

Sub. H.B. 1

LSC 128 0516-4

HC-2255-2

\_\_\_\_\_ moved to amend as follows:

In line 494, after "1547.87," insert "1751.68," 1

In line 512, after "3923.241," insert "3923.84," 2

In line 24010, after "3923.80," insert "3923.84," 3

Between lines 25098 and 25099, insert: 4

"Sec. 1751.68. (A) Notwithstanding section 3901.71 of the 5  
Revised Code, no health insuring corporation policy, contract, or 6  
agreement that provides basic health care services that is 7  
delivered, issued for delivery, or renewed in this state shall 8  
exclude coverage for the screening and diagnosis of autism 9  
spectrum disorders or for any of the following services when those 10  
services are medically necessary and are prescribed, provided, or 11  
ordered for an individual diagnosed with an autism spectrum 12  
disorder by a health care professional licensed or certified under 13  
the laws of this state to prescribe, provide, or order such 14  
services: 15

(1) Habilitative or rehabilitative care; 16

(2) Pharmacy care if the policy, contract, or agreement 17  
provides coverage for other prescription drug services; 18

(3) Psychiatric care; 19

<u>(4) Psychological care;</u>	20
<u>(5) Therapeutic care;</u>	21
<u>(6) Counseling services;</u>	22
<u>(7) Any additional treatments or therapies adopted by the</u>	23
<u>director of mental retardation and developmental disabilities</u>	24
<u>pursuant to division (I) (4) of section 3923.84 of the Revised</u>	25
<u>Code.</u>	26
<u>(B) Coverage provided under this section shall be delineated</u>	27
<u>in a treatment plan developed by the attending psychologist or</u>	28
<u>physician and shall not be subject to any limits on the number or</u>	29
<u>duration of visits an individual may make to any autism service</u>	30
<u>provider, except as delineated in the treatment plan, if the</u>	31
<u>services are medically necessary.</u>	32
<u>(C) Coverage provided under this section may be subject to</u>	33
<u>any copayment, deductible, and coinsurance provisions of the</u>	34
<u>policy, contract, or agreement to the extent that other medical</u>	35
<u>services covered by the policy, contract, or agreement are subject</u>	36
<u>to those provisions. Coverage provided under this section may be</u>	37
<u>subject to a yearly maximum limitation of thirty-six thousand</u>	38
<u>dollars on claims paid for services related to coverage provided</u>	39
<u>under this section.</u>	40
<u>(D) (1) Not more than once every six months, a health insuring</u>	41
<u>corporation may request a review of any treatment provided under</u>	42
<u>this section unless the insured's licensed physician or licensed</u>	43
<u>psychologist agrees that more frequent review is necessary. The</u>	44
<u>health insuring corporation shall pay for any review requested</u>	45
<u>under this division.</u>	46
<u>(2) If requested by the health insuring corporation, the</u>	47
<u>provider shall provide the health insuring corporation with an</u>	48
<u>annual treatment plan.</u>	49

(3) Inpatient services are not subject to the six-month review limitations under division (D)(1) of this section. 50  
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(E) This section shall not be construed as limiting benefits otherwise available under an individual's policy, contract, or agreement. 52  
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(F) This section shall not be construed as affecting any obligation to provide services to an individual under an individualized family service plan developed under 20 U.S.C. 1436 or individualized service plan developed under section 5126.31 of the Revised Code, or affecting the duty of a public school to provide a child with a disability with a free appropriate public education under the "Individuals with Disabilities Education Improvement Act of 2004," 20 U.S.C. 1400 et seq., as amended, and Chapter 3323. of the Revised Code. 55  
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(G) A health insuring corporation that offers coverage for basic health care services is not required to offer the coverage required under division (A) of this section in combination with the offer of coverage for basic health care services if all of the following apply: 64  
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(1) The health insuring corporation submits documentation certified by an independent member of the American academy of actuaries to the superintendent of insurance showing that incurred claims for the coverage required under division (A) of this section for a period of at least six months independently caused the health insuring corporation's costs for claims and administrative expenses for the coverage of all covered services to increase by more than one per cent per year. 69  
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(2) The health insuring corporation submits a signed letter from an independent member of the American academy of actuaries to the superintendent of insurance opining that the increase in costs described in division (D)(1) of this section could reasonably 77  
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justify an increase of more than one per cent in the annual 81  
premiums or rates charged by the health insuring corporation for 82  
the coverage of basic health care services. 83

(3) The superintendent of insurance makes the following 84  
determinations from the documentation and opinion submitted 85  
pursuant to divisions (D) (1) and (2) of this section: 86

(a) Incurred claims for the coverage required under division 87  
(A) of this section for a period of at least six months 88  
independently caused the health insuring corporation's costs for 89  
claims and administrative expenses for the coverage of all covered 90  
services to increase by more than one per cent per year. 91

(b) The increase in costs reasonably justifies an increase of 92  
more than one per cent in the annual premiums or rates charged by 93  
the health insuring corporation for the coverage of basic health 94  
care services. 95

Any determination made by the superintendent under this 96  
division is subject to Chapter 119. of the Revised Code. 97

(H) The services covered under this section shall not be 98  
considered supplemental health care services under division (B) (1) 99  
of section 1751.01 of the Revised Code. 100

(I) As used in this section: 101

(1) "Applied behavior analysis" means the design, 102  
implementation, and evaluation of environmental modifications 103  
using behavioral stimuli and consequences to produce socially 104  
significant improvement in human behavior, including, but not 105  
limited to, the use of direct observation, measurement, and 106  
functional analysis of the relationship between environment and 107  
behavior. 108

(2) "Autism services provider" means any person whose 109  
professional scope of practice allows treatment of autism spectrum 110



disorders, whose services are delineated in the treatment plan 111  
under division (B) of this section, and of whom one of the 112  
following is true: 113

(a) The person is licensed, certified, or registered by an 114  
appropriate agency of this state to perform the services assigned 115  
to the person in the treatment plan. 116

(b) The person is directly supervised by an individual who is 117  
licensed, certified, or registered by an appropriate agency of 118  
this state to perform the services assigned to the person in the 119  
treatment plan. 120

(3) "Autism spectrum disorder" means any of the pervasive 121  
developmental disorders as defined by the most recent edition of 122  
the diagnostic and statistical manual of mental disorders, 123  
published by the American psychiatric association, or if that 124  
manual is no longer published, a similar diagnostic manual. Autism 125  
spectrum disorders includes, but is not limited to, autistic 126  
disorder, Asperger's disorder, Rett's disorder, childhood 127  
disintegrative disorder, and pervasive developmental disorder. 128

(4) "Diagnosis of autism spectrum disorders" means medically 129  
necessary assessments, evaluations, or tests, including but not 130  
limited to genetic and psychological tests to determine whether an 131  
individual has an autism spectrum disorder. 132

(5) "Habilitative or rehabilitative care" means professional, 133  
counseling, and guidance services and treatment programs, 134  
including applied behavior analysis, that are necessary to 135  
develop, maintain, or restore the functioning of an individual to 136  
the maximum extent practicable. 137

(6) "Medically necessary" means the service is based upon 138  
evidence; is prescribed, provided, or ordered by a health care 139  
professional licensed or certified under the laws of this state to 140

prescribe, provide, or order autism-related services in accordance 141  
with accepted standards of practice; and will or is reasonably 142  
expected to do any of the following: 143

(a) Prevent the onset of an illness, condition, injury, or 144  
disability; 145

(b) Reduce or ameliorate the physical, mental or 146  
developmental effects of an illness, condition, injury, or 147  
disability; 148

(c) Assist in achieving or maintaining maximum functional 149  
capacity for performing daily activities, taking into account both 150  
the functional capacity of the individual and the appropriate 151  
functional capacities of individuals of the same age. 152

(7) "Pharmacy care" means prescribed medications and any 153  
medically necessary health-related services used to determine the 154  
need or effectiveness of the medications. 155

(8) "Psychiatric care" means direct or consultative services 156  
provided by a psychiatrist licensed in the state in which the 157  
psychiatrist practices psychiatry. 158

(9) "Psychological care" means direct or consultative 159  
services provided by a psychologist licensed in the state in which 160  
the psychologist practices psychology. 161

(10) "Therapeutic care" means services, communication 162  
devices, or other adaptive devices or equipment provided by a 163  
licensed speech-language pathologist, licensed occupational 164  
therapist, or licensed physical therapist." 165

Between lines 68028 and 68029, insert: 166

"Sec. 3923.84. (A) Notwithstanding section 3901.71 of the 167  
Revised Code, no individual or group policy of sickness and 168  
accident insurance that is delivered, issued for delivery, or 169

<u>renewed in this state or public employee benefit plan established</u>	170
<u>or modified in this state shall exclude coverage for the screening</u>	171
<u>and diagnosis of autism spectrum disorders or for any of the</u>	172
<u>following services when those services are medically necessary and</u>	173
<u>are prescribed, provided, or ordered for an individual diagnosed</u>	174
<u>with an autism spectrum disorder by a health care professional</u>	175
<u>licensed or certified under the laws of this state to prescribe,</u>	176
<u>provide, or order such services:</u>	177
<u>(1) Habilitative or rehabilitative care;</u>	178
<u>(2) Pharmacy care if the policy, contract, or agreement</u>	179
<u>provides coverage for other prescription drug services;</u>	180
<u>(3) Psychiatric care;</u>	181
<u>(4) Psychological care;</u>	182
<u>(5) Therapeutic care;</u>	183
<u>(6) Counseling services;</u>	184
<u>(7) Any additional treatments or therapies adopted by the</u>	185
<u>director of mental retardation and developmental disabilities</u>	186
<u>pursuant to division (I) (4) of this section.</u>	187
<u>(B) Coverage provided under this section shall be delineated</u>	188
<u>in a treatment plan developed by the attending psychologist or</u>	189
<u>physician and shall not be subject to any limits on the number or</u>	190
<u>duration of visits an individual may make to any autism services</u>	191
<u>provider, except as indicated in the treatment plan, if the</u>	192
<u>services are medically necessary.</u>	193
<u>(C) Coverage provided under this section may be subject to</u>	194
<u>any copayment, deductible, and coinsurance provisions of the</u>	195
<u>policy or plan to the extent that other medical services covered</u>	196
<u>by the policy or plan are subject to those provisions. Coverage</u>	197
<u>provided under this section may be subject to a yearly maximum</u>	198

limitation of thirty-six thousand dollars on claims paid for 199  
services related to coverage provided under this section. 200

(D)(1) Not more than once every six months, an insurer may 201  
request a review of any treatment provided under this section 202  
unless the insured's licensed physician or licensed psychologist 203  
agrees that more frequent review is necessary. The insurer shall 204  
pay for any review requested under this division. 205

(2) If requested by the insurer, the provider shall provide 206  
the insurer with an annual treatment plan. 207

(3) Inpatient services are not subject to the six-month 208  
review limitation under division (D)(1) of this section. 209

(E) This section shall not be construed as limiting benefits 210  
otherwise available under an individual's policy or plan. 211

(F) This section shall not be construed as affecting any 212  
obligation to provide services to an individual under an 213  
individualized family service plan developed under 20 U.S.C. 1436 214  
or individualized service plan developed under section 5126.31 of 215  
the Revised Code, or affecting the duty of a public school to 216  
provide a child with a disability with a free appropriate public 217  
education under the "Individuals with Disabilities Education 218  
Improvement Act of 2004," 20 U.S.C. 1400 et seq., as amended, and 219  
Chapter 3323. of the Revised Code. 220

(G) This section does not apply to the offer or renewal of 221  
any individual or group policy of sickness and accident insurance 222  
that provides coverage for specific diseases or accidents only, or 223  
to any hospital indemnity, medicare supplement, medicare, tricare, 224  
long-term care, disability income, one-time limited duration 225  
policy of not longer than six months, or other policy that offers 226  
only supplemental benefits. 227

(H) A public employee benefit plan or insurer that offers a 228

policy of sickness and accident insurance is not required to offer 229  
the coverage required under division (A) of this section if all of 230  
the following apply: 231

(1) The insurer or public employee benefit plan submits 232  
documentation certified by an independent member of the American 233  
academy of actuaries to the superintendent of insurance showing 234  
that incurred claims for the coverage required under division (A) 235  
of this section for a period of at least six months independently 236  
caused the costs for claims and administrative expenses for the 237  
coverage of all covered services to increase by more than one per 238  
cent per year. 239

(2) The insurer or public employee benefit plan submits a 240  
signed letter from an independent member of the American academy 241  
of actuaries to the superintendent of insurance opining that the 242  
increase in costs described in division (D)(1) of this section 243  
could reasonably justify an increase of more than one per cent in 244  
the annual premiums or rates charged by the insurer or public 245  
employee benefit plan for the coverage of all covered services. 246

(3) The superintendent of insurance makes the following 247  
determinations from the documentation and opinion submitted 248  
pursuant to divisions (D)(1) and (2) of this section: 249

(a) Incurred claims for the coverage required under division 250  
(A) of this section for a period of at least six months 251  
independently caused the costs for claims and administrative 252  
expenses for the coverage of all covered services to increase by 253  
more than one per cent per year. 254

(b) The increase in costs reasonably justifies an increase of 255  
more than one per cent in the annual premiums or rates charged by 256  
the insurer or public employee benefit plan for the coverage of 257  
all covered services. 258

Any determination made by the superintendent under this 259  
division is subject to Chapter 119. of the Revised Code. 260

(I) (1) The director of mental retardation and developmental 261  
disabilities shall convene a committee on the coverage of autism 262  
spectrum disorders to investigate and recommend treatments or 263  
therapies for autism spectrum disorders that the committee 264  
believes should be included in the services that health benefit 265  
plans and public employee benefit plans are required to cover 266  
under division (A) of this section and the qualifications of the 267  
providers of those treatments or therapies. 268

(2) The committee shall consist of nine members appointed by 269  
the director of mental retardation and developmental disabilities 270  
including the director of mental retardation and developmental 271  
disabilities, the director of health, at least one licensed 272  
physician, licensed psychologist, and parent of an individual 273  
diagnosed with an autism spectrum disorder. 274

(3) The committee shall serve at the pleasure of the 275  
director. 276

(4) The committee shall submit its recommendations to the 277  
director of mental retardation and developmental disabilities. The 278  
director may adopt rules in accordance with Chapter 119. of the 279  
Revised Code to include additional treatments or therapies for 280  
autism spectrum disorders in the services that health benefit 281  
plans and public employee benefit plans are required to cover 282  
under division (A) of this section. 283

(J) As used in this section: 284

(1) "Applied behavior analysis" means the design, 285  
implementation, and evaluation of environmental modifications 286  
using behavioral stimuli and consequences to produce socially 287  
significant improvement in human behavior, including, but not 288

<u>limited to, the use of direct observation, measurement, and</u>	289
<u>functional analysis of the relationship between environment and</u>	290
<u>behavior.</u>	291
<u>(2) "Autism services provider" means any person whose</u>	292
<u>professional scope of practice allows treatment of autism spectrum</u>	293
<u>disorders, whose services are delineated in the treatment plan</u>	294
<u>under division (B) of this section, and of whom one of the</u>	295
<u>following is true:</u>	296
<u>(a) The person is licensed, certified, or registered by an</u>	297
<u>appropriate agency of this state to perform the services assigned</u>	298
<u>to the person in the treatment plan.</u>	299
<u>(b) The person is directly supervised by an individual who is</u>	300
<u>licensed, certified, or registered by an appropriate agency of</u>	301
<u>this state to perform the services assigned to the person in the</u>	302
<u>treatment plan.</u>	303
<u>(3) "Autism spectrum disorder" means any of the pervasive</u>	304
<u>developmental disorders as defined by the most recent edition of</u>	305
<u>the diagnostic and statistical manual of mental disorders,</u>	306
<u>published by the American psychiatric association, or if that</u>	307
<u>manual is no longer published, a similar diagnostic manual. Autism</u>	308
<u>spectrum disorders includes, but is not limited to, autistic</u>	309
<u>disorder, Asperger's disorder, Rett's disorder, childhood</u>	310
<u>disintegrative disorder, and pervasive developmental disorder.</u>	311
<u>(4) "Diagnosis of autism spectrum disorders" means medically</u>	312
<u>necessary assessments, evaluations, or tests, including but not</u>	313
<u>limited to genetic and psychological tests to determine whether an</u>	314
<u>individual has an autism spectrum disorder.</u>	315
<u>(5) "Habilitative or rehabilitative care" means professional,</u>	316
<u>counseling, and guidance services and treatment programs,</u>	317
<u>including applied behavior analysis, that are necessary to</u>	318

<u>develop, maintain, or restore the functioning of an individual to</u>	319
<u>the maximum extent practicable.</u>	320
<u>(6) "Health benefit plan" has the same meaning as in section</u>	321
<u>3924.01 of the Revised Code.</u>	322
<u>(7) "Medically necessary" means the service is based upon</u>	323
<u>evidence; is prescribed, provided, or ordered by a health care</u>	324
<u>professional licensed or certified under the laws of this state to</u>	325
<u>prescribe, provide, or order autism-related services in accordance</u>	326
<u>with accepted standards of practice; and will or is reasonably</u>	327
<u>expected to do any of the following:</u>	328
<u>(a) Prevent the onset of an illness, condition, injury, or</u>	329
<u>disability;</u>	330
<u>(b) Reduce or ameliorate the physical, mental or</u>	331
<u>developmental effects of an illness, condition, injury, or</u>	332
<u>disability;</u>	333
<u>(c) Assist in achieving or maintaining maximum functional</u>	334
<u>capacity for performing daily activities, taking into account both</u>	335
<u>the functional capacity of the individual and the appropriate</u>	336
<u>functional capacities of individuals of the same age.</u>	337
<u>(8) "Pharmacy care" means prescribed medications and any</u>	338
<u>medically necessary health-related services used to determine the</u>	339
<u>need or effectiveness of the medications.</u>	340
<u>(9) "Psychiatric care" means direct or consultative services</u>	341
<u>provided by a psychiatrist licensed in the state in which the</u>	342
<u>psychiatrist practices psychiatry.</u>	343
<u>(10) "Psychological care" means direct or consultative</u>	344
<u>services provided by a psychologist licensed in the state in which</u>	345
<u>the psychologist practices psychology.</u>	346
<u>(11) "Therapeutic care" means services, communication</u>	347



devices, or other adaptive devices or equipment provided by a 348  
licensed speech-language pathologist, licensed occupational 349  
therapist, or licensed physical therapist." 350

In lines 104209, 104214, and 104215, add \$1,620,000 to fiscal 351  
year 2011 352

Between lines 104242 and 104243, insert: 353

"On June 30, 2010, or as soon as possible thereafter, the 354  
Director of Budget and Management shall transfer \$1,620,000 cash 355  
from the General Revenue Fund to the State Employee Health Benefit 356  
Fund (Fund 8080)." 357

Between lines 112310 and 112311, insert: 358

"Section \_\_\_\_ . Sections 1739.05, 1751.68, and 3923.84 of the 359  
Revised Code as amended or enacted by this act shall apply only to 360  
policies, contracts, agreements, or plans that are delivered, 361  
issued for delivery, or renewed in this state on or after six 362  
months after the effective date of this act." 363

In line 224 of the title, after "1547.87," insert "1751.68," 364

In line 248 of the title, after "3923.241," insert "3923.84," 365

The motion was \_\_\_\_\_ agreed to.

**SYNOPSIS**

**Health Insurance Coverage of Autism Spectrum Disorders** 366  
**R.C. 1739.05, 1751.68, 3923.84, and Section 271.10** 367  
Prohibits health insurers from excluding coverage for 368  
specified autism services for individuals diagnosed with an autism 369  
spectrum disorder but allows insurers to impose a yearly maximum 370

of \$30,000 on coverage of those services. 371

Allows an insurer to opt out of the required coverage if the 372  
insurer can show that the incurred claims for those coverages 373  
caused the insurer's costs to increase by more than 1% and that 374  
the increase could reasonably justify an increase of more than 1% 375  
in the annual premiums or rates charged by the insurer for health 376  
insurance coverage. 377

Requires the Director of Mental Retardation and Developmental 378  
Disabilities to convene a committee on the coverage of autism 379  
spectrum disorders to investigate and recommend additional 380  
treatments or therapies for autism spectrum disorders to be 381  
covered by health insurers. 382

Delays the applicability of the bill's requirements to plans 383  
that are issued or renewed 6 months after the bill's effective 384  
date. 385

Increases appropriation item 995668, State Employee Health 386  
Benefit Fund, by \$1,620,000 in fiscal year 2011, to \$600,263,430; 387  
transfers \$1,620,000 cash from the General Revenue Fund to the 388  
State Employee Health Benefit Fund (Fund 8080). 389

5 \_\_\_\_\_ moved to amend as follows:

6 Between lines 105025 and 105026, insert:

7 "Section \_\_\_\_ . FUNDING FOR IMMUNIZATIONS

8 To the extent permitted under state and federal law, the  
9 Department of Health shall use state general revenue funds and  
10 federal funds appropriated for the purchase of vaccinations to  
11 provide immunizations to children and adults in Ohio."

12 The motion was \_\_\_\_\_ agreed to.

13 SYNOPSIS

14 **Department of Health**

15 **Section \_\_\_\_**

16 Specifies that funds appropriated for the purchase of  
17 immunizations are required to be used to provide immunizations  
18 to children and adults in Ohio.

Sub. H.B. 1  
LSC 128 0516-4  
HC-2273

\_\_\_\_\_ moved to amend as follows:

In line 417, after "3710.13," insert "3712.01," 1

Between lines 56857 and 56858, insert: 2

"Sec. 3712.01. As used in this chapter: 3

(A) "Hospice care program" means a coordinated program of 4  
home, outpatient, and inpatient care and services that is operated 5  
by a person or public agency and that provides the following care 6  
and services to hospice patients, including services as indicated 7  
below to hospice patients' families, through a medically directed 8  
interdisciplinary team, under interdisciplinary plans of care 9  
established pursuant to section 3712.06 of the Revised Code, in 10  
order to meet the physical, psychological, social, spiritual, and 11  
other special needs that are experienced during the final stages 12  
of illness, dying, and bereavement: 13

(1) Nursing care by or under the supervision of a registered 14  
nurse; 15

(2) Physical, occupational, or speech or language therapy, 16  
unless waived by the department of health pursuant to rules 17  
adopted under division (A) of section 3712.03 of the Revised Code; 18

(3) Medical social services by a social worker under the 19  
direction of a physician; 20

(4) Services of a home health aide;	21
(5) Medical supplies, including drugs and biologicals, and the use of medical appliances;	22 23
(6) Physician's services;	24
(7) Short-term inpatient care, including both palliative and respite care and procedures;	25 26
(8) Counseling for hospice patients and hospice patients' families;	27 28
(9) Services of volunteers under the direction of the provider of the hospice care program;	29 30
(10) Bereavement services for hospice patients' families.	31
(B) "Hospice patient" means a patient who has been diagnosed as terminally ill, has an anticipated life expectancy of six months or less, and has voluntarily requested and is receiving care from a person or public agency licensed under this chapter to provide a hospice care program.	32 33 34 35 36
(C) "Hospice patient's family" means a hospice patient's immediate family members, including a spouse, brother, sister, child, or parent, and any other relative or individual who has significant personal ties to the patient and who is designated as a member of the patient's family by mutual agreement of the patient, the relative or individual, and the patient's interdisciplinary team.	37 38 39 40 41 42 43
(D) "Interdisciplinary team" means a working unit composed of professional and lay persons that includes at least a physician, a registered nurse, a social worker, a member of the clergy or a counselor, and a volunteer.	44 45 46 47
(E) "Palliative care" means treatment <u>for a patient with a serious or life-threatening illness</u> directed at controlling pain,	49 50

relieving other symptoms, and ~~focusing on the special needs~~ 51  
~~enhancing the quality of life of a hospice the patient and the~~ 52  
~~hospice patient's family as they experience the stress of the~~ 53  
~~dying process~~ rather than treatment aimed at investigation and 54  
~~intervention~~ for the purpose of cure ~~or prolongation of life.~~ 55  
Nothing in this section shall be interpreted to mean that 56  
palliative care can be provided only as a component of a hospice 57  
care program.

(F) "Physician" means a person authorized under Chapter 4731. 58  
of the Revised Code to practice medicine and surgery or 59  
osteopathic medicine and surgery. 60

(G) "Attending physician" means the physician identified by 61  
the hospice patient or the hospice patient's family as having 62  
primary responsibility for the hospice patient's medical care. 63

(H) "Registered nurse" means a person registered under 64  
Chapter 4723. of the Revised Code to practice professional 65  
nursing. 66

(I) "Social worker" means a person licensed under Chapter 67  
4757. of the Revised Code to practice as a social worker or 68  
independent social worker." 69

In line 98946, after "3710.13," insert "3712.01," 70

In line 119 of the title, after "3710.13," insert "3712.01," 71

The motion was \_\_\_\_\_ agreed to.

SYNOPSIS

Palliative Care in Hospice Programs 72

R.C. 3712.01 73



Revises the definition of "palliative care," for purposes of 74  
hospice care programs, to mean "treatment for a patient with a 75  
serious or life-threatening illness directed at controlling pain, 76  
relieving other symptoms, and enhancing the quality of life of the 77  
patient and the patient's family rather than treatment for the 78  
purpose of cure." 79

Specifies that nothing in the definition of "palliative care" 80  
is to be interpreted as meaning that the care can be provided only 81  
as a component of a hospice care program. 82

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Sub. H.B. 1  
LSC 128 0516-4  
HC-2274

6 \_\_\_\_\_ moved to amend as follows:

7 Between lines 112047 and 112048, insert:

8 **"Section \_\_\_\_\_.** STUDY REGARDING AMOUNT, DURATION, AND  
9 SCOPE OF COMMUNITY BEHAVIORAL HEALTH SERVICES

10 (A) The Directors of Alcohol and Drug Addiction Services,  
11 Mental Health, and Job and Family Services shall convene a group  
12 consisting of representatives of all of the following:

13 (1) Their departments;

14 (2) Boards of alcohol, drug addiction, and mental health  
15 services; community mental health boards; and alcohol and drug  
16 addiction services boards;

17 (3) Providers of community behavioral health services;

18 (4) Consumers of community behavioral health services and  
19 advocates of such consumers.

20 (B) Members of the group convened under this section shall  
21 serve without compensation, except to the extent that serving on  
22 the group is considered part of their regular employment duties.

23 The group shall develop recommendations regarding the  
24 amount, duration, and scope of publicly funded community



25 behavioral health services that should be available through  
26 Ohio's community behavioral health system, including  
27 recommendations regarding the conditions under which the  
28 services should be available. The group shall prepare a report  
29 with its recommendations. The group shall submit the report to  
30 the Governor and, in accordance with section 101.68 of the  
31 Revised Code, the General Assembly not later than June 30, 2011.  
32 The group shall cease to exist on submission of the report."

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33 The motion was \_\_\_\_\_ agreed to.

34 SYNOPSIS

35 **Community Behavioral Health Services Study**

36 **Section \_\_\_\_\_**

37 Requires the Directors of Alcohol and Drug Addiction  
38 Services, Mental Health, and Job and Family Services to convene a  
39 group to develop recommendations regarding the amount, duration,  
40 and scope of publicly funded community behavioral health  
41 services that should be available through Ohio's community  
42 behavioral health system.

5 \_\_\_\_\_ moved to amend as follows:

6 In line 84321, after "date" insert "or, if the nursing  
7 facility did not have a medicaid reimbursement per diem rate on  
8 June 30, 2005, the capital costs portion of the nursing  
9 facility's initial rate established under section 5111.254 of  
10 the Revised Code"

11 The motion was \_\_\_\_\_ agreed to.

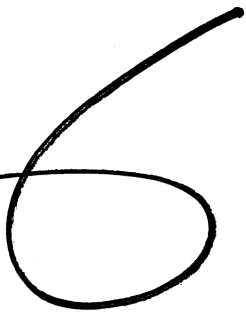
12 SYNOPSIS

13 **Nursing Facilities' Medicaid Rate for Capital Costs**

14 **R.C. 5111.25**

15 Provides that the Medicaid capital cost rate for a nursing  
16 facility that did not have a Medicaid rate on June 30, 2005,  
17 cannot be lower than the sum of (1) its initial Medicaid capital  
18 cost report and (2) any capital compensation rate for which it  
19 qualified during the first three quarters of fiscal year 2008.

Sub. H.B. 1  
LSC 128 0516-4  
HC-2279



\_\_\_\_\_ moved to amend as follows:

Delete lines 105408 through 105553 and insert: 1

"Section 309.30.20. FISCAL YEAR 2010 MEDICAID REIMBURSEMENT 2  
SYSTEM FOR NURSING FACILITIES 3

(A) As used in this section: 4

"Franchise permit fee," "Medicaid days," "nursing facility," 5  
and "provider" have the same meanings as in section 5111.20 of the 6  
Revised Code. 7

"Nursing facility services" means nursing facility services 8  
covered by the Medicaid program that a nursing facility provides 9  
to a resident of the nursing facility who is a Medicaid recipient 10  
eligible for Medicaid-covered nursing facility services. 11

(B) Except as otherwise provided by this section, the 12  
provider of a nursing facility that has a valid Medicaid provider 13  
agreement on June 30, 2009, and a valid Medicaid provider 14  
agreement during fiscal year 2010 shall be paid, for nursing 15  
facility services the nursing facility provides during fiscal year 16  
2010, the rate calculated for the nursing facility under sections 17  
5111.20 to 5111.33 of the Revised Code with the following 18  
adjustments: 19

(1) The nursing facility's rate for capital costs shall be 20

the greater of the following:	21
(a) The sum calculated under division (B) (2) of section 5111.25 of the Revised Code for the nursing facility;	22
(b) The median rate for capital costs for the nursing facilities in the nursing facility's peer group as determined under division (D) of section 5111.25 of the Revised Code, adjusted as follows:	24
(i) Increase the rate so determined by two per cent;	28
(ii) Increase the rate determined under division (B) (1) (b) (i) of this section by two per cent;	29
(iii) Increase the rate determined under division (B) (1) (b) (ii) of this section by one per cent.	31
(2) The cost per case mix-unit calculated under section 5111.231 of the Revised Code, the rate for ancillary and support costs calculated under section 5111.24 of the Revised Code, and the rate for tax costs calculated under section 5111.242 of the Revised Code shall each be adjusted as follows:	33
(a) Increase the cost and rates so calculated by two per cent;	38
(b) Increase the cost and rates determined under division (B) (2) (a) of this section by two per cent;	40
(c) Increase the cost and rates determined under division (B) (2) (b) of this section by one per cent.	42
(3) The mean payment used in the calculation of the quality incentive payment made under section 5111.244 of the Revised Code shall be, weighted by Medicaid days, three dollars and three cents per Medicaid day.	44
(4) The rate, after the adjustments under divisions (B) (1), (2), and (3) of this section are made, shall be further increased	48

by three dollars per Medicaid day. 50

(C) If the rate determined for a nursing facility under 51  
division (B) of this section for nursing facility services 52  
provided during fiscal year 2010 is more than the rate the 53  
provider is paid for nursing facility services the nursing 54  
facility provides on June 30, 2009, the Department of Job and 55  
Family Services shall reduce the nursing facility's fiscal year 56  
2010 rate by one-half of the difference between the rate 57  
determined for the nursing facility under division (B) of this 58  
section and the nursing facility's rate for June 30, 2009. If the 59  
rate determined for a nursing facility under division (B) of this 60  
section for nursing facility services provided during fiscal year 61  
2010 is less than the rate the provider is paid for nursing 62  
facility services the nursing facility provides on June 30, 2009, 63  
the Department shall increase the nursing facility's fiscal year 64  
2010 rate by five-sixths of the difference between the rate 65  
determined for the nursing facility under division (B) of this 66  
section and the nursing facility's rate for June 30, 2009. 67

(D) After the adjustments under divisions (B) and (C) of this 68  
section are made to a nursing facility's fiscal year 2010 rate, 69  
the Department of Job and Family Services shall increase the 70  
nursing facility's fiscal year 2010 rate by five dollars per 71  
Medicaid day if the nursing facility has more than two hundred 72  
fifty beds certified for the Medicaid program. 73

(E) If the United States Centers for Medicare and Medicaid 74  
Services requires that the franchise permit fee be reduced or 75  
eliminated, the Department of Job and Family Services shall reduce 76  
the amount it pays providers of nursing facility services under 77  
this section as necessary to reflect the loss to the state of the 78  
revenue and federal financial participation generated from the 79  
franchise permit fee. 80

(F) The Department of Job and Family Services shall follow this section in determining the rate to be paid to the provider of a nursing facility that has a valid Medicaid provider agreement on June 30, 2009, and a valid Medicaid provider agreement during fiscal year 2010 notwithstanding anything to the contrary in sections 5111.20 to 5111.33 of the Revised Code.

**Section 309.30.30. FISCAL YEAR 2011 MEDICAID REIMBURSEMENT SYSTEM FOR NURSING FACILITIES**

(A) As used in this section:

"Franchise permit fee," "Medicaid days," "nursing facility," and "provider" have the same meanings as in section 5111.20 of the Revised Code.

"Nursing facility services" means nursing facility services covered by the Medicaid program that a nursing facility provides to a resident of the nursing facility who is a Medicaid recipient eligible for Medicaid-covered nursing facility services.

(B) Except as otherwise provided by this section, the provider of a nursing facility that has a valid Medicaid provider agreement on June 30, 2010, and a valid Medicaid provider agreement during fiscal year 2011 shall be paid, for nursing facility services the nursing facility provides during fiscal year 2011, the rate calculated for the nursing facility under sections 5111.20 to 5111.33 of the Revised Code with the following adjustments:

(1) The nursing facility's rate for capital costs shall be the greater of the following:

(a) The sum calculated under division (B)(2) of section 5111.25 of the Revised Code for the nursing facility;

(b) The median rate for capital costs for the nursing facilities in the nursing facility's peer group as determined

under division (D) of section 5111.25 of the Revised Code, 111  
adjusted as follows: 112

(i) Increase the rate so determined by two per cent; 113

(ii) Increase the rate determined under division (B) (1) (b) (i) 114  
of this section by two per cent; 115

(iii) Increase the rate determined under division 116  
(B) (1) (b) (ii) of this section by one per cent. 117

(2) The cost per case mix-unit calculated under section 118  
5111.231 of the Revised Code, the rate for ancillary and support 119  
costs calculated under section 5111.24 of the Revised Code, and 120  
the rate for tax costs calculated under section 5111.242 of the 121  
Revised Code shall each be adjusted as follows: 122

(a) Increase the cost and rates so calculated by two per 123  
cent; 124

(b) Increase the cost and rates determined under division 125  
(B) (2) (a) of this section by two per cent; 126

(c) Increase the cost and rates determined under division 127  
(B) (2) (b) of this section by one per cent. 128

(3) The mean payment used in the calculation of the quality 129  
incentive payment made under section 5111.244 of the Revised Code 130  
shall be, weighted by Medicaid days, three dollars and three cents 131  
per Medicaid day. 132

(4) The rate, after the adjustments under divisions (B) (1), 133  
(2), and (3) of this section are made, shall be further increased 134  
by five dollars and thirty-five cents per Medicaid day. 135

(C) If the rate determined for a nursing facility under 136  
division (B) of this section for nursing facility services 137  
provided during fiscal year 2011 is less than the rate the 138  
provider is paid for nursing facility services the nursing 139

facility provides on June 30, 2009, the Department of Job and Family Services shall increase the nursing facility's fiscal year 2011 rate by two-thirds of the difference between the rate determined for the nursing facility under division (B) of this section and the nursing facility's rate for June 30, 2009.

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(D) After the adjustments under divisions (B) and (C) of this section are made to a nursing facility's fiscal year 2011 rate, the Department of Job and Family Services shall increase the nursing facility's fiscal year 2011 rate by five dollars per Medicaid day if the nursing facility has more than two hundred fifty beds certified for the Medicaid program.

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(E) If the United States Centers for Medicare and Medicaid Services requires that the franchise permit fee be reduced or eliminated, the Department of Job and Family Services shall reduce the amount it pays providers of nursing facility services under this section as necessary to reflect the loss to the state of the revenue and federal financial participation generated from the franchise permit fee.

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(F) The Department of Job and Family Services shall follow this section in determining the rate to be paid to the provider of a nursing facility that has a valid Medicaid provider agreement on June 30, 2010, and a valid Medicaid provider agreement during fiscal year 2011 notwithstanding anything to the contrary in sections 5111.20 to 5111.33 of the Revised Code."

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The motion was \_\_\_\_\_ agreed to.

SYNOPSIS

FY 2010 Medicaid Reimbursement Rate for Nursing Facilities 164



**Section 309.30.20**

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Revises the bill's provision regarding nursing facilities' fiscal year 2010 Medicaid rates as follows:

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(1) By providing that a nursing facility's rate for capital costs cannot be less than the capital costs portion of its fiscal year 2004 rate plus any capital compensation per diem for which it qualified during the first three quarters of fiscal year 2008;

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(2) By adding the \$5 per Medicaid day increase for nursing facilities with more than 250 Medicaid-certified beds after all other adjustments are made.

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**FY 2011 Medicaid Reimbursement Rate for Nursing Facilities**

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**Section 309.30.30**

176

Revises the bill's provision regarding nursing facilities' fiscal year 2011 Medicaid rates as follows:

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(1) By providing that a nursing facility's rate for capital costs cannot be less than the capital costs portion of its fiscal year 2004 rate plus any capital compensation per diem for which it qualified during the first three quarters of fiscal year 2008;

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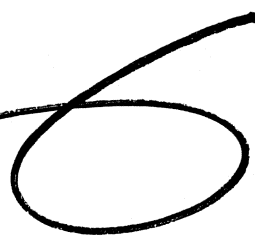
(2) By adding the \$5 per Medicaid day increase for nursing facilities with more than 250 Medicaid-certified beds after all other adjustments are made.

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Sub. H.B. 1  
LSC 128 0516-4  
HC-2291



\_\_\_\_\_ moved to amend as follows:

In line 479, after "5911.10," insert "5913.051," 1

Between lines 97622 and 97623 insert: 2

"Sec. 5913.051. ~~To supplement the military staff of the~~ 3  
~~governor, the~~ (A) The adjutant general may appoint an assistant to 4  
~~the state area commander for readiness and training for adjutant~~ 5  
~~general - army.~~ This assistant shall be a brigadier general and 6  
shall aid the adjutant general by performing duties that the 7  
adjutant general assigns in that include the areas of readiness, 8  
~~training, and mobilization, and homeland defense preparedness.~~ 9  
This assistant shall not be a full-time state employee or a member 10  
of the governor's military staff, but shall serve in that capacity 11  
only during federally recognized training, special duty periods, 12  
~~or mobilization periods, or state active duty,~~ and shall at the 13  
time of appointment be in the rank of colonel or above but 14  
otherwise meet the qualifications established ~~in section 5913.021~~ 15  
~~of the Revised Code by the department of defense/army for general~~ 16  
officer qualification. 17

(B) The adjutant general may appoint an assistant adjutant 18  
general - airforce. This assistant shall be a brigadier general 19  
and shall aid the adjutant general by performing duties that the 20  
adjutant general assigns that include the areas of readiness. 21

mobilization, and homeland defense preparedness. This assistant 22  
shall not be a full-time state employee or a member of the 23  
governor's military staff, but shall serve in that capacity only 24  
during federally recognized training, special duty periods, 25  
mobilization periods, or state active duty, and shall at the time 26  
of appointment be in the rank of colonel or above but otherwise 27  
meet the qualifications established by the department of 28  
defense/air force for general officer qualification." 29

In line 99008, after "5911.10," insert "5913.051," 30

In line 204 of the title, after "5911.10," insert "5913.051," 31

The motion was \_\_\_\_\_ agreed to.

SYNOPSIS

Assistant Adjutant General-Army and Air Force 32

R.C. 5913.051 33

Instead of appointing an assistant to the state area 34  
 commander of readiness and training for army, permits the Adjutant 35  
 General to appoint an assistant Adjutant General - Army and an 36  
 assistant Adjutant General - Air Force who must meet the 37  
 qualifications established by the Department of Defense/Army or 38  
 Department of Defense/Air Force, as the case may be, for general 39  
 officer qualification. 40

5 \_\_\_\_\_ moved to amend as follows:

6 Between lines 112287 and 112288, insert:

7 **"Section 759. \_\_** Notwithstanding division (B)(1) of section  
8 5919.34 of the Revised Code, the number of participants in the  
9 Ohio National Guard Scholarship Program for the summer term  
10 occurring in the year 2009 shall be limited to the equivalent of  
11 one thousand full-time participants."

12 The motion was \_\_\_\_\_ agreed to.

13 SYNOPSIS

14 **National Guard Scholarship Program**

15 **Section 759. \_\_**

16 Limits the number of participants in the Ohio National  
17 Guard Scholarship Program for the 2009 summer term to the  
18 equivalent of 1,000 full-time participants. Otherwise, the  
19 number of participants in the 2009 summer term would be limited  
20 to the equivalent of 800 full-time participants.

5 \_\_\_\_\_ moved to amend as follows:

6 In line 339, delete "145.11,"

7 In line 345, delete "742.11,"

8 In line 379, delete "3307.15,"; delete "3309.15,"

9 In line 471, delete "5505.06,"

10 In line 490, delete "145.117,"

11 In line 493, delete "742.117,"

12 In line 502, delete "3307.155,"

13 In line 503, delete "3309.1510,"

14 In line 521, delete "5505.0611,"

15 Delete lines 9017 through 9129

16 Delete lines 14517 through 14635

17 Delete lines 33445 through 33554

18 Delete lines 33672 through 33781

19 Delete lines 88176 through 88292

20 In line 98868, delete "145.11,"

21 In line 98875, delete "742.11,"

22 In line 98908, delete "3307.15,"; delete "3309.15,"

23 In line 99000, delete "5505.06,"

24 In line 12 of the title, delete "145.11,"

25 In line 20 of the title, delete "742.11,"

26 In line 66 of the title, delete "3307.15,"  
27 In line 67 of the title, delete "3309.15,"  
28 In line 192 of the title, delete "5505.06,"  
29 In line 218 of the title, delete "145.117,"  
30 In line 222 of the title, delete "742.117,"  
31 In line 235 of the title, delete "3307.155, 3309.1510,"  
32 In line 260 of the title, delete "5505.0611,"

33 The motion was \_\_\_\_\_ agreed to.

34 SYNOPSIS

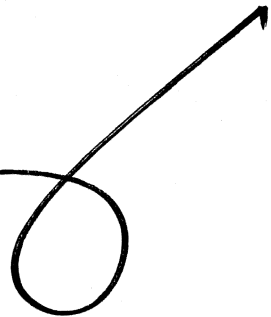
35 **State Retirement Systems - Minority and Women-Owned**  
36 **Investment Managers and Agents**

37 **R.C. 145.11, 145.117, 742.11, 742.117, 3307.15, 3307.155,**  
38 **3309.15, 3309.1510, 5505.06, and 5505.0611**

39 Removes from the bill provisions that would have permitted  
40 the Public Employees Retirement System Board, the Board of  
41 Trustees of the Ohio Police and Fire Pension Fund, the State  
42 Teachers Retirement System Board, the School Employees  
43 Retirement System Board, and the State Highway Patrol Retirement  
44 System Board to set aside 15% of the contracts with agents and  
45 investment managers for firms owned by minorities or women and  
46 ventures owned by minorities or women.

47 Removes from the bill provisions that would have required  
48 each retirement board to annually submit to the Governor,  
49 General Assembly, and the Ohio Retirement Study Council a report  
50 containing the following information: (1) the name of each  
51 Ohio-qualified investment manager that is a minority business  
52 enterprise or women's business enterprise, (2) the percentage of  
53 assets managed by Ohio-qualified investment managers that are  
54 minority business enterprises or women's business enterprises,  
55 (3) efforts by the board to increase utilization of Ohio-  
56 qualified investment managers that are minority business  
57 enterprises or women's business enterprises.

Sub. H.B. 1  
LSC 128 0518-4  
HC-2300



\_\_\_\_\_ moved to amend as follows:

\_\_\_\_\_ moved to amend as follows: 1

In line 371, after "1753.09," insert "1901.26," 2

In line 372, after "1901.31," insert "1907.24,"; after 3  
2151.011," insert "2303.201," 4

Between lines 25401 and 25402 insert: 5

"Sec. 1901.26. (A) Subject to division (E) of this section, 6  
costs in a municipal court shall be fixed and taxed as follows: 7

(1) (a) The municipal court shall require an advance deposit 8  
for the filing of any new civil action or proceeding when required 9  
by division (C) of this section, and in all other cases, by rule, 10  
shall establish a schedule of fees and costs to be taxed in any 11  
civil or criminal action or proceeding. 12

(b) (i) The legislative authority of a municipal corporation 13  
may by ordinance establish a schedule of fees to be taxed as costs 14  
in any civil, criminal, or traffic action or proceeding in a 15  
municipal court for the performance by officers or other employees 16  
of the municipal corporation's police department or marshal's 17  
office of any of the services specified in sections 311.17 and 18  
509.15 of the Revised Code. No fee in the schedule shall be higher 19  
than the fee specified in section 311.17 of the Revised Code for 20

the performance of the same service by the sheriff. If a fee 21  
established in the schedule conflicts with a fee for the same 22  
service established in another section of the Revised Code or a 23  
rule of court, the fee established in the other section of the 24  
Revised Code or the rule of court shall apply. 25

(ii) When an officer or employee of a municipal police 26  
department or marshal's office performs in a civil, criminal, or 27  
traffic action or proceeding in a municipal court a service 28  
specified in section 311.17 or 509.15 of the Revised Code for 29  
which a taxable fee has been established under this or any other 30  
section of the Revised Code, the applicable legal fees and any 31  
other extraordinary expenses, including overtime, provided for the 32  
service shall be taxed as costs in the case. The clerk of the 33  
court shall pay those legal fees and other expenses, when 34  
collected, into the general fund of the municipal corporation that 35  
employs the officer or employee. 36

(iii) If a bailiff of a municipal court performs in a civil, 37  
criminal, or traffic action or proceeding in that court a service 38  
specified in section 311.17 or 509.15 of the Revised Code for 39  
which a taxable fee has been established under this section or any 40  
other section of the Revised Code, the fee for the service is the 41  
same and is taxable to the same extent as if the service had been 42  
performed by an officer or employee of the police department or 43  
marshal's office of the municipal corporation in which the court 44  
is located. The clerk of that court shall pay the fee, when 45  
collected, into the general fund of the entity or entities that 46  
fund the bailiff's salary, in the same prorated amount as the 47  
salary is funded. 48

(iv) Division (A) (1) (b) of this section does not authorize or 49  
require any officer or employee of a police department or 50  
marshal's office of a municipal corporation or any bailiff of a 51



municipal court to perform any service not otherwise authorized by law.

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(2) The municipal court, by rule, may require an advance deposit for the filing of any civil action or proceeding and publication fees as provided in section 2701.09 of the Revised Code. The court may waive the requirement for advance deposit upon affidavit or other evidence that a party is unable to make the required deposit.

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(3) When a jury trial is demanded in any civil action or proceeding, the party making the demand may be required to make an advance deposit as fixed by rule of court, unless, upon affidavit or other evidence, the court concludes that the party is unable to make the required deposit. If a jury is called, the fees of a jury shall be taxed as costs.

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(4) In any civil or criminal action or proceeding, each witness shall receive twelve dollars for each full day's attendance and six dollars for each half day's attendance. Each witness in a municipal court that is not a county-operated municipal court also shall receive fifty and one-half cents for each mile necessarily traveled to and from the witness's place of residence to the action or proceeding.

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(5) A reasonable charge for driving, towing, carting, storing, keeping, and preserving motor vehicles and other personal property recovered or seized in any proceeding may be taxed as part of the costs in a trial of the cause, in an amount that shall be fixed by rule of court.

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(6) Chattel property seized under any writ or process issued by the court shall be preserved pending final disposition for the benefit of all persons interested and may be placed in storage when necessary or proper for that preservation. The custodian of any chattel property so stored shall not be required to part with

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the possession of the property until a reasonable charge, to be 83  
 fixed by the court, is paid. 84

(7) The municipal court, as it determines, may refund all 85  
 deposits and advance payments of fees and costs, including those 86  
 for jurors and summoning jurors, when they have been paid by the 87  
 losing party. 88

(8) Charges for the publication of legal notices required by 89  
 statute or order of court may be taxed as part of the costs, as 90  
 provided by section 7.13 of the Revised Code. 91

(B) (1) The municipal court may determine that, for the 92  
 efficient operation of the court, additional funds are necessary 93  
 to acquire and pay for special projects of the court including, 94  
 but not limited to, the acquisition of additional facilities or 95  
 the rehabilitation of existing facilities, the acquisition of 96  
 equipment, the hiring and training of staff, community service 97  
 programs, mediation or dispute resolution services, the employment 98  
 of magistrates, the training and education of judges, acting 99  
 judges, and magistrates, and other related services. Upon that 100  
 determination, the court by rule may charge a fee, in addition to 101  
 all other court costs, on the filing of each criminal cause, civil 102  
 action or proceeding, or judgment by confession. 103

If the municipal court offers a special program or service in 104  
 cases of a specific type, the municipal court by rule may assess 105  
 an additional charge in a case of that type, over and above court 106  
 costs, to cover the special program or service. The municipal 107  
 court shall adjust the special assessment periodically, but not 108  
 retroactively, so that the amount assessed in those cases does not 109  
 exceed the actual cost of providing the service or program. 110

All moneys collected under division (B) of this section shall 111  
 be paid to the county treasurer if the court is a county-operated 112  
 municipal court or to the city treasurer if the court is not a 113

county-operated municipal court for deposit into either a general  
special projects fund or a fund established for a specific special  
project. Moneys from a fund of that nature shall be disbursed upon  
an order of the court in an amount no greater than the actual cost  
to the court of a project. If a specific fund is terminated  
because of the discontinuance of a program or service established  
under division (B) of this section, the municipal court may order  
that moneys remaining in the fund be transferred to an account  
established under this division for a similar purpose.

(2) As used in division (B) of this section: 123

(a) "Criminal cause" means a charge alleging the violation of  
a statute or ordinance, or subsection of a statute or ordinance,  
that requires a separate finding of fact or a separate plea before  
disposition and of which the defendant may be found guilty,  
whether filed as part of a multiple charge on a single summons,  
citation, or complaint or as a separate charge on a single  
summons, citation, or complaint. "Criminal cause" does not include  
separate violations of the same statute or ordinance, or  
subsection of the same statute or ordinance, unless each charge is  
filed on a separate summons, citation, or complaint.

(b) "Civil action or proceeding" means any civil litigation  
that must be determined by judgment entry.

(c) The municipal court shall collect in all its divisions  
except the small claims division the sum of ~~twenty-six~~ thirty-one  
dollars as additional filing fees in each new civil action or  
proceeding for the charitable public purpose of providing  
financial assistance to legal aid societies that operate within  
the state and to support the office of the state public defender.  
The municipal court shall collect in its small claims division the  
sum of eleven dollars as additional filing fees in each new civil  
action or proceeding for the charitable public purpose of

providing financial assistance to legal aid societies that operate 145  
within the state and to support the office of the state public 146  
defender. This division does not apply to any execution on a 147  
judgment, proceeding in aid of execution, or other post-judgment 148  
proceeding arising out of a civil action. The filing fees required 149  
to be collected under this division shall be in addition to any 150  
other court costs imposed in the action or proceeding and shall be 151  
collected at the time of the filing of the action or proceeding. 152  
The court shall not waive the payment of the additional filing 153  
fees in a new civil action or proceeding unless the court waives 154  
the advanced payment of all filing fees in the action or 155  
proceeding. All such moneys collected during a month except for an 156  
amount equal to up to one per cent of those moneys retained to 157  
cover administrative costs shall be transmitted on or before the 158  
twentieth day of the following month by the clerk of the court to 159  
the treasurer of state in a manner prescribed by the treasurer of 160  
state or by the Ohio legal assistance foundation. The treasurer of 161  
state shall deposit four per cent of the funds collected under 162  
this division to the credit of the civil case filing fee fund 163  
established under section 120.07 of the Revised Code and 164  
ninety-six per cent of the funds collected under this division to 165  
the credit of the legal aid fund established under section 120.52 166  
of the Revised Code. 167

The court may retain up to one per cent of the moneys it 168  
collects under this division to cover administrative costs, 169  
including the hiring of any additional personnel necessary to 170  
implement this division. If the court fails to transmit to the 171  
treasurer of state the moneys the court collects under this 172  
division in a manner prescribed by the treasurer of state or by 173  
the Ohio legal assistance foundation, the court shall forfeit the 174  
moneys the court retains under this division to cover 175  
administrative costs, including the hiring of any additional 176

personnel necessary to implement this division, and shall transmit 177  
to the treasurer of state all moneys collected under this 178  
division, including the forfeited amount retained for 179  
administrative costs, for deposit in the legal aid fund. 180

(D) In the Cleveland municipal court, reasonable charges for 181  
investigating titles of real estate to be sold or disposed of 182  
under any writ or process of the court may be taxed as part of the 183  
costs. 184

(E) Under the circumstances described in sections 2969.21 to 185  
2969.27 of the Revised Code, the clerk of the municipal court 186  
shall charge the fees and perform the other duties specified in 187  
those sections. 188

(F) As used in this section: 189

(1) "Full day's attendance" means a day on which a witness is 190  
required or requested to be present at an action or proceeding 191  
before and after twelve noon, regardless of whether the witness 192  
actually testifies. 193

(2) "Half day's attendance" means a day on which a witness is 194  
required or requested to be present at an action or proceeding 195  
either before or after twelve noon, but not both, regardless of 196  
whether the witness actually testifies." 197

Between lines 25875 and 25876 insert: 198

"Sec. 1907.24. (A) Subject to division (C) of this section, a 199  
county court shall fix and tax fees and costs as follows: 200

(1) The county court shall require an advance deposit for the 201  
filing of any new civil action or proceeding when required by 202  
division (C) of this section and, in all other cases, shall 203  
establish a schedule of fees and costs to be taxed in any civil or 204  
criminal action or proceeding. 205

(2) The county court by rule may require an advance deposit 206  
for the filing of a civil action or proceeding and publication 207  
fees as provided in section 2701.09 of the Revised Code. The court 208  
may waive an advance deposit requirement upon the presentation of 209  
an affidavit or other evidence that establishes that a party is 210  
unable to make the requisite deposit. 211

(3) When a party demands a jury trial in a civil action or 212  
proceeding, the county court may require the party to make an 213  
advance deposit as fixed by rule of court, unless the court 214  
concludes, on the basis of an affidavit or other evidence 215  
presented by the party, that the party is unable to make the 216  
requisite deposit. If a jury is called, the county court shall tax 217  
the fees of a jury as costs. 218

(4) In a civil or criminal action or proceeding, the county 219  
court shall fix the fees of witnesses in accordance with sections 220  
2335.06 and 2335.08 of the Revised Code. 221

(5) A county court may tax as part of the costs in a trial of 222  
the cause, in an amount fixed by rule of court, a reasonable 223  
charge for driving, towing, carting, storing, keeping, and 224  
preserving motor vehicles and other personal property recovered or 225  
seized in a proceeding. 226

(6) The court shall preserve chattel property seized under a 227  
writ or process issued by the court pending final disposition for 228  
the benefit of all interested persons. The court may place the 229  
chattel property in storage when necessary or proper for its 230  
preservation. The custodian of chattel property so stored shall 231  
not be required to part with the possession of the property until 232  
a reasonable charge, to be fixed by the court, is paid. 233

(7) The county court, as it determines, may refund all 234  
deposits and advance payments of fees and costs, including those 235  
for jurors and summoning jurors, when they have been paid by the 236

losing party.

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(8) The court may tax as part of costs charges for the publication of legal notices required by statute or order of court, as provided by section 7.13 of the Revised Code.

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(B) (1) The county court may determine that, for the efficient operation of the court, additional funds are necessary to acquire and pay for special projects of the court including, but not limited to, the acquisition of additional facilities or the rehabilitation of existing facilities, the acquisition of equipment, the hiring and training of staff, community service programs, mediation or dispute resolution services, the employment of magistrates, the training and education of judges, acting judges, and magistrates, and other related services. Upon that determination, the court by rule may charge a fee, in addition to all other court costs, on the filing of each criminal cause, civil action or proceeding, or judgment by confession.

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If the county court offers a special program or service in cases of a specific type, the county court by rule may assess an additional charge in a case of that type, over and above court costs, to cover the special program or service. The county court shall adjust the special assessment periodically, but not retroactively, so that the amount assessed in those cases does not exceed the actual cost of providing the service or program.

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All moneys collected under division (B) of this section shall be paid to the county treasurer for deposit into either a general special projects fund or a fund established for a specific special project. Moneys from a fund of that nature shall be disbursed upon an order of the court in an amount no greater than the actual cost to the court of a project. If a specific fund is terminated because of the discontinuance of a program or service established under division (B) of this section, the county court may order

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that moneys remaining in the fund be transferred to an account 268  
established under this division for a similar purpose. 269

(2) As used in division (B) of this section: 270

(a) "Criminal cause" means a charge alleging the violation of 271  
a statute or ordinance, or subsection of a statute or ordinance, 272  
that requires a separate finding of fact or a separate plea before 273  
disposition and of which the defendant may be found guilty, 274  
whether filed as part of a multiple charge on a single summons, 275  
citation, or complaint or as a separate charge on a single 276  
summons, citation, or complaint. "Criminal cause" does not include 277  
separate violations of the same statute or ordinance, or 278  
subsection of the same statute or ordinance, unless each charge is 279  
filed on a separate summons, citation, or complaint. 280

(b) "Civil action or proceeding" means any civil litigation 281  
that must be determined by judgment entry. 282

(C) Subject to division (E) of this section, the county court 283  
shall collect in all its divisions except the small claims 284  
division the sum of ~~twenty-six~~ thirty-one dollars as additional 285  
filing fees in each new civil action or proceeding for the 286  
charitable public purpose of providing financial assistance to 287  
legal aid societies that operate within the state and to support 288  
the office of the state public defender. Subject to division (E) 289  
of this section, the county court shall collect in its small 290  
claims division the sum of eleven dollars as additional filing 291  
fees in each new civil action or proceeding for the charitable 292  
public purpose of providing financial assistance to legal aid 293  
societies that operate within the state and to support the office 294  
of the state public defender. This division does not apply to any 295  
execution on a judgment, proceeding in aid of execution, or other 296  
post-judgment proceeding arising out of a civil action. The filing 297  
fees required to be collected under this division shall be in 298



addition to any other court costs imposed in the action or 299  
 proceeding and shall be collected at the time of the filing of the 300  
 action or proceeding. The court shall not waive the payment of the 301  
 additional filing fees in a new civil action or proceeding unless 302  
 the court waives the advanced payment of all filing fees in the 303  
 action or proceeding. All such moneys collected during a month 304  
except for an amount equal to up to one per cent of those moneys 305  
retained to cover administrative costs shall be transmitted on or 306  
 before the twentieth day of the following month by the clerk of 307  
 the court to the treasurer of state in a manner prescribed by the 308  
 treasurer of state or by the Ohio legal assistance foundation. The 309  
 treasurer of state shall deposit four per cent of the funds 310  
 collected under this division to the credit of the civil case 311  
 filing fee fund established under section 120.07 of the Revised 312  
 Code and ninety-six per cent of the funds collected under this 313  
 division to the credit of the legal aid fund established under 314  
 section 120.52 of the Revised Code. 315

The court may retain up to one per cent of the moneys it 316  
 collects under this division to cover administrative costs, 317  
 including the hiring of any additional personnel necessary to 318  
 implement this division. If the court fails to transmit to the 319  
treasurer of state the moneys the court collects under this 320  
division in a manner prescribed by the treasurer of state or by 321  
the Ohio legal assistance foundation, the court shall forfeit the 322  
moneys the court retains under this division to cover 323  
administrative costs, including the hiring of any additional 324  
personnel necessary to implement this division, and shall transmit 325  
to the treasurer of state all moneys collected under this 326  
division, including the forfeited amount retained for 327  
administrative costs, for deposit in the legal aid fund. 328

(D) The county court shall establish by rule a schedule of 329  
 fees for miscellaneous services performed by the county court or 330

any of its judges in accordance with law. If judges of the court 331  
of common pleas perform similar services, the fees prescribed in 332  
the schedule shall not exceed the fees for those services 333  
prescribed by the court of common pleas. 334

(E) Under the circumstances described in sections 2969.21 to 335  
2969.27 of the Revised Code, the clerk of the county court shall 336  
charge the fees and perform the other duties specified in those 337  
sections." 338

Between lines 26212 and 26213 insert: 339

"Sec. 2303.201. (A) (1) The court of common pleas of any 340  
county may determine that for the efficient operation of the court 341  
additional funds are required to computerize the court, to make 342  
available computerized legal research services, or to do both. 343  
Upon making a determination that additional funds are required for 344  
either or both of those purposes, the court shall authorize and 345  
direct the clerk of the court of common pleas to charge one 346  
additional fee, not to exceed three dollars, on the filing of each 347  
cause of action or appeal under divisions (A), (Q), and (U) of 348  
section 2303.20 of the Revised Code. 349

(2) All fees collected under division (A) (1) of this section 350  
shall be paid to the county treasurer. The treasurer shall place 351  
the funds from the fees in a separate fund to be disbursed, upon 352  
an order of the court, in an amount not greater than the actual 353  
cost to the court of procuring and maintaining computerization of 354  
the court, computerized legal research services, or both. 355

(3) If the court determines that the funds in the fund 356  
described in division (A) (2) of this section are more than 357  
sufficient to satisfy the purpose for which the additional fee 358  
described in division (A) (1) of this section was imposed, the 359  
court may declare a surplus in the fund and expend those surplus 360

funds for other appropriate technological expenses of the court. 361

(B) (1) The court of common pleas of any county may determine 362  
that, for the efficient operation of the court, additional funds 363  
are required to computerize the office of the clerk of the court 364  
of common pleas and, upon that determination, authorize and direct 365  
the clerk of the court of common pleas to charge an additional 366  
fee, not to exceed ten dollars, on the filing of each cause of 367  
action or appeal, on the filing, docketing, and endorsing of each 368  
certificate of judgment, or on the docketing and indexing of each 369  
aid in execution or petition to vacate, revive, or modify a 370  
judgment under divisions (A), (P), (Q), (T), and (U) of section 371  
2303.20 of the Revised Code. Subject to division (B) (2) of this 372  
section, all moneys collected under division (B) (1) of this 373  
section shall be paid to the county treasurer to be disbursed, 374  
upon an order of the court of common pleas and subject to 375  
appropriation by the board of county commissioners, in an amount 376  
no greater than the actual cost to the court of procuring and 377  
maintaining computer systems for the office of the clerk of the 378  
court of common pleas. 379

(2) If the court of common pleas of a county makes the 380  
determination described in division (B) (1) of this section, the 381  
board of county commissioners of that county may issue one or more 382  
general obligation bonds for the purpose of procuring and 383  
maintaining the computer systems for the office of the clerk of 384  
the court of common pleas. In addition to the purposes stated in 385  
division (B) (1) of this section for which the moneys collected 386  
under that division may be expended, the moneys additionally may 387  
be expended to pay debt charges on and financing costs related to 388  
any general obligation bonds issued pursuant to division (B) (2) of 389  
this section as they become due. General obligation bonds issued 390  
pursuant to division (B) (2) of this section are Chapter 133. 391

securities.

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(C) The court of common pleas shall collect the sum of 393  
~~twenty six~~ thirty-one dollars as additional filing fees in each 394  
new civil action or proceeding for the charitable public purpose 395  
of providing financial assistance to legal aid societies that 396  
operate within the state and to support the office of the state 397  
public defender. This division does not apply to a domestic 398  
relations division of a court of common pleas, except that the 399  
additional filing fee shall apply to proceedings concerning 400  
annulments, dissolutions of marriage, divorces, and legal 401  
separation, ~~spousal support, marital property or separate property~~ 402  
~~distribution, support, or other domestic relations matters;~~ to a 403  
juvenile division of a court of common pleas; to a probate 404  
division of a court of common pleas, except that the additional 405  
filing fees shall apply to name change, guardianship, adoption, 406  
and decedents' estate proceedings; or to an execution on a 407  
judgment, proceeding in aid of execution, or other post-judgment 408  
proceeding arising out of a civil action. The filing fees required 409  
to be collected under this division shall be in addition to any 410  
other filing fees imposed in the action or proceeding and shall be 411  
collected at the time of the filing of the action or proceeding. 412  
The court shall not waive the payment of the additional filing 413  
fees in a new civil action or proceeding unless the court waives 414  
the advanced payment of all filing fees in the action or 415  
proceeding. All such moneys collected during a month except for an 416  
amount equal to up to one per cent of those moneys retained to 417  
cover administrative costs shall be transmitted on or before the 418  
twentieth day of the following month by the clerk of the court to 419  
the treasurer of state in a manner prescribed by the treasurer of 420  
state or by the Ohio legal assistance foundation. The treasurer of 421  
state shall deposit four per cent of the funds collected under 422  
this division to the credit of the civil case filing fee fund 423

established under section 120.07 of the Revised Code and 424  
ninety-six per cent of the funds collected under this division to 425  
the credit of the legal aid fund established under section 120.52 426  
of the Revised Code. 427

The court may retain up to one per cent of the moneys it 428  
collects under this division to cover administrative costs, 429  
including the hiring of any additional personnel necessary to 430  
implement this division. If the court fails to transmit to the 431  
treasurer of state the moneys the court collects under this 432  
division in a manner prescribed by the treasurer of state or by 433  
the Ohio legal assistance foundation, the court shall forfeit the 434  
moneys the court retains under this division to cover 435  
administrative costs, including the hiring of any additional 436  
personnel necessary to implement this division, and shall transmit 437  
to the treasurer of state all moneys collected under this 438  
division, including the forfeited amount retained for 439  
administrative costs, for deposit in the legal aid fund. 440

(D) On and after the thirtieth day after December 9, 1994, 441  
the court of common pleas shall collect the sum of thirty-two 442  
dollars as additional filing fees in each new action or proceeding 443  
for annulment, divorce, or dissolution of marriage for the purpose 444  
of funding shelters for victims of domestic violence pursuant to 445  
sections 3113.35 to 3113.39 of the Revised Code. The filing fees 446  
required to be collected under this division shall be in addition 447  
to any other filing fees imposed in the action or proceeding and 448  
shall be collected at the time of the filing of the action or 449  
proceeding. The court shall not waive the payment of the 450  
additional filing fees in a new action or proceeding for 451  
annulment, divorce, or dissolution of marriage unless the court 452  
waives the advanced payment of all filing fees in the action or 453  
proceeding. On or before the twentieth day of each month, all 454  
moneys collected during the immediately preceding month pursuant 455

to this division shall be deposited by the clerk of the court into 456  
the county treasury in the special fund used for deposit of 457  
additional marriage license fees as described in section 3113.34 458  
of the Revised Code. Upon their deposit into the fund, the moneys 459  
shall be retained in the fund and expended only as described in 460  
section 3113.34 of the Revised Code. 461

(E) (1) The court of common pleas may determine that, for the 462  
efficient operation of the court, additional funds are necessary 463  
to acquire and pay for special projects of the court, including, 464  
but not limited to, the acquisition of additional facilities or 465  
the rehabilitation of existing facilities, the acquisition of 466  
equipment, the hiring and training of staff, community service 467  
programs, mediation or dispute resolution services, the employment 468  
of magistrates, the training and education of judges, acting 469  
judges, and magistrates, and other related services. Upon that 470  
determination, the court by rule may charge a fee, in addition to 471  
all other court costs, on the filing of each criminal cause, civil 472  
action or proceeding, or judgment by confession. 473

If the court of common pleas offers a special program or 474  
service in cases of a specific type, the court by rule may assess 475  
an additional charge in a case of that type, over and above court 476  
costs, to cover the special program or service. The court shall 477  
adjust the special assessment periodically, but not retroactively, 478  
so that the amount assessed in those cases does not exceed the 479  
actual cost of providing the service or program. 480

All moneys collected under division (E) of this section shall 481  
be paid to the county treasurer for deposit into either a general 482  
special projects fund or a fund established for a specific special 483  
project. Moneys from a fund of that nature shall be disbursed upon 484  
an order of the court in an amount no greater than the actual cost 485  
to the court of a project. If a specific fund is terminated 486

because of the discontinuance of a program or service established 487  
 under division (E) of this section, the court may order that 488  
 moneys remaining in the fund be transferred to an account 489  
 established under this division for a similar purpose. 490

(2) As used in division (E) of this section: 491

(a) "Criminal cause" means a charge alleging the violation of 492  
 a statute or ordinance, or subsection of a statute or ordinance, 493  
 that requires a separate finding of fact or a separate plea before 494  
 disposition and of which the defendant may be found guilty, 495  
 whether filed as part of a multiple charge on a single summons, 496  
 citation, or complaint or as a separate charge on a single 497  
 summons, citation, or complaint. "Criminal cause" does not include 498  
 separate violations of the same statute or ordinance, or 499  
 subsection of the same statute or ordinance, unless each charge is 500  
 filed on a separate summons, citation, or complaint. 501

(b) "Civil action or proceeding" means any civil litigation 502  
 that must be determined by judgment entry." 503

In line 98901, after "1753.09," insert "1901.26,"; after 504  
 "1901.31," insert "1907.24,"; after "2151.011," insert "2303.201," 505

In line 107603, delete "\$30,000,000 \$30,000,000" and 506  
 insert "\$35,000,000 \$35,000,000" 507

In line 107607, delete "\$63,829,449 \$74,309,677" and 508  
 insert "\$68,829,449 \$79,309,677" 509

In line 107608, delete "\$95,543,458 \$100,344,944" and 510  
 insert "\$100,543,458 \$105,344,944" 511

In line 56 of the title, after "1753.09," insert "1901.26," 512

In line 57 of the title, after "1901.31," insert "1907.24,"; 513  
 after "2151.011," insert "2303.201," 514

The motion was \_\_\_\_\_ agreed to.

SYNOPSIS

Additional Filing Fee	515
R.C. 1901.26, 1907.24, and 2303.201; Section 361.10	516
Increases by \$5.00 the additional filing fees collected in civil actions to fund legal aid societies, expands the application of the filing fee to marriage terminations and dissolutions, and increases the appropriation in SSR line item 019806, Civil Legal Aid, by \$5,000,000 in each fiscal year.	517 518 519 520 521



5 \_\_\_\_\_ moved to amend as follows:

6 Between lines 108871 and 108872, insert:

7 **"Section \_\_\_\_.** YOUNGSTOWN STATE PILOT SERVICE AREA STUDY  
8 COMMITTEE

9 There is hereby established the Youngstown State Pilot  
10 Service Area Study Committee. The Committee shall examine the  
11 cost and feasibility of creating a Youngstown State Pilot  
12 Service Area. The Committee shall determine what counties may  
13 be included in the pilot service area and the need for  
14 reciprocity arrangements with participating counties. The Board  
15 of Regents shall provide administrative support for the  
16 Committee.

17 The membership of the Committee shall consist of the  
18 Chancellor of the Board of Regents, or the Chancellor's  
19 designee, who shall act as chair; the President of Youngstown  
20 State University, or the President's designee; one additional  
21 representative of Youngstown State University; one member of the  
22 House of Representatives from each political party, appointed by  
23 the Speaker of the House of Representatives; and one member of

24 the Senate from each political party, appointed by the President  
25 of the Senate. Initial appointments to the Committee shall be  
26 completed within ninety days of the effective date of this  
27 section. The Chancellor shall convene the Committee not more  
28 than thirty days after the final appointment has been made.

29 The Committee shall submit its recommendations in a written  
30 report to the Governor, the Speaker of the House of  
31 Representatives, and the President of the Senate not later than  
32 June 30, 2010. Upon completion of its report, the Committee  
33 shall cease to exist."

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34 The motion was \_\_\_\_\_ agreed to.

35 SYNOPSIS

36 **Board of Regents**

37 **Section \_\_\_\_\_**

38 Creates the Youngstown State Pilot Service Area Study  
39 Committee to examine the cost and feasibility of creating a  
40 Youngstown State Pilot Service Area and determine what counties  
41 and reciprocity the service area may include. Specifies the  
42 membership of the Committee. Requires that the Committee submit  
43 its recommendations in a written report to the Governor, the  
44 Speaker of the House of Representatives, and the President of  
45 the Senate not later than June 30, 2010.

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Sub. H.B. 1  
LSC 128 0516-4  
HC-2304

5 \_\_\_\_\_ moved to amend as follows:

6 Between lines 104920 and 104921, insert:

7 "Of the foregoing appropriation item 440459, Help Me Grow,  
8 \$300,000 in each fiscal year shall be allocated to The Ohio  
9 State University College of Dentistry's Dental Bus Program."

10 The motion was \_\_\_\_\_ agreed to.

11 SYNOPSIS

12 **Department of Health**

13 **Section 289.20**

14 Earmarks \$300,000 in each fiscal year from GRF line item  
15 440459, Help Me Grow, for The Ohio State University College of  
16 Dentistry's Coach Dental Bus Program.

1 128HB1-HC2305.docx/ss

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Sub. H.B. 1  
LSC 128-0516-4  
HC-2305

5 \_\_\_\_\_ moved to amend as follows:

6 Between lines 101649 and 101650, insert:

7 "Of the foregoing appropriation item 195643, Workforce  
8 Development Initiatives, \$50,000 in each fiscal year shall be  
9 used for the NewLife Technical Institute in support of the  
10 Bridges from Poverty to IT Jobs pilot program."

11 The motion was \_\_\_\_\_ agreed to.

12 SYNOPSIS

13 **Department of Development**

14 **Section 259.10.90**

15 Earmarks \$50,000 in each fiscal year from Federal Special  
16 Revenue Fund 3AEO appropriation item 195643, Workforce  
17 Development Initiatives, in the Department of Development for  
18 the NewLife Technical Institute in support of the Bridges from  
19 Poverty to IT Jobs pilot program.

APR 24 2009

128HB1-HC2308/RYT

Sub. H.B. 1  
LSC 128 0516-4  
HC-2308



\_\_\_\_\_ moved to amend as follows:

In line 344, after "323.156," insert "323.78," 1

In line 369, after "1710.13," insert "1724.04," 2

Between lines 13414 and 13415, insert: 3

"Sec. 323.78. Notwithstanding anything in Chapters 323., 4  
5721., and 5723. of the Revised Code, if the county treasurer of a 5  
~~county having a population of more than one million two hundred~~ 6  
~~thousand as of the most recent decennial census,~~ in any petition 7  
for foreclosure of abandoned lands, elects to invoke the 8  
alternative redemption period, then upon any adjudication of 9  
foreclosure by any court or the board of revision in any 10  
proceeding under section 323.25, sections 323.65 to 323.79, or 11  
section 5721.18 of the Revised Code, the following apply: 12

(A) Unless otherwise ordered by a motion of the court or 13  
board of revision, the petition shall assert, and any notice of 14  
final hearing shall include, that upon foreclosure of the parcel, 15  
the equity of redemption in any parcel by its owner shall be 16  
forever terminated after the expiration of the alternative 17  
redemption period, that the parcel thereafter may be sold at 18  
sheriff's sale either by itself or together with other parcels as 19  
permitted by law; or that the parcel may, by order of the court or 20

board of revision, be transferred directly to a municipal 21  
 corporation, township, county, school district, or county land 22  
 reutilization corporation without appraisal and without a sale, 23  
 free and clear of all impositions and any other liens on the 24  
 property, which shall be deemed forever satisfied and discharged. 25

(B) After the expiration of the alternative redemption period 26  
 following an adjudication of foreclosure, by order of the court or 27  
 board of revision, any equity of redemption is forever 28  
 extinguished, and the parcel may be transferred individually or in 29  
 lots with other tax-foreclosed properties to a municipal 30  
 corporation, township, county, school district, or county land 31  
 reutilization corporation without appraisal and without a sale, 32  
 upon which all impositions and any other liens subordinate to 33  
 liens for impositions due at the time the deed to the property is 34  
 conveyed to a purchaser or transferred to a community development 35  
 organization, county land reutilization corporation, municipal 36  
 corporation, county, township, or school district, shall be deemed 37  
 satisfied and discharged. Other than the order of the court or 38  
 board of revision so ordering the transfer of the parcel, no 39  
 further act of confirmation or other order shall be required for 40  
 such a transfer, or for the extinguishment of any right of 41  
 redemption. No such parcel shall be transferred to a county land 42  
 reutilization corporation after two years following the filing of 43  
 its articles of incorporation by the secretary of state. 44

(C) Upon the expiration of the alternative redemption period 45  
 in cases to which the alternative redemption period has been 46  
 ordered, if no community development organization, county land 47  
 reutilization corporation, municipal corporation, county, 48  
 township, or school district has requested title to the parcel, 49  
 the court or board of revision may order the property sold as 50  
 otherwise provided in Chapters 323. and 5721. of the Revised Code, 51

and, failing any bid at any such sale, the parcel shall be 52  
 forfeited to the state and otherwise disposed of pursuant to 53  
 Chapter 5723. of the Revised Code." 54

Between lines 23991 and 23992 insert: 55

"Sec. 1724.04. A county ~~having a population of more than one~~ 56  
~~million two hundred thousand as of the most recent decennial~~ 57  
~~census~~ that elects under section 5722.02 of the Revised Code to 58  
 adopt and implement the procedures set forth in sections 5722.02 59  
 to 5722.15 of the Revised Code may organize a county land 60  
 reutilization corporation under this chapter and Chapter 1702. of 61  
 the Revised Code for the purpose of exercising the powers granted 62  
 to a county under Chapter 5722. of the Revised Code. The county 63  
 treasurer of the county for the benefit of which the corporation 64  
 is being organized shall be the incorporator of the county land 65  
 reutilization corporation. The form of the articles of 66  
 incorporation of the corporation shall be approved by resolution 67  
 of the board of county commissioners of the county. A county land 68  
 reutilization corporation may not be organized under this chapter 69  
 after the day that is one year after ~~the effective date of the~~ 70  
~~amendment of this section by S.B. 353 of the 127th General~~ 71  
~~Assembly April 7, 2009.~~ 72

When the articles of incorporation of any community 73  
 improvement corporation, or any amendment, amended articles, 74  
 merger, or consolidation which provides for the creation of such a 75  
 corporation, are deposited for filing and recording in the office 76  
 of the secretary of state, the secretary of state shall submit 77  
 them to the attorney general for examination. If such articles, 78  
 amendment, amended articles, merger, or consolidation, are found 79  
 by the attorney general to be in accordance with Chapter 1724. of 80  
 the Revised Code, and not inconsistent with the constitution and 81  
 laws of the United States and of this state, the attorney general 82

shall endorse thereon the attorney general's approval and deliver	83
them to the secretary of state, who shall file and record them	84
pursuant to section 1702.07 of the Revised Code."	85

In line 98874, after "323.156," insert "323.78,"	86
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In line 98898, after "1710.13," insert "1724.04,"	87
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In line 19 of the title, after "323.156," insert "323.78,"	88
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In line 53 of the title, after "1710.13," insert "1724.04,"	89
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The motion was \_\_\_\_\_ agreed to.

SYNOPSIS

County Land Reutilization Corporations	90
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R.C. 323.78 and 1724.04	91
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Authorizes all counties, not just those with a population	92
greater than 1.2 million, to create a county land reutilization	93
corporation for the purpose of disposing of tax-delinquent real	94
property.	95



5 \_\_\_\_\_ moved to amend as follows:

6 Between lines 99038 and 99039, insert:

7 "Section \_\_\_\_\_. Sections 1751.53 and 3923.38 of the Revised  
8 Code as they result from Section 120.10 of H.B. 2 of the 128th  
9 General Assembly are hereby repealed. This repeal enables the  
10 continued existence of those sections as they result from  
11 Section 101.01 of H.B. 2 of the 128th General Assembly."

12 In line 319 of the title, after the semicolon insert "to  
13 repeal the version of sections 1753.53 and 3923.38 of the  
14 Revised Code that were scheduled to take effect January 1,  
15 2010;"

16 The motion was \_\_\_\_\_ agreed to.

17 SYNOPSIS

18 **Continuation of Health Insurance Coverage**

19 **R.C. 1751.53 and 3923.38 and Section \_\_\_\_\_**

20 Makes permanent the changes made to Ohio's law regarding  
21 continuation of coverage after termination of employment by H.B.  
22 2 of the 128th General Assembly that were set to expire January  
23 1, 2010. H.B. 2 made the following changes: (1) it eliminated

24 the requirement that an individual be eligible for unemployment  
25 compensation in order to be eligible for continued coverage  
26 under the individual's employer-sponsored health insurance plan  
27 after termination of employment and requires only that the  
28 individual did not voluntarily terminate his or her employment  
29 and it was not terminated as a result of any gross misconduct on  
30 the part of the individual, (2) it lengthened the time that the  
31 individual would be eligible for continued coverage from six  
32 months to twelve months. It requires an employee to notify the  
33 health insuring corporation or insurer if the employee elects  
34 continuation of coverage, and (3) it allows the insurer to  
35 require the employer to provide documentation if the employee is  
36 seeking premium assistance for the continuation of coverage  
37 under the American Recovery and Reinvestment Act of 2009 and  
38 requires the Director of Insurance to publish guidance for  
39 employers and insurers regarding the contents of such  
40 documentation.

5 \_\_\_\_\_ moved to amend as follows:

6 In line 101451, delete "\$2,055,000 \$2,055,000" and insert  
7 "\$2,105,000 \$2,105,000"

8 In lines 101459 and 101528, add \$50,000 to each fiscal year

9 Between lines 101706 and 101707, insert:

10 "Of the foregoing appropriation item 195507, Travel and  
11 Tourism Grants, \$50,000 in each fiscal year shall be used for  
12 the Columbus Film Commission."

13 The motion was \_\_\_\_\_ agreed to.

14 SYNOPSIS

15 **Department of Development**

16 **Section 259.20.15**

17 Adds \$50,000 in each fiscal year to GRF appropriation item  
18 195507, Travel and Tourism Grants, in the Department of  
19 Development and earmarks those amounts for the Columbus Film  
20 Commission.

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\_\_\_\_\_ moved to amend as follows:

Between lines 101838 and 101839, insert: 1

"OHIO ENERGY RESOURCE CENTER 2

There is hereby created the Ohio Energy Resource Center at 3  
the Voinovich School of Leadership and Public Affairs at Ohio 4  
University. 5

The center shall do all of the following: 6

(A) Act as a knowledge hub for clean energy, advanced energy, 7  
and energy efficiency projects throughout the state; 8

(B) Maintain a database of research and development projects 9  
in the fields of clean energy, advanced energy, and energy 10  
efficiency undertaken by public institutions of higher education; 11

(C) Act as a clearinghouse for information and promote 12  
collaboration among public and private entities on federal, state, 13  
and private sources of financial and technical assistance for 14  
advanced energy, clean energy, and energy efficiency projects 15  
including, but not limited to, Edison Technology Centers, Edison 16  
Incubators, and programs under the Third Frontier Commission; and 17

(D) Provide technical assistance to state government and 18  
local governments, other political subdivisions, mercantile 19  
customers as defined in section 4928.01 of the Revised Code, and 20

businesses located in an Appalachian county as defined in section 21  
 107.21 of the Revised Code on clean energy, advanced energy, and 22  
 energy efficiency projects. 23

Of the foregoing appropriation item 195660, Advanced Energy 24  
 Programs, up to \$75,000 in each fiscal year shall be used for the 25  
 activities of the Center." 26

The motion was \_\_\_\_\_ agreed to.

SYNOPSIS

Department of Development 27

Section 259.20.80 28

Creates the Ohio Energy Research Center at the Voinovich 29  
 School of Leadership and Public Affairs at Ohio University; 30  
 requires the Center to act as a statewide knowledge hub for 31  
 projects in the areas of clean energy, advanced energy, and energy 32  
 efficiency; requires the Center to maintain a database research 33  
 and development projects undertaken by public higher education 34  
 institutions in such areas; requires the Center to act as a 35  
 clearinghouse for information and promote collaboration among 36  
 public and private entities on federal, state, and private sources 37  
 of financial and technical assistance for such projects, including 38  
 Edison Technology Centers, Edison Incubators, and Third Frontier 39  
 programs; and requires the Center to provide technical assistance 40  
 to state and local governments and other political subdivisions, 41  
 mercantile customers, and businesses located in the Appalachian 42  
 region as defined in Section 107.21 of the Revised Code on clean 43  
 energy, advanced energy, and energy efficiency projects. 44

Earmarks up to \$75,000 in each fiscal year for the Center 45

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from Fund 5M50 appropriation item 195660, Advanced Energy  
Projects, in the Department of Development.

46

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