
Executive**DOHCD1 Fetal-infant mortality review boards****R.C. 121.22, 3701.049, 3707.70-3707.77**

Authorizes local boards of health to establish fetal-infant mortality review boards to review fetal and infant deaths within the board's jurisdiction.

Specifies a review board's membership, purposes, and responsibilities.

Specifies that investigatory materials that a review board possesses are confidential, and that review board meetings are not subject to Ohio's Open Meetings Law.

Specifies that entities that submit investigatory materials to a review board, as well as review board members, are immune from civil liability in connection with their responsibilities.

Requires the Director of ODH to adopt rules associated with the establishment and operation of fetal-infant mortality review boards.

Fiscal effect: ODH may experience an increase in administrative costs to adopt rules. If a review board is established, the local board of health could experience an increase in costs to operate the review board.

DOHCD2 Pregnancy-Associated Mortality Review Board**R.C. 121.22, 3738.01-3738.09**

Authorizes ODH to establish a Pregnancy-Associated Mortality Review (PAMR) Board to identify and review all pregnancy-associated deaths in Ohio for the purpose of reducing the incidence of those deaths.

Prohibits the PAMR Board from reviewing deaths under investigation or prosecution unless the prosecuting attorney agrees.

Describes PAMR Board membership and operations.

Specifies that information the PAMR Board possesses is confidential and that meetings are exempt from the Open Meetings Law.

Specifies that those who submit information to the PAMR Board, as well as PAMR Board members, are immune from civil liability in connection with their responsibilities.

Authorizes the Director of ODH to adopt rules concerning how the PAMR Board conducts pregnancy-associated death reviews.

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Fiscal effect: If a PAMR Board is established, ODH may experience an increase in costs to operate the Board and to provide meeting space, staff services, and other technical assistance. ODH may also experience an increase in administrative costs to adopt rules.

DOHCD29 Drug overdose fatality review committees**R.C. 121.22, 307.631-307.639, 3701.0410, 4731.22**

Authorizes the establishment of county or regional drug overdose fatality review committees to review drug overdose and opioid-involved deaths occurring within the county or region.

Requires each review committee that is established to collect certain information concerning drug overdose or opioid-involved deaths, review the information, and submit annual reports to ODH. Specifies committee membership and states that committee meetings are not subject to the Open Meetings Law.

Requires specified individuals or entities that provided services to a person whose death is reviewed by a committee to submit summary sheets of information to the committee.

Grants immunity from civil liability to committee members and any individual or entity providing information to a committee.

Provides that records presented to a review committee, statements made by committee members, committee work products, and data submitted to the Department, other than annual reports, are confidential.

Requires ODH to adopt rules establishing procedures for a committee to follow in conducting reviews of overdose deaths.

Fiscal effect: Local boards of health could experience administrative costs if board establishes a review committee. ODH may realize an increase in administrative costs to adopt rules and for the collection of review committee reports.

DOHCD35 Public Health Priorities Fund**R.C. 183.18, 183.33, Section 291.20**

Changes the name of Ohio's Public Health Priorities Trust Fund to Ohio's Public Health Priorities Fund, eliminates the purposes for which money credited to the Fund must be used, and instead requires the Director of ODH to use the money to conduct public health awareness and educational campaigns, to address pressing public health issues, to implement innovative public health programs and prevention strategies, and to improve the population health of Ohio.

Eliminates the prohibition on transferring or appropriating money from the General Revenue Fund to the Fund.

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Requires DPF Fund L087 appropriation item 440669, Public Health Priorities, to be used to conduct public health awareness and education campaigns, initiate innovative programming and prevention strategies, and other work related to advancing positive changes in population health in Ohio.

Allows ODH to distribute grants, contracts, or subsidy for these purposes, including, but not limited to, supporting public-private partnerships to address pressing public health issues.

Fiscal effect: The Fund will be supported by a \$2.0 million transfer from the GRF in FY 2020.

DOHCD8 Examination fees**R.C. 3701.044**

Requires ODH to post on its website examination fee amounts, including any changes to those fees, when entities other than ODH administer certain examinations on the Department's behalf and collect and retain fees for the examinations.

Fiscal effect: Minimal increase in administrative costs.

DOHCD30 Occupational disease reporting**R.C. 3701.25, 3701.26, 3701.27 (repealed), conforming changes in 3701.571, 3701.99, 3742.03, 3742.04**

Eliminates the requirement that physicians report suspected occupational diseases and ailments to the Director of ODH.

Fiscal effect: Minimal decrease in costs regarding the collection of reports.

DOHCD7 Diabetes action plan**R.C. 3701.139**

Lengthens the reporting cycle for the Director of ODH to submit to the General Assembly a report detailing the prevalence of diabetes to three years (from two).

Fiscal effect: Decrease in costs related to the completion and submission of the report to the General Assembly due to the expanded time frame.

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DOHCD6 Ohio Cancer Incidence Surveillance System Advisory Board**R.C. 3701.264 (repealed)**

Abolishes the Ohio Cancer Incidence Surveillance System Advisory Board, but maintains the Surveillance System within ODH.

Fiscal effect: None.

DOHCD28 Process for screening newborns for Krabbe disease**R.C. 3701.501**

Repeals the law limiting the required screening of newborns for Krabbe disease to a process known as "first tier testing," or screening accomplished by measuring galactocerebrosidase activity.

Fiscal effect: None.

DOHCD9 Providers of medical services under the Breast and Cervical Cancer Project**R.C. 3701.601**

Adds the following providers to those eligible to receive from the Breast and Cervical Cancer Project Income Tax Contribution Fund payments for services: free clinics, mammography services providers, radiology services providers, and rural health centers.

Fiscal effect: Expanding the number of providers could result in an increase in services provided.

DOHCD37 Standard pregnancy risk assessment form**R.C. 3701.953**

Requires the Director of the Governor's Children's Initiative to convene a workgroup by January 1, 2020, to develop a standard, electronic pregnancy risk assessment form and to identify the processes and technology systems necessary for obstetric care providers, other persons, and government entities to comply with the required use of the form.

Specifies the workgroup's membership.

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Requires an obstetric care provider, beginning January 1, 2021, to complete a pregnancy risk assessment form for each obstetric patient at the patient's first visit designated for prenatal care and to submit the form through the designated state interface.

Requires a person or government entity that has or has had a relationship with a patient to accept a completed pregnancy risk assessment form as valid authorization for the disclosure of that patient's protected health information.

Prohibits information in the form from being used for discriminatory or unauthorized purposes and from being further disclosed by the authorized recipients.

Fiscal effect: Increase in administrative costs for the development of the form and for other workgroup duties. Potential increase in administrative costs for practitioners to fill out and submit the form. Potential increase in costs for case management services and a subsequent decrease in costs if women are referred to services that support healthy birth outcomes.

DOHCD3 Ambulatory surgical facility licensure**R.C. 3702.30, conforming changes in 111.15, 2317.54,
3702.12, 3702.13, 3711.12**

Modifies the criteria used in determining whether a facility must be licensed as an ambulatory surgical facility, as follows:

- (1) Requires licensure of a facility located within a building in which inpatient care is provided, if the facility is not operated by the entity that operates the remainder of the building;
- (2) Bases the licensure requirement for all facilities, both in separate buildings and within inpatient care buildings, on whether surgical services are provided to patients who do not require hospitalization and who receive services for not more than 24 hours; and
- (3) Eliminates licensure criteria involving consideration of anesthesia services, certification to participate in Medicare, or receipt of facility fees.

Fiscal effect: Minimal.

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DOHCD4 No intent to affect health care facility payments**R.C. 3702.30**

Expresses the General Assembly's intent to not have licensure requirements or exemptions affect any third-party payments that may be available for the following types of health care facilities: ambulatory surgical facilities, freestanding dialysis centers, freestanding inpatient rehabilitation facilities, freestanding birthing centers, freestanding radiation therapy centers, and freestanding or mobile diagnostic imaging centers.

Fiscal effect: None.

DOHCD10 Dental Hygiene Resource Shortage Area Fund**R.C. 3702.967**

Eliminates the Dental Hygiene Resource Shortage Area Fund and specifies that donations to that fund for the benefit of the Dental Hygienist Loan Repayment Program instead be paid to the Dental Hygienist Loan Repayment Fund.

Fiscal effect: None.

DOHCD36 ODM access to social security numbers accompanying vital statistics records**R.C. 3705.07, 3705.09, 3705.10**

Requires ODH's Office of Vital Statistics to make available to ODM, for the purpose of medical assistance eligibility determinations, social security numbers that accompany birth certificates or death certificates.

Fiscal effect: Potential minimal increase in administrative costs.

Executive**DOHCD5 Training centers for nursing home employees****R.C. 3721.41, 3721.42 (both repealed)**

Repeals the law requiring ODH to establish and supervise centers for training nursing home employees and to contract with other entities to operate those centers.

Fiscal effect: None.

DOHCD31 Establishment and regulation of body art program**R.C. 3730.01, 3730.02-3730.13, 3730.99, conforming
changes in 3701.83, 3709.09, 3709.092, Section
737.20**

Creates the umbrella term "body artist" for the practice of physical body adornment, including tattooing and body piercing, but not ear piercing performed with an ear piercing gun.

Establishes that beginning June 30, 2020, a body artist who wishes to perform body art services must obtain a registration from the Director of ODH. Establishes a fee of \$250 for registration.

Provides that a business offering body art services must obtain a license from a licensor, replacing the approval required from the board of health under existing law.

Establishes the licensor as (1) the board of health of a city or general health district, (2) the authority having the duties of a board of health in any city, or (3) the Director of ODH, or (4) any authorized representative of any of these entities or of the Director of ODH.

Prohibits a person from constructing, installing, renovating, or otherwise substantially altering a body art business without first obtaining approval from the licensor.

Requires that prior to the issuance of an initial license and annually thereafter, the licensor inspect each body art business in their jurisdiction to determine whether the business is in compliance with the body art laws and regulations.

Provides that the money received for licenses by the licensor must be placed in a Body Art Fund and used for enforcement of the body art program.

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Permits the board of health to suspend or revoke a body art business license at any time if the board determines the business is being operated in violation of the Body Art Law.

Requires the Director of ODH to adopt rules for body art businesses and body artists and the regulation of the body art program.

Permits the Director of ODH to survey each board of health that licenses body art businesses to determine if the board of health is in substantial compliance with the body art program.

Requires the Director of ODH, if the Director determines that the board of health is not in compliance with the body art program, to perform the duties of the licensor in that jurisdiction.

Requires that a parent, guardian, or custodian of a minor who desires to authorize a business to perform body art on a minor to provide documentation that they are the parent, guardian, or custodian.

Fiscal effect: ODH has budgeted \$500,000 in DPF ALI 440647, Fee Supported Programs, for the establishment of the program and anticipates hiring approximately four employees. Registration and licensure fees will help to support the program. Annual registration for a body artist will be \$250. Local boards of health that become licensors may experience an increase in costs for enforcement/inspection; however, license fees may be collected by the board and deposited in a body art fund.

DOHCD32**Enforcement of order to vacate****R.C. 3742.18, 3742.40**

Requires the Director of ODH or a board of health to issue an order that prohibits the owner or manager of a residential unit, child-care facility, or school from using the property for any purpose under the following circumstances:

- (1) The owner or manager has failed to comply with a lead hazard control order; and
- (2) The residential unit, child-care facility, or school has not passed a lead hazard clearance examination.

Authorizes the Director or a board of health to request a prosecuting attorney, city director of law, village solicitor, or similar chief legal officer to commence a civil action for injunctive and other equitable relief against any person who violates an order.

Fiscal effect: Potential increase in lead hazard enforcement costs for ODH or local boards of health. Potential increase in costs for local courts if cases are brought forward.

Executive**DOHCD33 Child lead poisoning advisory council****R.C. 3742.32**

Updates the names of two associations represented on the advisory council, which is a council that assists in the ongoing development and implementation of the Child Lead Poisoning Prevention Program.

Adds the following four members to the advisory council: a representative from Ohio Realtors, a representative of the Ohio Housing Finance Agency, a physician knowledgeable in the field of lead poisoning prevention, and a representative of the public.

Fiscal effect: None.

DOHCD27 Sanitarian and sanitarian in training law**R.C. 4736.01, 4736.02, 4736.03, 4736.07-4736.09,
4736.11, 4736.13-4736.15, 4736.17, 4736.18 (all
renumbered in R.C. 3722.), 4736.05-4736.06
(repealed), 4736.10 (repealed), 4736.12 (repealed),
and Section 747.10**

Recodifies Chapter 4736. of the Revised Code, the law governing sanitarians and sanitarians in training, in Chapter 3722. of the Revised Code and reorganizes that law.

Removes all statutorily imposed registration, registration renewal, and examination fees for sanitarians and sanitarians in training, and instead requires the Director of ODH to adopt rules that establish the fees. Specifies that any sanitarian or sanitarian in training fee imposed under R.C. 4736.12 as that section existed on January 1, 2019 must remain in effect until the Director of DOH adopts rules establishing new fees.

Removes the following laws from the list of laws requiring enforcement and regulation by a sanitarian or sanitarian in training: garbage scavengers, sanitary plants, youth sports organizations and concussion protocols, rabies control, naloxone protocols, and blood borne infectious disease prevention programs.

Requires a Department of Agriculture employee who administers and enforces the laws governing food processing establishments and a board of health employee who administers and enforces the laws governing tattooing and body piercing or rabies from dog bites to register as a sanitarian or sanitarian in training.

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Specifies that the Director of ODH may appoint Sanitarian Advisory Board members without having to get the advice and consent of the Senate as is required in current law.

Prohibits a person who is not a registered sanitarian in training from representing oneself as a registered sanitarian in training.

Eliminates provisions of law that require the Director of ODH to do the following:

- (1) Annually prepare a list of the names and address of every person registered as a sanitarian and sanitarian in training and a list of every person whose registration has been suspended or revoked within the previous year;
- (2) Be responsible for preparing the sanitarian and sanitarian in training registration examination;
- (3) Provide, annually and when requested, to each registered sanitarian a list of courses approved by the Director of ODH as satisfying the continuing education program; and
- (4) Designate a serial number for each certificate of registration.

Requires, instead of authorizes, the Director of ODH to administer an examination for a sanitarian in training applicant and requires registered sanitarians in training to complete an annual continuing education program.

Removes a provision of law that prohibits the examination from disclosing the name of the applicant.

Specifies that the Director may use materials prepared by recognized examination entities, rather than examination agencies.

Decreases, from one year to sixty days, the amount of time a sanitarian applicant or sanitarian in training applicant may renew a certificate to practice prior to the date of expiration.

Requires the Director to issue certificates of registration to practice in January and July of each year.

Fiscal effect: None. ODH expects that the fees established in rules will be the same as the fees currently in statute.

DOHCD26**Radiation technicians**

R.C. 4773.01, 4773.011, 4773.061, 4773.08

Makes all of the following changes with respect to the law governing the regulation of radiation technology professionals by ODH:

- (1) Modifies the definitions of a general x-ray machine operator, radiation therapy technologist, and radiographer to include references to radiation-generating equipment;
- (2) Specifies that a radiation therapy technologist includes a radiation therapist;

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(3) Authorizes nuclear medicine technologists and radiation therapy technologists who are certified in computed tomography (CT) to perform CT procedures; and

(4) Requires the Director of ODH to adopt rules establishing standards for the performance of CT procedures and for the approval of national certifying organizations that certify nuclear medicine and radiation therapy technologists in CT.

Fiscal effect: ODH may experience a minimal increase in administrative costs to adopt rules.

DOHCD11 Mothers and Children Safety Net Services**Section: 291.20**

Allows up to \$200,000 in each fiscal year in GRF appropriation item 440416, Mothers and Children Safety Net Services, to be used to assist families with hearing impaired children under 21 years of age in purchasing hearing aids and hearing assistive technology.

Requires the Director of ODH to adopt rules governing the distribution of these funds including rules that do both of the following:

(1) establish eligibility criteria to include families with incomes at or below 400% of the federal poverty guidelines; and (2) develop a sliding scale of disbursements based on family income.

DOHCD12 HIV/AIDS Prevention and Treatment**Section: 291.20**

Requires GRF appropriation item 440444, AIDS Prevention and Treatment, to be used to administer educational and other prevention initiatives.

DOHCD13 Infant Vitality**Section: 291.20**

Requires GRF appropriation item 440474, Infant Vitality, to be used to fund a multi-pronged population health approach to address infant mortality.

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Specifies that this approach may include the following: increasing awareness; supporting data collection; analysis and interpretation to inform decision-making and ensure accountability; targeting resources where the need is greatest; and implementing quality improvement science and programming that is evidence-based or based on emerging practices.

Specifies that measurable interventions may include activities related to safe sleep, community engagement, Centering Pregnancy, newborn screening, safe birth spacing, gestational diabetes, smoking cessation, breastfeeding, care coordination, and progesterone.

DOHCD14 Emergency Preparedness and Response**Section: 291.20**

Requires GRF appropriation item 440477, Emergency Preparedness and Response, to be used to support public health emergency preparedness and response efforts at the state level or at a regional sub-level within the state.

Allows appropriation item 440477 to also be used to support data infrastructure projects.

DOHCD15 Targeted Health Care Services - Over 21**Section: 291.20**

Requires GRF appropriation item 440507, Targeted Health Care Services - Over 21, to be used to administer the Cystic Fibrosis Program and to implement the Hemophilia Insurance Premium Payment Program.

Requires ODH to expend \$100,000 in each fiscal year to implement the Hemophilia Insurance Premium Payment Program.

Requires GRF appropriation item 440507 to also be used to provide essential medications and to pay the copayments for drugs approved by ODH and covered by Medicare Part D that are dispensed to participants in the Cystic Fibrosis Program.

Requires ODH to expend all funds in appropriation item 440507.

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DOHCD17 Fee Supported Programs**Section: 291.20**

Requires \$2,160,000 in each fiscal year from DPF Fund 4700 appropriation item 440647, Fee Supported Programs, to be used to distribute subsidies to local health departments on a per capita basis.

Requires \$1,500,000 in each fiscal year from appropriation item 440647 to be used to distribute subsidies to local health departments accredited through the Public Health Accreditation Board on a per capita basis.

DOHCD18 Medically Handicapped Children Audit Fund**Section: 291.20**

Specifies that the Medically Handicapped Children Audit Fund (Fund 4770) is to receive revenue from audits of hospitals and recoveries from third-party payers. Permits moneys in the fund to be used for payment of audit settlements and for costs directly related to obtaining recoveries from third-party payers and for encouraging Medically Handicapped Children's Program recipients to apply for third-party benefits.

Permits moneys in the fund to also be used for payments for diagnostic and treatment services on behalf of medically handicapped children and Ohio residents who are 21 or over and who are suffering from cystic fibrosis or hemophilia.

Permits moneys to also be used for administrative expenses incurred in operating the Medically Handicapped Children's Program.

DOHCD19 Genetics Services**Section: 291.20**

Requires DPF Fund 4D60 appropriation item 440608, Genetics Services, to be used to administer programs authorized by R.C. 3701.501 and 3701.502. Requires that the funds cannot be used to counsel or refer for abortion, except in the case of a medical emergency.

Executive**DOHCD20 Tobacco Use Prevention, Cessation, and Enforcement****Section: 291.20**

Requires \$250,000 in each fiscal year from appropriation item 440656 to be distributed to boards of health for the Baby and Me Tobacco Free Program. Requires the Director to determine how the funds are to be distributed, but must prioritize awards to boards that serve women who reside in communities that have the highest infant mortality rates in this state, as identified under R.C. 3701.142.

Requires the remainder of the appropriation item to be used to administer tobacco use prevention and cessation activities and programs and to enforce the Ohio Smoke-Free Workplace Act (See DOHCD24 for the Moms Quit for Two Grant Program earmark).

DOHCD21 Toxicology Screenings**Section: 291.20**

Requires DPF Fund 5TZ0 appropriation item 440621, Toxicology Screenings, to be used to reimburse county coroners in counties in which the coroner has performed toxicology screenings on victims of a drug overdose.

Requires the Director of ODH to transfer the funds to the counties in proportion to the numbers of toxicology screenings performed per county.

DOHCD22 Medically Handicapped Children - County Assessments**Section: 291.20**

Requires DPF Fund 6660 appropriation item 440607, Medically Handicapped Children – County Assessments, to be used to make payments for expenses associated with the Bureau for Children with Medical Handicaps.

Executive**DOHCD23 Cash transfer to Emergency Preparedness and Response Fund****Section: 291.20**

Allows the Director of ODH, if the Director determines that there are insufficient funds in GRF appropriation item 440477, Emergency Preparedness and Response, to certify to the Director of OBM an amount necessary to address public health emergency preparedness and response activities.

Requires the Director of OBM, upon certification, to transfer up to \$500,000 cash in each fiscal year from the Controlling Board Emergency Purposes/Contingencies Fund (Fund 5KM0) to the Emergency Preparedness and Response Fund (Fund 5UA0).

Appropriates the transferred amount.

DOHCD24 Moms Quit for Two Grant Program**Sections: 291.30, 291.20**

Creates the "Moms Quit for Two Grant Program," which is to provide grants to private, nonprofit entities or government entities that demonstrate the ability to deliver evidence-based tobacco cessation interventions to pregnant women and women living with children who reside in communities with high infant mortality, as determined by ODH.

Specifies that funds awarded shall not be used to provide tobacco cessation interventions to women who are eligible for Medicaid.

Requires \$750,000 in each fiscal year from DPF Fund 5BX0 appropriation item 440656, Tobacco Use Prevention, Cessation, and Enforcement, to be used to award grants for the Moms Quit for Two Grant Program.

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DOHCD25 WIC vendor contracts**Section: 291.40**

Requires ODH, during FY 2020 and FY 2021, to process and review a Women, Infants, and Children (WIC) vendor contract application not later than 45 days after receipt of the application if the applicant is a WIC-contracted vendor at the time of application and meets all of the following requirements: (1) submits a complete WIC vendor application with all required documents and information; (2) passes the required unannounced preauthorization visit within 45 days of submitting a complete application; and (3) completes the required in-person training within 45 days of submitting the complete application.

Requires ODH to deny an application for the contract if an applicant fails to meet any of the requirements.

Specifies that, after an application has been denied, the applicant may reapply for a contract to act as a WIC vendor during the contracting cycle that is applicable to the applicant's WIC region.

DOHCD38 Lupus awareness**Section: 291.50**

Requires the Director of ODH to enter into an agreement with the Commission on Minority Health to operate a Lupus Education and Awareness Program.

DOHCD34 Financial assistance for professionals providing substance use disorder treatment and services**Sections: 737.10, 737.11**

Authorizes the ODH to do both of the following on or after July 1, 2019:

- (1) Establish a loan repayment program for professionals who provide treatment and other related services to individuals with substance use disorders; and
 - (2) Establish a program under which physicians providing medication-assisted treatment (MAT) in health resource shortage areas may receive financial assistance.
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Fiscal effect: ODH has budgeted approximately \$1.1 million over the FY 2020-FY 2021 biennium for the new loan repayment program and for physicians providing MAT in health resource shortage areas.

Executive**OBMCD44 FY 2019 GRF ending balance****Section: 513.10**

Requires the Director of OBM to determine the GRF surplus revenue that existed on June 30, 2019, and transfer cash, up to the actual surplus revenue amount, from the GRF as follows:

- (1) Up to \$10 million to the Targeted Addiction Program Fund (Fund 5TZ0)
- (2) Up to \$31 million to the Statewide Treatment and Prevention Fund (Fund 4750)
- (3) Up to \$100 million to the H2Ohio Fund (Fund 6H20)
- (4) Up to \$5 million to the Books from Birth Fund (Fund 5VJ0)
- (5) Up to \$25 million to the State Park Fund (Fund 5120)
- (6) Up to \$25 million to the Emergency Purposes Fund (Fund 5KM0)
- (7) Up to \$25 million to the Disaster Services Fund (Fund 5E20)
- (8) Up to \$2 million to the Ohio Public Health Priorities Fund (Fund L087)
- (9) Up to \$19 million to the Tobacco Use Prevention Fund (Fund 5BX0)
- (10) Up to \$6.9 million to the Economic Development Programs Fund (Fund 5JC0)
- (11) Remaining surplus cash to the H2Ohio Fund (Fund 6H20)

OBMCD58 Utility Radiological Safety Board assessments**Section: 514.10**

Specifies the maximum amounts, unless the agency and nuclear electric utility mutually agree to a higher amount by contract, that may be assessed against nuclear electric utilities under RC 4937.05 (B) (2) and deposited into the following funds:

\$97,610 in FY 2020 and \$101,130 in FY 2021 to the Utility Radiological Safety Fund (Fund 4E40) used by the Department of Agriculture;

\$1,300,000 in each of FY 2020 and FY 2021 to the Radiation Emergency Response Fund (Fund 6100) used by the Department of Health;

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\$276,500 in FY 2020 and \$278,500 in FY 2021 to the ER Radiological Safety Fund (Fund 6440) used by the Environmental Protection Agency; and

\$1,258,624 in each of FY 2020 and FY 2021 to the Emergency Response Plan Fund (Fund 6570) used by the Department of Public Safety.

Executive**JFSCD10 Healthy Food Financing Initiative****Section: 307.135**

Requires that GRF appropriation item 600546, Healthy Food Financing Initiative, be used to contract with the Finance Fund Capital Corporation, in cooperation with ODH to support healthy food access in underserved communities.

Requires the Finance Fund Capital corporation to report to ODJFS the amount of funds granted or loaned, the number of new or retained jobs, the health impact of the initiative, and the number and location of healthy food access projects established or developed.

Executive**PUCCD1 Nuclear electric facility assessment****R.C. 4937.05, 4937.01**

Attempts to maintain the Utility Radiological Safety Board's (URSB) ability to make assessments against nuclear electric utilities after they stop producing electricity, by granting URSB authority to make assessments against those utilities based upon the utility decommissioning budgets.

Adds to the definition of "nuclear electric utility" under URSB law persons engaged in the storage of spent nuclear fuel arising from the production of electricity using nuclear energy.

Fiscal effect: Attempts to keep the URSB funded up to a maximum annual level of \$2.9 million, as specified in Section 514.10 of the bill, but actual outcomes will depend on whether the U.S. Nuclear Regulatory Commission regards URSB funding as an allowable use of nuclear decommissioning trust fund assets. The provision is only applicable if one or both of Ohio's two nuclear electric facilities ceases operations. FirstEnergy previously announced its Davis-Besse Nuclear Power Station in Oak Harbor will close by May 31, 2020, and its Perry Nuclear Power Plant in Perry will close by May 31, 2021.

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TAXCD27 Legal age for a a person to receive or purchase cigarettes**R.C. 2927.02, 2927.022**

Increases from 18 to 21 the legal age for a person to receive or purchase cigarettes, other tobacco products, alternative nicotine products, or papers used to roll cigarettes.

Defines and includes vapor products within the definition of "alternative nicotine product."

Requires clear and visible posting of signage indicating the legal age at locations where cigarettes, tobacco, and alternative nicotine products are sold.

Fiscal effect: The Executive estimates a GRF revenue loss of \$2.7 million in FY 2020 and \$4.0 million in FY 2021 under the sales and use tax from this provision, and GRF losses of \$14.3 million in FY 2020 and \$18.7 million in FY 2021 from cigarette tax effects. The provision may also increase the costs of local law enforcement agencies if it results in more violation cases.

TAXCD24 Lead abatement tax credit**R.C. 3742.50, 5747.02, 5747.08, 5747.26, and 5747.98;
Section 757.10**

Authorizes taxpayers to apply to the Department of Health for a nonrefundable income tax credit for costs incurred to abate lead hazards in a dwelling built before 1978. Limits the amount of each credit to the lesser of actual lead abatement costs incurred, the amount of such costs listed on an application for the credit, or \$10,000. Authorizes the credits beginning in taxable years beginning on or after January 1, 2020. Authorizes any unused credit to be carried forward up to 7 years.

Fiscal effect: Not more than \$5 million in total credits may be awarded in a biennium.
