Part C early intervention services.

Adds to Senate-passed requirements concerning data that home visiting service providers must report to the Director of Health to receive payment a requirement that the Director assess the data to determine the provider's improvement in reducing the incidence of stillbirth (in addition to improvement in birth outcomes).

Adds to the membership of the Ohio Home Visiting Consortium, enacted by the Senate-passed version, an individual representing county boards of developmental

* This synopsis does not address amendments that may have been adopted on the House Floor.

disabilities recommended by the Ohio Association of County Boards of Developmental Disabilities.

Adds to the existing Commission on Infant Mortality's membership the Director of Developmental Disabilities or the Director's designee.

Requires that ODH include on the ODH infant mortality scorecard required by the Senate-passed version preliminary data in its possession on the state's sudden unexpected infant death rate (rather than including the state's sudden unexpected infant death rate).

Requires that ODH, on a quarterly basis, make publicly available the stillbirth rate (in addition to preliminary infant mortality and preterm birth rates), delineated by race and ethnic group.

Requires that the Director of Health publish stillbirth data compiled from ODH's fetal death statistical file and disseminate educational materials on stillbirths to the State Medical Board, statewide medical associations, and the public.

Requires that the Ohio Department of Medicaid (ODM) report on the ODM infant mortality scorecard required by the Senate-passed version include fee-for-service Medicaid's and each Medicaid managed care organization's performance on reducing the stillbirth rate.

Removes the Director of Health's ability to request involvement from the Patient Centered Medical Home Education Advisory Group (which no longer exists) when fulfilling a Senate-passed requirement to collaborate with health professional schools to develop appropriate curricula for practice within a patient-centered medical home model of care.

Clarifies that Senate-passed requirements concerning a Medicaid managed care prior approval form for progesterone therapy, as well as ODH grants to LARC First practices to purchase progesterone, are for progesterone therapy *for pregnant women*.

Removes Senate-passed provisions requiring the Ohio Housing Finance Agency (OHFA) and Ohio Development Services Agency (ODSA) to (1) investigate current investment in state-funded programs that support middle- and low-income homebuyers in communities with high levels of infant mortality and (2) evaluate whether current investment should be rebalanced.

Removes Senate-passed provisions that require recipients of grants targeting homelessness to (1) ask and report the number of pregnant women and the number and

ages of any children seeking assistance at emergency shelters and (2) offer pregnant women placement in family shelters when possible.

Limits the Legislative Service Commission (LSC) to using up to \$500,000 for the contract, required by the Senate-passed version, under which a nonprofit organization must convene a stakeholder group concerned with matters regarding the social determinants of health and women of child-bearing age.

Makes various changes to existing law permitting controlled desertion of a newborn, including permitting the use of newborn safety incubators to place a child.

S0332-131.docx/rs

12/07/16