



Greg Schwab

*Bill Analysis*  
*Legislative Service Commission*

## **H.B. 136**

124th General Assembly  
(As Introduced)

**Reps. R. Miller, Allen, Britton, D. Miller, Flannery, Rhine, Ford, Otterman, Ogg, Key, Webster, Sykes, S. Smith, Strahorn**

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### **BILL SUMMARY**

- Requires the state to include benefits for hearing examinations and hearing aids as one of the health care benefits provided to state employees who are paid directly by warrant of the auditor of state.

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### **CONTENT AND OPERATION**

#### **Mandated benefits for hearing examinations and hearing aids**

(secs. 124.81, 124.82, and 124.87)

Continuing law requires the Department of Administrative Services, in consultation with the Superintendent of Insurance, to contract with one or more insurance companies, or one or more health insuring corporations in combination with a sickness and accident insurer, to provide benefits, including health care benefits, to state employees who are paid directly by warrant of the auditor of state. Continuing law also permits the Department to contract for an insurance policy to provide benefits, which may include health care benefits, for some or all of the exempt employees paid in accordance with section 124.152 of the Revised Code and for some or all of the state employees listed in divisions (B)(2) and (4) of section 124.14 of the Revised Code, and their immediate dependents; these employees include legislative employees; employees of the Legislative Service Commission; employees in the office of the Governor; employees in the unclassified civil service in the office of the Secretary of State, Auditor of State, Treasurer of State, and Attorney General, who are exempt from collective bargaining coverage; employees of the Supreme Court; and any position for which the authority to determine compensation is given by law to another individual or entity (sec. 124.81(A)(3)). The bill requires that all of these contracts, entered into by the Department of Administrative Services, include benefits for hearing examinations and hearing aids.

Continuing law provides the Department of Administrative Services with alternatives to contracting with sickness and accident insurers and health insuring corporations for the provision of health care benefits. Benefits for hearing examinations and hearing aids would not necessarily be offered under these alternatives. The Department may itself provide benefits equivalent to those that may be paid under a policy or contract issued by an insurance company or health plan. To comply with a collectively bargained contract, the Department or any public employer (the state or a political subdivision of the state) may enter into an agreement with a jointly administered trust fund for the purpose of providing for self-insurance of employee benefits, including health care benefits. Benefits may also be provided through the state employee health benefit fund established in the state treasury (sec. 124.87).

The state employee health benefit fund is under the supervision of the Department of Administrative Services. However, the Department is required to contract with a sickness and accident insurer or professional claims administrator to administer the provision of any health care benefits to state employees using moneys from the fund. Moneys from the fund may be used to provide state employees with any of the health care benefits specified in section 124.82 of the Revised Code. The fund may provide a single benefit or a number of benefits from those specified, may be used to supplement other health care coverage, or may serve as a secondary payor of benefits.

**When the mandate takes effect**

(Section 3)

The bill requires its mandatory coverage of hearing examinations and hearing aids be provided for at the next regularly appointed time for contract, policy, or plan negotiations or renegotiations with the Department of Administrative Services after the effective date of the act.

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**COMMENT**

It is possible this bill contains a "mandated benefit," as defined by section 103.144 of the Revised Code. Section 103.145 of the Revised Code, as enacted by the 123rd General Assembly, requires the Legislative Budget Officer to review any bill receiving a second hearing in a standing committee of the house of the General Assembly in which the bill originated to determine whether the bill contains a mandated benefit. If the Legislative Budget Officer determines that the bill includes a mandated benefit, the Legislative Budget Officer is required to arrange for the performance of an independent actuarial review of the mandated benefit. The findings of the actuarial review must be submitted to the chairperson

of the committee to which the bill is assigned, and to the ranking minority member of that committee, no later than 60 days after the second hearing of the bill.

The chairperson of a standing committee of either house of the General Assembly may request, at any time, the Legislative Budget Officer to review any bill assigned to that committee in order to determine whether the bill includes a mandated benefit. If the Legislative Budget Officer determines that the bill includes a mandated benefit, the Legislative Budget Officer must arrange for the performance of an independent actuarial review of the mandated benefit in the same manner provided for in section 103.145 of the Revised Code.

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## **HISTORY**

ACTION	DATE	JOURNAL ENTRY
Introduced	02-27-01	p. 186

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