

OHIO LEGISLATIVE SERVICE COMMISSION

Sub. Bill Comparative Synopsis

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H.B. 450

132nd General Assembly (H. Government Accountability and Oversight)

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 Introduced)	Sub. Version (L_132_1097-6)
Actuarial study start date	Specifies that the Superintendent of Insurance is to deliver an actuarial study on the costs of all mandated benefits prescribed in state law starting on April 6, 2017 (R.C. 3901.88).	Specifies that the report is to be delivered starting on January 1, 2024 (R.C. 3901.88).
Annual mandate report	Requires the Superintendent to submit a report of all mandated benefits prescribed in state law to the Governor, Speaker of the House, and President of the Senate one year after the effective date of the bill and annually thereafter (R.C. 3901.881).	Requires the same information to be compiled and presented on the Department of Insurance's website. Requires the information to be updated annually. (R.C. 3901.881.)
Mandate notice	Requires a notice to be included in all invoices or statements sent by an insurance carrier. Requires the notice to be substantially similar to the following: "The cost of your health insurance premium may	Same, but requires the notice to be substantially similar to the following: "The State of Ohio mandates certain benefits be included as part of every health benefit plan offered in Ohio, regardless of whether plan

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	be higher due to mandated benefits that are required by the State of Ohio to be included as part of every health insurance plan offered in Ohio, regardless of whether plan participants need or use these benefits. The mandated benefits are listed in the enclosed document. If you are concerned about how these mandated benefits increase the cost of your health insurance premium, please contact your state legislator." (R.C. 3901.882(A)(1).)	participants need or use these benefits. While mandating coverage for these benefits may reduce health care costs in the long term, the cost of your health insurance premium may be higher due to these mandated benefits. If you are concerned about how these mandated benefits impact the cost of your health insurance premium, please contact your state legislator." (R.C. 3901.882(A)(1).)
Mandated benefits review committee	Creates the Mandated Benefits Review Committee under the Department of Insurance for the purpose of conducting a review of mandated benefits and recommending whether or not they should remain in statute (R.C. 3901.883).	Same, but creates the Committee under the Director of Health and requires the report to also be sent to the Superintendent of Insurance (R.C. 3701.36).
	No provision.	Specifies that the Director of Health is to furnish administrative support to the Committee and is to adopt rules as necessary to enable the committee to carry out its business (R.C. 3701.36(G) and (H)).

-2-

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Enactment of mandated benefits	Prohibits a bill containing a mandated benefit from being enacted unless certain criteria are met, including that at least five other states have enacted a mandated benefit that is substantially similar to the proposed one and that it can be determined that the mandated benefit has not increased premium costs in these states (R.C. 3901.886(A)(3)).	Similar, but eliminates the requirement that other states have already enacted a substantially similar mandate and instead stipulates that it must only be shown that the mandated benefit has not increased costs in other states that have enacted a similar mandate (R.C. 101.88(A)(3)).
	Requires the Superintendent to submit a report identifying possible alternative approaches to addressing the alleged lack of insurance coverage for a particular health care product or service (R.C. 3901.886(B)(1)).	Requires the bill's sponsor to submit to the committee proof that other alternative approaches have been considered, accompanied by a list of these alternative approaches (R.C. 101.88(A)(4)).
	Requires the report to disclose any gaps in insurance that would still exist should the proposed mandated benefit be enacted (R.C. 3901.886(B)(2)).	Requires the Department of Insurance to complete a report identifying which market segments the bill would apply to and which it would not, along with an approximate number and percentage of Ohioans that would be covered by the proposed mandated benefit by market segment (R.C. 3901.883).
	No provision.	Clarifies that the requisites for enactment found in R.C. 101.88 are not to be construed as supplanting or replacing the requisites for application of mandates found in R.C. 3901.71 (R.C. 101.88(B)).
Mandate analysis	No provision.	Requires the Legislative Service Commission to compile a mandate bill analysis for a bill containing a mandated benefit prior to the bill being recommended for passage by a committee

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		considering the bill and prior to the bill being taken up for final consideration by either house of the General Assembly. Specifies what the analysis is to include and how the analysis is to be distributed (R.C. 103.147).

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