

Executive

As Reported By House Finance

NURCD1 Doula registry and advisory board

R.C. 4723.89, 4723.90

No provision.

Requires NUR to establish standards and procedures for issuing certificates to doulas and outlines requirements that should be addressed in rule, including the establishment of certificate application and renewal fees, as well as a waiver of those fees for applicants with a family income below 300% FPL.

No provision.

Requires NUR to develop and regularly update a registry of doulas, which is to be made available on the NUR website.

No provision.

Establishes the Doula Advisory Board within NUR, which will meet during the five year period that the Medicaid program covers doula services (see MCD52). Establishes the Board's membership and duties and requires NUR to provide meeting space, staff, and other technical assistance required for the Board to carry out its duties.

Fiscal effect: NUR will realize administrative and information technology costs to certify doulas and establish a registry. However, NUR could realize a gain in certification revenue. NUR will realize per diem and reimbursement expenses for the Advisory Board.

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MCD52 Doula services

No provision.

R.C. 5164.071

Establishes a five-year program in ODM to cover doula services provided to a Medicaid enrollee by a certified doula with a Medicaid provider agreement.

Fiscal effect: Costs will depend on reimbursement rates set for doula services, and the number of Medicaid enrollees who choose to receive doula services.

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MHACD21 Mobile-based opioid use disorder treatment

Section: 337.95

Requires OhioMHAS to operate a pilot program during FY 2024 and FY 2025 to provide opioid use disorder treatment to individuals in underserved regions selected by OhioMHAS, using medication units that are mobile.

Specifies that the purpose of the program is to extend access to medication-assisted treatment to areas of the state lacking licensed opioid treatment programs and qualifying practitioners.

Requires OhioMHAS to ensure that the services provided in mobile medication units used in the pilot program are those specified in relevant guidance issued by the U.S. Substance Abuse and Mental Health Services Administration.

Requires PRX, SMBO, and NUR and any other state agency that OhioMHAS determines may be of assistance in accomplishing the pilot program's purpose to provide assistance upon request from OhioMHAS.

Requires OhioMHAS to develop a plan for implementing and evaluating the pilot program within 60 days of the section's effective date.

Requires OhioMHAS to complete a report of the findings obtained from the program within six months after the conclusion of the pilot program.

Earmarks \$750,000 in each fiscal year in GRF ALI 336504, Community Innovations, to operate the pilot program.

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DRCCD20 Prison nursery doula program

No provision.

R.C. 5120.658

Establishes a five-year program in DRC for certified doulas to provide doula services to inmates participating in a prison nursery program.

Fiscal effect: DRC's costs to operate the required doula program will depend on the number of inmates participating in any prison nursery program.