## As Introduced

## 127th General Assembly Regular Session 2007-2008

H. B. No. 116

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## **Representative Blessing**

## A BILL

To amend section 124.82 and to enact section 9.902 of

the Revised Code to require public employers to make health savings accounts available to public

employees.	4
BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:	
Section 1. That section 124.82 be amended and section 9.902	5
of the Revised Code be enacted to read as follows:	6
Sec. 9.902. (A) As used in this section:	7
(1) "Health savings account" and "high deductible health	8
plan" have the same meanings as in section 223 of the Internal	9
Revenue Code.	10
(2) "Internal Revenue Code" has the same meaning as in	11
section 5747.01 of the Revised Code.	12
(3) "Medical plan" means any policy, contract, or other	13
agreement providing for the payment or other coverage of health,	14
medical, hospital, or surgical expenses of public employees.	15
(4) "Public employer" means the state, a public institution	16
of higher education described in section 9.90 of the Revised Code,	17
or a county, township, municipal corporation, school district, or	18

other body corporate and politic with jurisdiction within a

geographic area smaller than that of the state.	20
(5) "Public employee" means a full-time employee of a public	21
employer. In the case of the state, "public employee" means any	22
such employee paid directly by warrant of the director of budget	23
and management, including an elected state official.	24
(B) Except as otherwise provided in division (C) of this	25
section, each public employer providing a medical plan to its	26
public employees shall contract with one or more insurance	27
companies authorized to do business in this state for the issuance	28
of one or more policies or contracts for a high deductible health	29
plan covering its public employees in conjunction with health	30
savings accounts opened by such employees. In the case of the	31
state, the department of administrative services shall contract	32
for the issuance of the high deductible health plan policy or	33
contract, subject to division (E) of section 124.82 of the Revised	34
Code, and shall do so in accordance with the competitive selection	35
procedures of Chapter 125. of the Revised Code. A high deductible	36
health plan contracted for under this section shall comply with	37
the requirements for such plans under section 223 of the Internal	38
Revenue Code. The public employer may contribute all or a part of	39
the contributions to public employees' health savings accounts	40
opened by employees pursuant to division (D) of this section.	41
(C)(1) A public employer that is a party to a collective	42
bargaining agreement in effect on the effective date of of	43
the 127th general assembly that does not require the employer to	44
provide for a high deductible health plan is not required to	45
contract for a high deductible health plan under this section	46
covering employees who are subject to the agreement. When any	47
collective bargaining agreement is negotiated on or after that	48
effective date by a public employer and a public employee	49
bargaining unit, the public employer shall offer to provide under	50
the agreement one or more high deductible health plans covering	51

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such employees, and may offer to contribute under the agreement	52
all or a part of the contributions to the public employees' health	53
savings accounts opened by the employees. A public employees	54
bargaining unit may accept, reject, or negotiate any or all terms	55
and conditions of a high deductible health plan or health savings	56
account contributions offered by a public employer under this	57
division.	58
(2) A public employer is not required to contract for a high	59
deductible health plan under this section for an enrollment period	60
if the number of its public employees enrolled in the high	61
deductible health plan for the preceding enrollment period is less	62
than one per cent of the number of its public employees eligible	63
to enroll in the plan for the preceding enrollment period.	64
(D) A public employee enrolled in a high deductible health	65
plan provided under this section may open a health savings	66
account. The account shall be administered by a person satisfying	67
the requirements of section 223(d)(1)(B) of the Internal Revenue	68
Code. An employee's health savings account may be funded by	69
contributions from the employee or the public employer or both. A	70
public employee may not open a health savings account under this	71
division if the employee currently maintains a medical savings	72
account under sections 3924.61 to 3924.74 of the Revised Code.	73
Sec. 124.82. (A) Except as provided in division (D) of this	74
section, the department of administrative services, in	75
consultation with the superintendent of insurance, shall, in	76
accordance with competitive selection procedures of Chapter 125.	77
of the Revised Code, contract with an insurance company or a	78
health plan in combination with an insurance company, authorized	79
to do business in this state, for the issuance of a policy or	80
contract of health, medical, hospital, dental, or surgical	81
benefits, or any combination of those benefits, covering state	82

employees who are paid directly by warrant of the director of	83
budget and management, including elected state officials. The	84
department may fulfill its obligation under this division by	85
exercising its authority under division (A)(2) of section 124.81	86
of the Revised Code.	87
In addition to any policy or contract required under this	88
division, the department of administrative services shall contract	89
for one or more policies or contracts for high deductible health	90
plans for state employees as prescribed by section 9.902 of the	91
Revised Code.	92
(B) The department may, in addition, in consultation with the	93
superintendent of insurance, negotiate and contract with health	94
insuring corporations holding a certificate of authority under	95
Chapter 1751. of the Revised Code, in their approved service areas	96
only, for issuance of a contract or contracts of health care	97
services, covering state employees who are paid directly by	98
warrant of the director of budget and management, including	99
elected state officials. The department may enter into contracts	100
with one or more insurance carriers or health plans to provide the	101
same plan of benefits, provided that:	102
(1) The amount of the premium or cost for such coverage	103
contributed by the state, for an individual or for an individual	104
and the individual's family, does not exceed that same amount of	105
the premium or cost contributed by the state under division (A) of	106
this section;	107
(2) The employee be permitted to exercise the option as to	108
which plan the employee will select under division (A) or (B) of	109
this section, at a time that shall be determined by the	110
department;	111
(3) The health insuring corporations do not refuse to accept	112

the employee, or the employee and the employee's family, if the

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employee exercises the option to select care provided by the	114
corporations;	115
(4) The employee may choose participation in only one of the	116
plans sponsored by the department;	117
(5) The director of health examines and certifies to the	118
department that the quality and adequacy of care rendered by the	119
health insuring corporations meet at least the standards of care	120
provided by hospitals and physicians in that employee's community,	121
who would be providing such care as would be covered by a contract	122
awarded under division (A) of this section.	123
(C) All or any portion of the cost, premium, or charge for	124
the coverage in divisions (A) and (B) of this section may be paid	125
in such manner or combination of manners as the department	126
determines and may include the proration of health care costs,	127
premiums, or charges for part-time employees.	128
(D) Notwithstanding division (A) of this section, the	129
department may provide benefits equivalent to those that may be	130
paid under a policy or contract issued by an insurance company or	131
a health plan pursuant to division (A) of this section.	132
(E) This section does not prohibit the state office of	133
collective bargaining from entering into an agreement with an	134
employee representative for the purposes of providing fringe	135
benefits, including, but not limited to, hospitalization, surgical	136
care, major medical care, disability, dental care, vision care,	137
medical care, hearing aids, prescription drugs, group life	138
insurance, sickness and accident insurance, group legal services	139
or other benefits, or any combination of those benefits, to	140
employees paid directly by warrant of the director of budget and	141
management through a jointly administered trust fund. The	142
employer's contribution for the cost of the benefit care shall be	143

mutually agreed to in the collectively bargained agreement. The

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amount, type, and structure of fringe benefits provided under this	145
division is subject to the determination of the board of trustees	146
of the jointly administered trust fund. Notwithstanding any other	147
provision of the Revised Code, competitive bidding does not apply	148
to the purchase of fringe benefits for employees under this	149
division when those benefits are provided through a jointly	150
administered trust fund.	151
(F) Members of state boards or commissions may be covered by	152
any policy, contract, or plan of benefits or services described in	153
division (A) or (B) of this section. Board or commission members	154
who are appointed for a fixed term and who are compensated on a	155
per meeting basis, or paid only for expenses, or receive a	156
combination of per diem payments and expenses shall pay the entire	157
amount of the premiums, costs, or charges for that coverage.	158
Section 2. That existing section 124.82 of the Revised Code	159

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is hereby repealed.