

**As Reported by the Senate Insurance, Commerce and Labor  
Committee**

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**Sub. S. B. No. 334**

**Senator Faber**

**Cosponsors: Senators Seitz, Spada, Coughlin, Mumper, Schaffer, Amstutz,  
Stivers**

**—**

**A B I L L**

To amend sections 4123.01, 4123.26, 4123.29, 4123.51, 1  
4123.54, 4123.82, and 4123.88 and to enact 2  
sections 4123.292 and 4123.542 to prohibit an 3  
employee from filing a claim for workers' 4  
compensation benefits in this state if the 5  
employee has received a decision on the merits of 6  
a claim filed in another state for the same injury 7  
or occupational disease, to allow an Ohio employer 8  
to obtain workers' compensation insurance for 9  
claims arising in other states through the 10  
Administrator of Workers' Compensation, if the 11  
Administrator elects to provide such insurance, or 12  
an insurance company, to make other changes to the 13  
Workers' Compensation Law regarding interstate 14  
workers' compensation claims, and to allow an 15  
individual whose primary occupation is as a 16  
journalist to access specified worker's 17  
compensation records. 18

**BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:**

**Section 1.** That sections 4123.01, 4123.26, 4123.29, 4123.51, 19  
4123.54, 4123.82, 4123.88 be amended and sections 4123.292 and 20  
4123.542 of the Revised Code be enacted to read as follows: 21

**Sec. 4123.01.** As used in this chapter: 22

(A)(1) "Employee" means: 23

(a) Every person in the service of the state, or of any 24  
county, municipal corporation, township, or school district 25  
therein, including regular members of lawfully constituted police 26  
and fire departments of municipal corporations and townships, 27  
whether paid or volunteer, and wherever serving within the state 28  
or on temporary assignment outside thereof, and executive officers 29  
of boards of education, under any appointment or contract of hire, 30  
express or implied, oral or written, including any elected 31  
official of the state, or of any county, municipal corporation, or 32  
township, or members of boards of education. 33

As used in division (A)(1)(a) of this section, the term 34  
"employee" includes the following persons when responding to an 35  
inherently dangerous situation that calls for an immediate 36  
response on the part of the person, regardless of whether the 37  
person is within the limits of the jurisdiction of the person's 38  
regular employment or voluntary service when responding, on the 39  
condition that the person responds to the situation as the person 40  
otherwise would if the person were on duty in the person's 41  
jurisdiction: 42

(i) Off-duty peace officers. As used in division (A)(1)(a)(i) 43  
of this section, "peace officer" has the same meaning as in 44  
section 2935.01 of the Revised Code. 45

(ii) Off-duty firefighters, whether paid or volunteer, of a 46  
lawfully constituted fire department. 47

(iii) Off-duty first responders, emergency medical 48

technicians-basic, emergency medical technicians-intermediate, or 49  
emergency medical technicians-paramedic, whether paid or 50  
volunteer, of an ambulance service organization or emergency 51  
medical service organization pursuant to Chapter 4765. of the 52  
Revised Code. 53

(b) Every person in the service of any person, firm, or 54  
private corporation, including any public service corporation, 55  
that (i) employs one or more persons regularly in the same 56  
business or in or about the same establishment under any contract 57  
of hire, express or implied, oral or written, including aliens and 58  
minors, household workers who earn one hundred sixty dollars or 59  
more in cash in any calendar quarter from a single household and 60  
casual workers who earn one hundred sixty dollars or more in cash 61  
in any calendar quarter from a single employer, or (ii) is bound 62  
by any such contract of hire or by any other written contract, to 63  
pay into the state insurance fund the premiums provided by this 64  
chapter. 65

(c) Every person who performs labor or provides services 66  
pursuant to a construction contract, as defined in section 4123.79 67  
of the Revised Code, if at least ten of the following criteria 68  
apply: 69

(i) The person is required to comply with instructions from 70  
the other contracting party regarding the manner or method of 71  
performing services; 72

(ii) The person is required by the other contracting party to 73  
have particular training; 74

(iii) The person's services are integrated into the regular 75  
functioning of the other contracting party; 76

(iv) The person is required to perform the work personally; 77

(v) The person is hired, supervised, or paid by the other 78  
contracting party; 79

(vi) A continuing relationship exists between the person and the other contracting party that contemplates continuing or recurring work even if the work is not full time;	80 81 82
(vii) The person's hours of work are established by the other contracting party;	83 84
(viii) The person is required to devote full time to the business of the other contracting party;	85 86
(ix) The person is required to perform the work on the premises of the other contracting party;	87 88
(x) The person is required to follow the order of work set by the other contracting party;	89 90
(xi) The person is required to make oral or written reports of progress to the other contracting party;	91 92
(xii) The person is paid for services on a regular basis such as hourly, weekly, or monthly;	93 94
(xiii) The person's expenses are paid for by the other contracting party;	95 96
(xiv) The person's tools and materials are furnished by the other contracting party;	97 98
(xv) The person is provided with the facilities used to perform services;	99 100
(xvi) The person does not realize a profit or suffer a loss as a result of the services provided;	101 102
(xvii) The person is not performing services for a number of employers at the same time;	103 104
(xviii) The person does not make the same services available to the general public;	105 106
(xix) The other contracting party has a right to discharge the person;	107 108

(xx) The person has the right to end the relationship with 109  
the other contracting party without incurring liability pursuant 110  
to an employment contract or agreement. 111

Every person in the service of any independent contractor or 112  
subcontractor who has failed to pay into the state insurance fund 113  
the amount of premium determined and fixed by the administrator of 114  
workers' compensation for the person's employment or occupation or 115  
if a self-insuring employer has failed to pay compensation and 116  
benefits directly to the employer's injured and to the dependents 117  
of the employer's killed employees as required by section 4123.35 118  
of the Revised Code, shall be considered as the employee of the 119  
person who has entered into a contract, whether written or verbal, 120  
with such independent contractor unless such employees or their 121  
legal representatives or beneficiaries elect, after injury or 122  
death, to regard such independent contractor as the employer. 123

(d) Every person to whom all of the following apply: 124

(i) The person is a resident of a state other than this state 125  
and is covered by that other state's workers' compensation law; 126

(ii) The person performs labor or provides services for that 127  
person's employer while temporarily within this state; 128

(iii) The laws of that other state do not include the 129  
provisions described in division (H)(4) of section 4123.54 of the 130  
Revised Code. 131

(2) "Employee" does not mean: 132

(a) A duly ordained, commissioned, or licensed minister or 133  
assistant or associate minister of a church in the exercise of 134  
ministry; 135

(b) Any officer of a family farm corporation; 136

(c) An individual incorporated as a corporation; or 137

(d) An individual who otherwise is an employee of an employer 138

but who signs the waiver and affidavit specified in section 139  
4123.15 of the Revised Code on the condition that the 140  
administrator has granted a waiver and exception to the 141  
individual's employer under section 4123.15 of the Revised Code. 142

Any employer may elect to include as an "employee" within 143  
this chapter, any person excluded from the definition of 144  
"employee" pursuant to division (A)(2) of this section. If an 145  
employer is a partnership, sole proprietorship, individual 146  
incorporated as a corporation, or family farm corporation, such 147  
employer may elect to include as an "employee" within this 148  
chapter, any member of such partnership, the owner of the sole 149  
proprietorship, the individual incorporated as a corporation, or 150  
the officers of the family farm corporation. In the event of an 151  
election, the employer shall serve upon the bureau of workers' 152  
compensation written notice naming the persons to be covered, 153  
include such employee's remuneration for premium purposes in all 154  
future payroll reports, and no person excluded from the definition 155  
of "employee" pursuant to division (A)(2) of this section, 156  
proprietor, individual incorporated as a corporation, or partner 157  
shall be deemed an employee within this division until the 158  
employer has served such notice. 159

For informational purposes only, the bureau shall prescribe 160  
such language as it considers appropriate, on such of its forms as 161  
it considers appropriate, to advise employers of their right to 162  
elect to include as an "employee" within this chapter a sole 163  
proprietor, any member of a partnership, an individual 164  
incorporated as a corporation, the officers of a family farm 165  
corporation, or a person excluded from the definition of 166  
"employee" under division (A)(2) of this section, that they should 167  
check any health and disability insurance policy, or other form of 168  
health and disability plan or contract, presently covering them, 169  
or the purchase of which they may be considering, to determine 170

whether such policy, plan, or contract excludes benefits for 171  
illness or injury that they might have elected to have covered by 172  
workers' compensation. 173

(B) "Employer" means: 174

(1) The state, including state hospitals, each county, 175  
municipal corporation, township, school district, and hospital 176  
owned by a political subdivision or subdivisions other than the 177  
state; 178

(2) Every person, firm, professional employer organization as 179  
defined in section 4125.01 of the Revised Code, and private 180  
corporation, including any public service corporation, that (a) 181  
has in service one or more employees or shared employees regularly 182  
in the same business or in or about the same establishment under 183  
any contract of hire, express or implied, oral or written, or (b) 184  
is bound by any such contract of hire or by any other written 185  
contract, to pay into the insurance fund the premiums provided by 186  
this chapter. 187

All such employers are subject to this chapter. Any member of 188  
a firm or association, who regularly performs manual labor in or 189  
about a mine, factory, or other establishment, including a 190  
household establishment, shall be considered an employee in 191  
determining whether such person, firm, or private corporation, or 192  
public service corporation, has in its service, one or more 193  
employees and the employer shall report the income derived from 194  
such labor to the bureau as part of the payroll of such employer, 195  
and such member shall thereupon be entitled to all the benefits of 196  
an employee. 197

(C) "Injury" includes any injury, whether caused by external 198  
accidental means or accidental in character and result, received 199  
in the course of, and arising out of, the injured employee's 200  
employment. "Injury" does not include: 201

(1) Psychiatric conditions except where the claimant's 202  
psychiatric conditions have arisen from an injury or occupational 203  
disease sustained by that claimant or where the claimant's 204  
psychiatric conditions have arisen from sexual conduct in which 205  
the claimant was forced by threat of physical harm to engage or 206  
participate; 207

(2) Injury or disability caused primarily by the natural 208  
deterioration of tissue, an organ, or part of the body; 209

(3) Injury or disability incurred in voluntary participation 210  
in an employer-sponsored recreation or fitness activity if the 211  
employee signs a waiver of the employee's right to compensation or 212  
benefits under this chapter prior to engaging in the recreation or 213  
fitness activity; 214

(4) A condition that pre-existed an injury unless that 215  
pre-existing condition is substantially aggravated by the injury. 216  
Such a substantial aggravation must be documented by objective 217  
diagnostic findings, objective clinical findings, or objective 218  
test results. Subjective complaints may be evidence of such a 219  
substantial aggravation. However, subjective complaints without 220  
objective diagnostic findings, objective clinical findings, or 221  
objective test results are insufficient to substantiate a 222  
substantial aggravation. 223

(D) "Child" includes a posthumous child and a child legally 224  
adopted prior to the injury. 225

(E) "Family farm corporation" means a corporation founded for 226  
the purpose of farming agricultural land in which the majority of 227  
the voting stock is held by and the majority of the stockholders 228  
are persons or the spouse of persons related to each other within 229  
the fourth degree of kinship, according to the rules of the civil 230  
law, and at least one of the related persons is residing on or 231  
actively operating the farm, and none of whose stockholders are a 232



corporation. A family farm corporation does not cease to qualify 233  
under this division where, by reason of any devise, bequest, or 234  
the operation of the laws of descent or distribution, the 235  
ownership of shares of voting stock is transferred to another 236  
person, as long as that person is within the degree of kinship 237  
stipulated in this division. 238

(F) "Occupational disease" means a disease contracted in the 239  
course of employment, which by its causes and the characteristics 240  
of its manifestation or the condition of the employment results in 241  
a hazard which distinguishes the employment in character from 242  
employment generally, and the employment creates a risk of 243  
contracting the disease in greater degree and in a different 244  
manner from the public in general. 245

(G) "Self-insuring employer" means an employer who is granted 246  
the privilege of paying compensation and benefits directly under 247  
section 4123.35 of the Revised Code, including a board of county 248  
commissioners for the sole purpose of constructing a sports 249  
facility as defined in section 307.696 of the Revised Code, 250  
provided that the electors of the county in which the sports 251  
facility is to be built have approved construction of a sports 252  
facility by ballot election no later than November 6, 1997. 253

(H) "Public employer" means an employer as defined in 254  
division (B)(1) of this section. 255

(I) "Sexual conduct" means vaginal intercourse between a male 256  
and female; anal intercourse, fellatio, and cunnilingus between 257  
persons regardless of gender; and, without privilege to do so, the 258  
insertion, however slight, of any part of the body or any 259  
instrument, apparatus, or other object into the vaginal or anal 260  
cavity of another. Penetration, however slight, is sufficient to 261  
complete vaginal or anal intercourse. 262

(J) "Other-states' insurer" means an insurance company that 263

is authorized to provide workers' compensation insurance coverage 264  
in any of the states that permit employers to obtain insurance for 265  
workers' compensation claims through insurance companies. 266

(K) "Other-states' coverage" means insurance coverage 267  
purchased by an employer for workers' compensation claims that 268  
arise in a state or states other than this state and that are 269  
filed by the employees of the employer or those employee's 270  
dependents, as applicable, in that other state or those other 271  
states. 272

**Sec. 4123.26.** Every employer shall keep records of, and 273  
furnish to the bureau of workers' compensation upon request, all 274  
information required by the administrator of workers' compensation 275  
to carry out this chapter. In January of each year, every employer 276  
of the state employing one or more employees regularly in the same 277  
business, or in or about the same establishment, shall prepare and 278  
mail to the bureau at its main office in Columbus a statement 279  
containing the following information, as applicable: 280

(A) The number of employees employed during the preceding 281  
year from the first day of January through the thirty-first day of 282  
December; 283

(B) The number of such employees employed at each kind of 284  
employment and the aggregate amount of wages paid to such 285  
employees; 286

(C) If an employer elects to obtain other-states' coverage 287  
pursuant to section 4123.292 of the Revised Code through either 288  
the administrator, if the administrator elects to offer such 289  
coverage, or an other-states' insurer for claims arising in a 290  
state or states other than this state, all of the following 291  
information: 292

(1) The amount of wages the employer paid to the employer's 293

employees for performing labor or providing services for the 294  
employer in this state; 295

(2) The amount of wages the employer paid to the employer's 296  
employees for performing labor or providing services for the 297  
employer in a state or states other than this state. 298

The allocation of wages identified by the employer pursuant 299  
to divisions (C)(1) and (2) of this section shall not be presumed 300  
to be an indication of the law under which an employee is eligible 301  
to receive compensation and benefits. 302

The information shall be furnished on a blank to be prepared 303  
by the bureau. The bureau shall furnish the blanks to employers 304  
free of charge upon request therefor. Every employer receiving 305  
from the bureau any blank, with directions to fill out the same, 306  
shall cause the same to be properly filled out so as to answer 307  
fully and correctly all questions therein propounded, and give all 308  
the information therein sought, or if unable to do so, ~~he~~ the 309  
employer shall give to the bureau in writing good and sufficient 310  
reasons for such failure. The bureau may require that the 311  
information required to be furnished be verified under oath and 312  
returned to the bureau within the period fixed by it or by law. 313  
The bureau or any person employed by the bureau for that purpose, 314  
may examine, under oath, any employer, or the officer, agent, or 315  
employee thereof, for the purpose of ascertaining any information 316  
which the employer is required to furnish to the bureau. 317

No employer shall fail to furnish to the bureau the annual 318  
statement required by this section, nor shall any employer fail to 319  
keep records of or furnish such other information as may be 320  
required by the bureau under this section. 321

Whoever violates this section shall forfeit five hundred 322  
dollars, to be collected in a civil action brought against the 323  
employer in the name of the state, to be paid into the state 324

insurance fund and become a part thereof. 325

**Sec. 4123.29.** (A) The administrator of workers' compensation, 326  
subject to the approval of the bureau of workers' compensation 327  
board of directors, shall do all of the following: 328

(1) Classify occupations or industries with respect to their 329  
degree of hazard and determine the risks of the different classes 330  
according to the categories the national council on compensation 331  
insurance establishes that are applicable to employers in this 332  
state; 333

(2)(a) Fix the rates of premium of the risks of the classes 334  
based upon the total payroll in each of the classes of occupation 335  
or industry sufficiently large to provide a fund for the 336  
compensation provided for in this chapter and to maintain a state 337  
insurance fund from year to year. The administrator shall set the 338  
rates at a level that assures the solvency of the fund. Where the 339  
payroll cannot be obtained or, in the opinion of the 340  
administrator, is not an adequate measure for determining the 341  
premium to be paid for the degree of hazard, the administrator may 342  
determine the rates of premium upon such other basis, consistent 343  
with insurance principles, as is equitable in view of the degree 344  
of hazard, and whenever in this chapter reference is made to 345  
payroll or expenditure of wages with reference to fixing premiums, 346  
the reference shall be construed to have been made also to such 347  
other basis for fixing the rates of premium as the administrator 348  
may determine under this section. 349

(b) If an employer elects to obtain other-states' coverage 350  
pursuant to section 4123.292 of the Revised Code through either 351  
the administrator, if the administrator elects to offer such 352  
coverage, or an other-states' insurer, calculate the employer's 353  
premium for the state insurance fund in the same manner as 354  
otherwise required under division (A) of this section and section 355

4123.34 of the Revised Code, except that when the administrator determines the expenditure of wages, payroll, or both upon which to base the employer's premium, the administrator shall use only the expenditure of wages, payroll, or both attributable to the labor performed and services provided by that employer's employees when those employees performed labor and provided services in this state only and to which the other-states' coverage does not apply.

(c) The administrator in setting or revising rates shall furnish to employers an adequate explanation of the basis for the rates set.

(3) Develop and make available to employers who are paying premiums to the state insurance fund alternative premium plans. Alternative premium plans shall include retrospective rating plans. The administrator may make available plans under which an advanced deposit may be applied against a specified deductible amount per claim.

(4)(a) Offer to insure the obligations of employers under this chapter under a plan that groups, for rating purposes, employers, and pools the risk of the employers within the group provided that the employers meet all of the following conditions:

(i) All of the employers within the group are members of an organization that has been in existence for at least two years prior to the date of application for group coverage;

(ii) The organization was formed for purposes other than that of obtaining group workers' compensation under this division;

(iii) The employers' business in the organization is substantially similar such that the risks which are grouped are substantially homogeneous;

(iv) The group of employers consists of at least one hundred members or the aggregate workers' compensation premiums of the

members, as determined by the administrator, are expected to 387  
exceed one hundred fifty thousand dollars during the coverage 388  
period; 389

(v) The formation and operation of the group program in the 390  
organization will substantially improve accident prevention and 391  
claims handling for the employers in the group; 392

(vi) Each employer seeking to enroll in a group for workers' 393  
compensation coverage has an industrial insurance account in good 394  
standing with the bureau of workers' compensation such that at the 395  
time the agreement is processed no outstanding premiums, 396  
penalties, or assessments are due from any of the employers. 397

(b) If an organization sponsors more than one employer group 398  
to participate in group plans established under this section, that 399  
organization may submit a single application that supplies all of 400  
the information necessary for each group of employers that the 401  
organization wishes to sponsor. 402

(c) In providing employer group plans under division (A)(4) 403  
of this section, the administrator shall consider an employer 404  
group as a single employing entity for purposes of retrospective 405  
rating. No employer may be a member of more than one group for the 406  
purpose of obtaining workers' compensation coverage under this 407  
division. 408

(d) At the time the administrator revises premium rates 409  
pursuant to this section and section 4123.34 of the Revised Code, 410  
if the premium rate of an employer who participates in a group 411  
plan established under this section changes from the rate 412  
established for the previous year, the administrator, in addition 413  
to sending the invoice with the rate revision to that employer, 414  
shall send a copy of that invoice to the third-party administrator 415  
that administers the group plan for that employer's group. 416

(e) In providing employer group plans under division (A)(4) 417

of this section, the administrator shall establish a program 418  
designed to mitigate the impact of a significant claim that would 419  
come into the experience of a private, state fund group-rated 420  
employer for the first time and be a contributing factor in that 421  
employer being excluded from a group-rated plan. The administrator 422  
shall establish eligibility criteria and requirements that such 423  
employers must satisfy in order to participate in this program. 424  
For purposes of this program, the administrator shall establish a 425  
discount on premium rates applicable to employers who qualify for 426  
the program. 427

(f) In no event shall division (A)(4) of this section be 428  
construed as granting to an employer status as a self-insuring 429  
employer. 430

(g) The administrator shall develop classifications of 431  
occupations or industries that are sufficiently distinct so as not 432  
to group employers in classifications that unfairly represent the 433  
risks of employment with the employer. 434

(5) Generally promote employer participation in the state 435  
insurance fund through the regular dissemination of information to 436  
all classes of employers describing the advantages and benefits of 437  
opting to make premium payments to the fund. To that end, the 438  
administrator shall regularly make employers aware of the various 439  
workers' compensation premium packages developed and offered 440  
pursuant to this section. 441

(6) Make available to every employer who is paying premiums 442  
to the state insurance fund a program whereby the employer or the 443  
employer's agent pays to the claimant or on behalf of the claimant 444  
the first fifteen thousand dollars of a compensable workers' 445  
compensation medical-only claim filed by that claimant that is 446  
related to the same injury or occupational disease. No formal 447  
application is required; however, an employer must elect to 448  
participate by telephoning the bureau after July 1, 1995. Once an 449

employer has elected to participate in the program, the employer 450  
will be responsible for all bills in all medical-only claims with 451  
a date of injury the same or later than the election date, unless 452  
the employer notifies the bureau within fourteen days of receipt 453  
of the notification of a claim being filed that it does not wish 454  
to pay the bills in that claim, or the employer notifies the 455  
bureau that the fifteen thousand dollar maximum has been paid, or 456  
the employer notifies the bureau of the last day of service on 457  
which it will be responsible for the bills in a particular 458  
medical-only claim. If an employer elects to enter the program, 459  
the administrator shall not reimburse the employer for such 460  
amounts paid and shall not charge the first fifteen thousand 461  
dollars of any medical-only claim paid by an employer to the 462  
employer's experience or otherwise use it in merit rating or 463  
determining the risks of any employer for the purpose of payment 464  
of premiums under this chapter. If an employer elects to enter the 465  
program and the employer fails to pay a bill for a medical-only 466  
claim included in the program, the employer shall be liable for 467  
that bill and the employee for whom the employer failed to pay the 468  
bill shall not be liable for that bill. The administrator shall 469  
adopt rules to implement and administer division (A)(6) of this 470  
section. Upon written request from the bureau, the employer shall 471  
provide documentation to the bureau of all medical-only bills that 472  
they are paying directly. Such requests from the bureau may not be 473  
made more frequently than on a semiannual basis. Failure to 474  
provide such documentation to the bureau within thirty days of 475  
receipt of the request may result in the employer's forfeiture of 476  
participation in the program for such injury. The provisions of 477  
this section shall not apply to claims in which an employer with 478  
knowledge of a claimed compensable injury or occupational disease, 479  
has paid wages in lieu of compensation or total disability. 480

(B) The administrator, with the advice and consent of the 481  
board, by rule, may do both of the following: 482



(1) Grant an employer who makes the employer's semiannual premium payment at least one month prior to the last day on which the payment may be made without penalty, a discount as the administrator fixes from time to time;

(2) Levy a minimum annual administrative charge upon risks where semiannual premium reports develop a charge less than the administrator considers adequate to offset administrative costs of processing.

Sec. 4123.292. (A) Notwithstanding sections 4123.35 and 4123.82 of the Revised Code, an employer may elect to obtain other-states' coverage through an other-states' insurer or, if the administrator of workers' compensation elects to offer such coverage, through the administrator pursuant to division (B) of this section. An employer who elects to obtain other-states' coverage shall submit a written notice to the administrator stating that election and, if the employer elects to obtain that coverage through an other-states' insurer, the name of the other-states' insurer through whom the employer has obtained that coverage. If an employer fails to pay the employer's premium for other-states' coverage, the administrator shall consider the employer to be noncompliant for the purposes of having other-states' coverage but shall not consider the employer to be a noncomplying employer for purposes of this chapter or Chapter 4121., 4127., or 4131. of the Revised Code unless the employer otherwise fails to comply with section 4123.35 of the Revised Code.

(B) The administrator may secure other-states' coverage to allow an employer who wishes to obtain other-states' coverage pursuant to this section and who elects to obtain that coverage through the administrator for workers' compensation claims arising in a state or states other than this state. If the administrator

elects to secure other-states' coverage, the administrator shall 514  
follow the competitive bidding requirements specified in Chapter 515  
125. of the Revised Code to select one other-states' insurer, and 516  
the administrator, with the advice and consent of the bureau of 517  
workers' compensation board of directors, shall award the contract 518  
to provide other-states' coverage for employers located in this 519  
state to the other-states' insurer that is the lowest and best 520  
bidder. 521

(C) If the administrator elects to secure other-states' 522  
coverage pursuant to division (B) of this section, the 523  
administrator shall calculate an employer's premium for 524  
other-states' coverage provided through the administrator 525  
separately from calculating any other premiums or assessments 526  
charged under this chapter or Chapter 4121., 4127., or 4131. of 527  
the Revised Code. The administrator shall calculate the employer's 528  
other-states' coverage premium in the same manner the 529  
administrator calculates an employer's premium for the state 530  
insurance fund pursuant to division (A) of section 4123.29 and 531  
section 4123.34 of the Revised Code, except that, when calculating 532  
the employer's premium for other-states' coverage under this 533  
division, the administrator shall do all of the following: 534

(1) Base the employer's other-states' coverage premium on the 535  
terms specified in the contract the administrator enters into with 536  
an insurance company pursuant to division (B) of this section; 537

(2) When determining the expenditure of wages, payroll, or 538  
both upon which to base the employer's other-states' coverage 539  
premium, use only the amount of wages, payroll, or both the 540  
employer paid to the employer's employees for performing labor or 541  
providing services for the employer in a state or states other 542  
than this state; 543  
544

(3) Not take into account the amount of wages, payroll, or 545

both the employer paid to the employer's employees for performing 546  
labor or providing services for the employer in this state or any 547  
compensation or benefits paid for claims covered by the state 548  
insurance fund. 549

(D) If the administrator elects to secure other states' 550  
coverage, the administrator, with the advice and consent of the 551  
board, shall adopt rules to implement divisions (B) and (C) of 552  
this section. 553

(E) An other-states' insurer that provides other-states' 554  
coverage to an employer pursuant to this section shall do all of 555  
the following when calculating the employer's premium for that 556  
coverage: 557

(1) When determining the amount of wages, payroll, or both 558  
upon which to base the employer's premium, use only the amount of 559  
wages, payroll, or both the employer paid to the employer's 560  
employees for performing labor or providing services for the 561  
employer in a state or states other than this state; 562

(2) Not take into account the amount of wages, payroll, or 563  
both the employer paid to the employer's employees for performing 564  
labor or providing services for the employer in this state or any 565  
compensation or benefits paid for claims otherwise covered by this 566  
chapter or Chapter 4121., 4127., or 4131. of the Revised Code; 567

(3) Take into account any other factors the other-states' 568  
insurer uses to calculate premiums for workers' compensation 569  
insurance. 570

(F) The board and the individual members thereof, the 571  
administrator, and the bureau of workers' compensation shall not 572  
incur any obligation or liability if another state determines that 573  
the other-states' coverage provided under this section does not 574  
satisfy the requirements specified in that state's workers' 575  
compensation law for obtaining workers' compensation coverage in 576

that state. 577

**Sec. 4123.51.** The administrator of workers' compensation 578  
shall by published notices and other appropriate means endeavor to 579  
cause claims to be filed in the service office of the bureau of 580  
workers' compensation from which the investigation and 581  
determination of the claim may be made most expeditiously. A claim 582  
or appeal under this chapter or Chapter 4121., 4127., or 4131. of 583  
the Revised Code may be filed with any office of the bureau of 584  
workers' compensation or the industrial commission, within the 585  
required statutory period, and is considered received for the 586  
purpose of processing the claims or appeals. 587

The administrator, on the form an employee or an individual 588  
acting on behalf of the employee files with the administrator or a 589  
self-insuring employer to initiate a claim under this chapter or 590  
Chapter 4121., 4127., or 4131. of the Revised Code, shall include 591  
a statement that is substantially similar to the following 592  
statement in bold font and set apart from all other text in the 593  
form: 594

"By signing this form, I elect to receive workers' 595  
compensation benefits for this claim from only the state of Ohio. 596  
I understand and I hereby waive and release my right to receive 597  
compensation and benefits under the workers' compensation laws of 598  
another state for the injury or occupational disease, or the death 599  
resulting from an injury or occupational disease, for which I am 600  
filing this claim. I have not received compensation and benefits 601  
under the workers' compensation laws of another state for this 602  
claim, and I will not file a claim in another state for the injury 603  
or occupational disease or death resulting from an injury or 604  
occupational disease for which I am filing this claim." 605

**Sec. 4123.54.** (A) Every employee, who is injured or who 606

contracts an occupational disease, and the dependents of each 607  
employee who is killed, or dies as the result of an occupational 608  
disease contracted in the course of employment, wherever such 609  
injury has occurred or occupational disease has been contracted, 610  
provided the same were not: 611

(1) Purposely self-inflicted; or 612

(2) Caused by the employee being intoxicated or under the 613  
influence of a controlled substance not prescribed by a physician 614  
where the intoxication or being under the influence of the 615  
controlled substance not prescribed by a physician was the 616  
proximate cause of the injury, is entitled to receive, either 617  
directly from the employee's self-insuring employer as provided in 618  
section 4123.35 of the Revised Code, or from the state insurance 619  
fund, the compensation for loss sustained on account of the 620  
injury, occupational disease, or death, and the medical, nurse, 621  
and hospital services and medicines, and the amount of funeral 622  
expenses in case of death, as are provided by this chapter. 623

(B) For the purpose of this section, provided that an 624  
employer has posted written notice to employees that the results 625  
of, or the employee's refusal to submit to, any chemical test 626  
described under this division may affect the employee's 627  
eligibility for compensation and benefits pursuant to this chapter 628  
and Chapter 4121. of the Revised Code, there is a rebuttable 629  
presumption that an employee is intoxicated or under the influence 630  
of a controlled substance not prescribed by the employee's 631  
physician and that being intoxicated or under the influence of a 632  
controlled substance not prescribed by the employee's physician is 633  
the proximate cause of an injury under either of the following 634  
conditions: 635

(1) When any one or more of the following is true: 636

(a) The employee, through a qualifying chemical test 637

administered within eight hours of an injury, is determined to 638  
have an alcohol concentration level equal to or in excess of the 639  
levels established in divisions (A)(1)(b) to (i) of section 640  
4511.19 of the Revised Code; 641

(b) The employee, through a qualifying chemical test 642  
administered within thirty-two hours of an injury, is determined 643  
to have one of the following controlled substances not prescribed 644  
by the employee's physician in the employee's system that tests 645  
above the following levels in an enzyme multiplied immunoassay 646  
technique screening test and above the levels established in 647  
division (B)(1)(c) of this section in a gas chromatography mass 648  
spectrometry test: 649

(i) For amphetamines, one thousand nanograms per milliliter 650  
of urine; 651

(ii) For cannabinoids, fifty nanograms per milliliter of 652  
urine; 653

(iii) For cocaine, including crack cocaine, three hundred 654  
nanograms per milliliter of urine; 655

(iv) For opiates, two thousand nanograms per milliliter of 656  
urine; 657

(v) For phencyclidine, twenty-five nanograms per milliliter 658  
of urine. 659

(c) The employee, through a qualifying chemical test 660  
administered within thirty-two hours of an injury, is determined 661  
to have one of the following controlled substances not prescribed 662  
by the employee's physician in the employee's system that tests 663  
above the following levels by a gas chromatography mass 664  
spectrometry test: 665

(i) For amphetamines, five hundred nanograms per milliliter 666  
of urine; 667

(ii) For cannabinoids, fifteen nanograms per milliliter of urine;	668 669
(iii) For cocaine, including crack cocaine, one hundred fifty nanograms per milliliter of urine;	670 671
(iv) For opiates, two thousand nanograms per milliliter of urine;	672 673
(v) For phencyclidine, twenty-five nanograms per milliliter of urine.	674 675
(d) The employee, through a qualifying chemical test administered within thirty-two hours of an injury, is determined to have barbiturates, benzodiazepines, methadone, or propoxyphene in the employee's system that tests above levels established by laboratories certified by the United States department of health and human services.	676 677 678 679 680 681
(2) When the employee refuses to submit to a requested chemical test, on the condition that that employee is or was given notice that the refusal to submit to any chemical test described in division (B)(1) of this section may affect the employee's eligibility for compensation and benefits under this chapter and Chapter 4121. of the Revised Code.	682 683 684 685 686 687
(C)(1) For purposes of division (B) of this section, a chemical test is a qualifying chemical test if it is administered to an employee after an injury under at least one of the following conditions:	688 689 690 691
(a) When the employee's employer had reasonable cause to suspect that the employee may be intoxicated or under the influence of a controlled substance not prescribed by the employee's physician;	692 693 694 695
(b) At the request of a police officer pursuant to section 4511.191 of the Revised Code, and not at the request of the	696 697

employee's employer; 698

(c) At the request of a licensed physician who is not 699  
employed by the employee's employer, and not at the request of the 700  
employee's employer. 701

(2) As used in division (C)(1)(a) of this section, 702  
"reasonable cause" means, but is not limited to, evidence that an 703  
employee is or was using alcohol or a controlled substance drawn 704  
from specific, objective facts and reasonable inferences drawn 705  
from these facts in light of experience and training. These facts 706  
and inferences may be based on, but are not limited to, any of the 707  
following: 708

(a) Observable phenomena, such as direct observation of use, 709  
possession, or distribution of alcohol or a controlled substance, 710  
or of the physical symptoms of being under the influence of 711  
alcohol or a controlled substance, such as but not limited to 712  
slurred speech, dilated pupils, odor of alcohol or a controlled 713  
substance, changes in affect, or dynamic mood swings; 714

(b) A pattern of abnormal conduct, erratic or aberrant 715  
behavior, or deteriorating work performance such as frequent 716  
absenteeism, excessive tardiness, or recurrent accidents, that 717  
appears to be related to the use of alcohol or a controlled 718  
substance, and does not appear to be attributable to other 719  
factors; 720

(c) The identification of an employee as the focus of a 721  
criminal investigation into unauthorized possession, use, or 722  
trafficking of a controlled substance; 723

(d) A report of use of alcohol or a controlled substance 724  
provided by a reliable and credible source; 725

(e) Repeated or flagrant violations of the safety or work 726  
rules of the employee's employer, that are determined by the 727  
employee's supervisor to pose a substantial risk of physical 728



injury or property damage and that appear to be related to the use 729  
of alcohol or a controlled substance and that do not appear 730  
attributable to other factors. 731

(D) Nothing in this section shall be construed to affect the 732  
rights of an employer to test employees for alcohol or controlled 733  
substance abuse. 734

(E) For the purpose of this section, laboratories certified 735  
by the United States department of health and human services or 736  
laboratories that meet or exceed the standards of that department 737  
for laboratory certification shall be used for processing the test 738  
results of a qualifying chemical test. 739

(F) The written notice required by division (B) of this 740  
section shall be the same size or larger then the certificate of 741  
premium payment notice furnished by the bureau of workers' 742  
compensation and shall be posted by the employer in the same 743  
location as the certificate of premium payment notice or the 744  
certificate of self-insurance. 745

(G) If a condition that pre-existed an injury is 746  
substantially aggravated by the injury, and that substantial 747  
aggravation is documented by objective diagnostic findings, 748  
objective clinical findings, or objective test results, no 749  
compensation or benefits are payable because of the pre-existing 750  
condition once that condition has returned to a level that would 751  
have existed without the injury. 752

(H)(1) Whenever, with respect to an employee of an employer 753  
who is subject to and has complied with this chapter, there is 754  
possibility of conflict with respect to the application of 755  
workers' compensation laws because the contract of employment is 756  
entered into and all or some portion of the work is or is to be 757  
performed in a state or states other than Ohio, the employer and 758  
the employee may agree to be bound by the laws of this state or by 759

the laws of some other state in which all or some portion of the 760  
work of the employee is to be performed. The agreement shall be in 761  
writing and shall be filed with the bureau of workers' 762  
compensation within ten days after it is executed and shall remain 763  
in force until terminated or modified by agreement of the parties 764  
similarly filed. If the agreement is to be bound by the laws of 765  
this state and the employer has complied with this chapter, then 766  
the employee is entitled to compensation and benefits regardless 767  
of where the injury occurs or the disease is contracted and the 768  
rights of the employee and the employee's dependents under the 769  
laws of this state are the exclusive remedy against the employer 770  
on account of injury, disease, or death in the course of and 771  
arising out of the employee's employment. If the agreement is to 772  
be bound by the laws of another state and the employer has 773  
complied with the laws of that state, the rights of the employee 774  
and the employee's dependents under the laws of that state are the 775  
exclusive remedy against the employer on account of injury, 776  
disease, or death in the course of and arising out of the 777  
employee's employment without regard to the place where the injury 778  
was sustained or the disease contracted. If an employer and an 779  
employee enter into an agreement under this division, the fact 780  
that the employer and the employee entered into that agreement 781  
shall not be construed to change the status of an employee whose 782  
continued employment is subject to the will of the employer or the 783  
employee, unless the agreement contains a provision that expressly 784  
changes that status. 785

(2) If any employee or the employee's dependents ~~are awarded~~ 786  
~~pursue~~ workers' compensation benefits or recover damages from the 787  
employer under the laws of another state, ~~the amount awarded or~~ 788  
~~recovered, whether paid or to be paid in future installments,~~ 789  
~~shall be credited on the amount of any~~ and the employee or the 790  
employee's dependents also pursue or receive an award of 791  
compensation or benefits ~~made to the employee or the employee's~~ 792

dependents by the bureau under this chapter or Chapter 4121., 793  
4127., or 4131. of the Revised Code for the same injury, 794  
occupational disease, or death for which the employee or the 795  
employee's dependents pursued workers' compensation benefits or 796  
recovered damages under the laws of another state, the 797  
administrator or any employer, by any lawful means, may collect 798  
the amount of compensation or benefits paid to or on behalf of the 799  
employee or the employee's dependents by the administrator or a 800  
self-insuring employer pursuant to this chapter or Chapter 4121., 801  
4127., or 4131. of the Revised Code for that award. The 802  
administrator or any employer also may collect from the employee 803  
or the employee's dependents any costs and attorney's fees the 804  
administrator or the employer incurs in collecting that payment 805  
and any attorney's fees, penalties, interest, awards, and costs 806  
incurred by an employer in contesting or responding to any claim 807  
after the original claim under section 4123.542 of the Revised 808  
Code by that employee or the employee's dependents. If the 809  
employee's employer pays premiums into the state insurance fund, 810  
the administrator shall not charge the amount of compensation or 811  
benefits the administrator collects pursuant to this division to 812  
the employer's experience. If the administrator collects any costs 813  
or attorney's fees incurred by a state fund employer, the 814  
administrator shall forward the amount of such costs and fees the 815  
administrator collects to that employer. If the employee's 816  
employer is a self-insuring employer, the self-insuring employer 817  
shall deduct the amount of compensation or benefits the 818  
self-insuring employer collects pursuant to this division from the 819  
paid compensation the self-insuring employer reports to the 820  
administrator under division (L) of section 4123.35 of the Revised 821  
Code. 822

¶ (3) Except as otherwise stipulated in division (H)(4) of 823  
this section, if an employee is a resident of a state other than 824  
this state and is insured under the workers' compensation law or 825

similar laws of a state other than this state, the employee and 826  
the employee's dependents are not entitled to receive compensation 827  
or benefits under this chapter, on account of injury, disease, or 828  
death arising out of or in the course of employment while 829  
temporarily within this state, and the rights of the employee and 830  
the employee's dependents under the laws of the other state are 831  
the exclusive remedy against the employer on account of the 832  
injury, disease, or death. 833

(4) Division (H)(3) of this section does not apply to an 834  
employee described in that division, or the employee's dependents, 835  
unless both of the following apply: 836

(a) The laws of the other state limit the ability of an 837  
employee who is a resident of this state and is covered by this 838  
chapter and Chapter 4123. of the Revised Code, or the employee's 839  
dependents, to receive compensation or benefits under the other 840  
state's workers' compensation law on account of injury, disease, 841  
or death incurred by the employee that arises out of or in the 842  
course of the employee's employment while temporarily within that 843  
state in the same manner as specified in division (H)(3) of this 844  
section for an employee who is a resident of a state other than 845  
this state, or the employee's dependents; 846

(b) The laws of the other state limit the liability of the 847  
employer of the employee who is a resident of this state and who 848  
is described in division (H)(4)(a) of this section for that 849  
injury, disease, or death, in the same manner specified in 850  
division (H)(3) of this section for the employer of an employee 851  
who is a resident of the other state. 852

(5) An employee, or the dependent of an employee, who elects 853  
to receive compensation and benefits under this chapter or Chapter 854  
4121., 4127., or 4131. of the Revised Code for a claim may not 855  
receive compensation and benefits under the workers' compensation 856  
laws of any state other than this state for that same claim. For 857

each claim submitted by or on behalf of an employee, the 858  
administrator or, if the employee is employed by a self-insuring 859  
employer, the self-insuring employer shall request the employee or 860  
the employee's dependent to sign an election that affirms the 861  
employee's or employee's dependent's acceptance of electing to 862  
receive compensation and benefits under this chapter or Chapter 863  
4121., 4127., or 4131. of the Revised Code for that claim that 864  
also affirmatively waives and releases the employee's or the 865  
employee's dependent's right to file for and receive compensation 866  
and benefits under the laws of any state other than this state for 867  
that claim. The employee or employee's dependent shall sign the 868  
election form within twenty-eight days after the administrator or 869  
self-insuring employer submits the request or the administrator or 870  
self-insuring employer shall suspend that claim until the 871  
administrator or self-insuring employer receives the signed 872  
election form. 873

(I) Compensation or benefits are not payable to a claimant 874  
during the period of confinement of the claimant in any state or 875  
federal correctional institution, or in any county jail in lieu of 876  
incarceration in a state or federal correctional institution, 877  
whether in this or any other state for conviction of violation of 878  
any state or federal criminal law. 879

**Sec. 4123.542.** An employee or the dependents of an employee 880  
who receive a decision on the merits of a claim for compensation 881  
or benefits under this chapter or Chapter 4121., 4127., or 4131. 882  
of the Revised Code shall not file a claim for the same injury, 883  
occupational disease, or death in another state under the workers' 884  
compensation laws of that state. An employee or the employee's 885  
dependents who receive a decision on the merits of a claim for 886  
compensation or benefits under the workers' compensation laws of 887  
another state shall not file a claim for compensation and benefits 888  
under this chapter or Chapter 4121., 4127., or 4131. of the 889

Revised Code for the same injury, occupational disease, or death. 890

891

As used in this section, "a decision on the merits" means a 892

decision determined or adjudicated for compensability of a claim 893

and not on jurisdictional grounds. 894

**Sec. 4123.82.** (A) All contracts and agreements are void which 895

undertake to indemnify or insure an employer against loss or 896

liability for the payment of compensation to workers or their 897

dependents for death, injury, or occupational disease occasioned 898

in the course of the workers' employment, or which provide that 899

the insurer shall pay the compensation, or which indemnify the 900

employer against damages when the injury, disease, or death arises 901

from the failure to comply with any lawful requirement for the 902

protection of the lives, health, and safety of employees, or when 903

the same is occasioned by the willful act of the employer or any 904

of the employer's officers or agents, or by which it is agreed 905

that the insurer shall pay any such damages. No license or 906

authority to enter into any such agreements or issue any such 907

policies of insurance shall be granted or issued by any public 908

authority in this state. Any corporation organized or admitted 909

under the laws of this state to transact liability insurance as 910

defined in section 3929.01 of the Revised Code may by amendment of 911

its articles of incorporation or by original articles of 912

incorporation, provide therein for the authority and purpose to 913

make insurance in states, territories, districts, and counties, 914

other than the state of Ohio, and in the state of Ohio in respect 915

of contracts permitted by division (B) of this section, 916

indemnifying employers against loss or liability for payment of 917

compensation to workers and employees and their dependents for 918

death, injury, or occupational disease occasioned in the course of 919

the employment and to insure and indemnify employers against loss, 920

expense, and liability by risk of bodily injury or death by 921  
accident, disability, sickness, or disease suffered by workers and 922  
employees for which the employer may be liable or has assumed 923  
liability. 924

(B) Notwithstanding division (A) of this section: 925

(1) No contract because of that division is void which 926  
undertakes to indemnify a self-insuring employer against all or 927  
part of such employer's loss in excess of at least fifty thousand 928  
dollars from any one disaster or event arising out of the 929  
employer's liability under this chapter, but no insurance 930  
corporation shall, directly or indirectly, represent an employer 931  
in the settlement, adjudication, determination, allowance, or 932  
payment of claims. The superintendent of insurance shall enforce 933  
this prohibition by such disciplinary orders directed against the 934  
offending insurance corporation as the superintendent of insurance 935  
deems appropriate in the circumstances and the administrator of 936  
workers' compensation shall enforce this prohibition by such 937  
disciplinary orders directed against the offending employer as the 938  
administrator deems appropriate in the circumstances, which orders 939  
may include revocation of the insurance corporation's right to 940  
enter into indemnity contracts and revocation of the employer's 941  
status as a self-insuring employer. 942

(2) The administrator may enter into a contract of indemnity 943  
with any such employer upon such terms, payment of such premium, 944  
and for such amount and form of indemnity as the administrator 945  
determines and the bureau of workers' compensation board of 946  
directors may procure reinsurance of the liability of the public 947  
and private funds under this chapter, or any part of the liability 948  
in respect of either or both of the funds, upon such terms and 949  
premiums or other payments from the fund or funds as the 950  
administrator deems prudent in the maintenance of a solvent fund 951  
or funds from year to year. When making the finding of fact which 952

the administrator is required by section 4123.35 of the Revised Code to make with respect to the financial ability of an employer, no contract of indemnity, or the ability of the employer to procure such a contract, shall be considered as increasing the financial ability of the employer.

(C) Nothing in this section shall be construed to prohibit the administrator or an other-states' insurer from providing to employers in this state other-states' coverage in accordance with section 4123.292 of the Revised Code.

**Sec. 4123.88.** (A) No person shall orally or in writing, directly or indirectly, or through any agent or other person fraudulently hold the person's self out or represent the person's self or any of the person's partners or associates as authorized by a claimant or employer to take charge of, or represent the claimant or employer in respect of, any claim or matter in connection therewith before the bureau of workers' compensation or the industrial commission or its district or staff hearing officers. No person shall directly or indirectly solicit authority, or pay or give anything of value to another person to solicit authority, or accept or receive pay or anything of value from another person for soliciting authority, from a claimant or employer to take charge of, or represent the claimant or employer in respect of, any claim or appeal which is or may be filed with the bureau or commission. No person shall, without prior authority from the bureau, a member of the commission, the claimant, or the employer, examine or directly or indirectly cause or employ another person to examine any claim file or any other file pertaining thereto. No person shall forge an authorization for the purpose of examining or cause another person to examine any such file. No district or staff hearing officer or other employee of the bureau or commission, notwithstanding the provisions of section 4123.27 of the Revised Code, shall divulge any information



in respect of any claim or appeal which is or may be filed with a 985  
district or staff hearing officer, the bureau, or commission to 986  
any person other than members of the commission or to the superior 987  
of the employee except upon authorization of the administrator of 988  
workers' compensation or a member of the commission or upon 989  
authorization of the claimant or employer. 990

(B) The records described or referred to in division (A) of 991  
this section are not public records as defined in division (A)(1) 992  
of section 149.43 of the Revised Code. Any information directly or 993  
indirectly identifying the address or telephone number of a 994  
claimant, regardless of whether the claimant's claim is active or 995  
closed, is not a public record. No person shall solicit or obtain 996  
any such information from any such employee without first having 997  
obtained an authorization therefor as provided in this section. 998

(C) Except as otherwise specified in division (D) of this 999  
section, information kept by the commission or the bureau pursuant 1000  
to this section is for the exclusive use and information of the 1001  
commission and the bureau in the discharge of their official 1002  
duties, and shall not be open to the public nor be used in any 1003  
court in any action or proceeding pending therein, unless the 1004  
commission or the bureau is a party to the action or proceeding. 1005  
The information, however, may be tabulated and published by the 1006  
commission or the bureau in statistical form for the use and 1007  
information of other state agencies and the public. 1008

(D)(1) Upon receiving a written request made and signed by an 1009  
individual whose primary occupation is as a journalist, the 1010  
commission or the bureau shall disclose to the ~~journalist~~ 1011  
individual the address or addresses and telephone number or 1012  
numbers of claimants, regardless of whether their claims are 1013  
active or closed, and the dependents of those claimants. 1014

(2) ~~A journalist~~ An individual described in division (D)(1) 1015  
of this section is permitted to request the information described 1016

in that division ~~(D)(1)~~ of ~~this section~~ for multiple workers or 1017  
dependents in one written request. 1018

(3) ~~A journalist~~ An individual described in division (D)(1) 1019  
of this section shall include all of the following in the written 1020  
request: 1021

(a) The ~~journalist's~~ individual's name, title, and signature; 1022

(b) The name and title of the ~~journalist's~~ individual's 1023  
employer; 1024

(c) A statement that the disclosure of the information sought 1025  
is in the public interest. 1026

(4) Neither the commission nor the bureau may inquire as to 1027  
the specific public interest served by the disclosure of 1028  
information requested by a ~~journalist~~ an individual under division 1029  
(D) of this section. 1030

(E) As used in this section, "journalist" has the same 1031  
meaning as in division (B)(9) of section 149.43 of the Revised 1032  
Code. 1033

**Section 2.** That existing sections 4123.01, 4123.26, 4123.29, 1034  
4123.51, 4123.54, 4123.82, and 4123.88 of the Revised Code are 1035  
hereby repealed. 1036

**Section 3.** This act applies to all claims pursuant to 1037  
Chapters 4121., 4123., 4127., and 4131. of the Revised Code 1038  
arising on and after the effective date of this act. 1039

**Section 4.** In the case of any institution of higher education 1040  
that has sustained claims arising from deaths and injuries of a 1041  
catastrophic nature arising from a motor vehicle accident 1042  
occurring outside of this state, the Administrator of Workers' 1043  
Compensation shall suspend the imposition of any premium increase 1044

or any change in the experience of such an institution of higher 1045  
education until after the conclusion of any subrogation claims 1046  
that are brought by the Administrator in relation to those deaths 1047  
and injuries. 1048

**Section 5.** Notwithstanding division (A) of section 4121.78 of 1049  
the Revised Code, any legislation proposing to make changes to 1050  
Chapters 4121., 4123., 4125., 4127., and 4131. of the Revised Code 1051  
that is enacted by the General Assembly on or before June 30, 1052  
2008, shall not be subject to the requirement of the Workers' 1053  
Compensation Council to study all changes to those chapters and to 1054  
report to the General Assembly on their probable costs, actuarial 1055  
implications, and desirability as a matter of public policy. 1056