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OHIO LEGISLATIVE SERVICE COMMISSION

Office of Research
and Drafting

Legislative Budget
Office

S.B. 255
135th General Assembly

Fiscal Note & Local Impact Statement

[Click here for S.B. 255's Bill Analysis](#)

Version: As Introduced

Primary Sponsors: Sens. S. Huffman and Johnson

Local Impact Statement Procedure Required: No

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Highlights

- The bill replaces the current deposition and testimony rate schedules for coroner expert testimony with a blanket \$350 rate for services. This could result in a net gain in revenue, since the proposed blanket rate represents an increase for deposition services and a decrease for testimony services, and more hours are typically billed for depositions than for expert testimony.
- The bill shifts the cost of transporting a body for an autopsy from the county where the autopsy occurs to the originating county where the body was fatally injured. If the body comes from a Department of Rehabilitation and Correction or Department of Youth Services' facility, then either of those entities would pay for the transportation costs. The cost to transport one body can range from \$150 to \$300 for shorter trips and \$400 to \$700 for longer trips between counties.
- The bill makes various changes to laws concerning coroners that could marginally decrease administrative and investigative costs or likely have no fiscal impact at all.

Detailed Analysis

Coroner fees for expert testimony

The bill replaces the deposition and testimony rates for coroner expert testimony with a \$350 blanket rate for these services. The rate for deposition services will increase and the rate for testimony services will decrease. The change to a blanket rate will likely result in a gain of revenue, since typically more hours are billed for deposition services than testimony services. Current law deposition and testimony rates are based on hourly rates paid to county coroners without a private practice of medicine at the class 6 level according to pay scales currently in effect, including annual raises of 1.75%, through calendar year 2028. Deposition rates are paid

based on the actual hourly rate. Testimonial fees are based on the hourly rate multiplied by six. The table below displays the current and proposed fee schedules through calendar year 2028.

Coroner Hourly Fees for Expert Testimony: Current and Proposed under S.B. 255			
Year	Deposition Rate	Testimony Rate	Proposed Service Rate
2022	\$73.40	\$440.41	--
2023	\$74.69	\$448.12	\$350.00
2024	\$75.99	\$455.96	\$350.00
2025	\$77.32	\$463.94	\$350.00
2026	\$78.68	\$472.06	\$350.00
2027	\$80.05	\$480.32	\$350.00
2028	\$81.45	\$488.72	\$350.00

Autopsy transportation costs

The bill adds the cost of transportation to the overall autopsy cost incurred by (1) the county where the body was fatally injured, or (2) the Department of Rehabilitation and Correction or Department of Youth Services when an individual who dies was an inmate of a state correctional facility. This differs from current law, under which the county performing the autopsy incurs this cost. The cost to transport one body could range from \$150 to \$300 for shorter trips, and \$400 to \$700 for longer trips between counties.

Physician completion of medical certificates of death

The bill may marginally decrease administrative costs to the coroner's office by requiring physicians to complete and sign the medical certificate of death for patients under standard care arrangements or supervision agreements. This change would alleviate existing delays that can occur under existing law when releasing a body to the deceased's family. There might be some negligible costs to public hospitals to update standard care arrangements or supervision agreements to include a provision stating that a physician is to complete and sign a medical death certificate.

Notice of facts related to suspicious and unusual deaths

The bill may marginally decrease investigative costs to the coroner's office. It would do so by adding health care workers looking after an individual to the list of professionals who must currently notify coroners in situations where a death is suspicious or unusual, might involve criminal and violent acts, occurs because of suicide, or the deceased is someone with developmental disabilities. Any state or local entities that employs health care workers may realize a minimal increase in costs to provide this notification – if the notification is not already provided.

Definition of the private practice of medicine

Likely having no fiscal effect, the bill specifies that a coroner performing an autopsy at the request of another coroner, a hospital, a business entity, an institution of higher education, or any other person does in fact constitute the private practice of medicine for purposes of determining the coroner's compensation. Continuing law sets forth the annual compensation of county coroners based on two factors: the county's population and whether a coroner engages in the private practice of medicine in addition to serving as coroner. Currently, 16 counties have populations of 175,001 or more and are therefore eligible for their coroner to be paid at a higher salary by not engaging in the private practice of medicine. Two of these counties, Cuyahoga and Summit, are chartered and appoint a chief medical examiner rather than elect a coroner. As of May 2024, none of the 14 other eligible county coroners perform work for another county coroner and therefore, they receive a higher salary by not engaging in the private practice of medicine. It would be unlikely that a county coroner would opt to be paid at the lower rate, more than a \$50,000 pay cut, to perform work outside their official capacity. The Regional Autopsy Center at the Ohio State University Wexner Medical Center charges \$3,110 as a base autopsy rate for a complete examination.

Provisions with no apparent fiscal effect

The bill contains other changes that do not appear to have any fiscal effect. The first of these is a provision concerning coroner qualifications. Specifically, it clarifies that only physicians licensed by the State Medical Board to practice medicine and surgery, or osteopathic medicine and surgery, may serve as coroners. Finally, the bill contains a provision that may delay journalist access to preliminary autopsy results by allowing rather than requiring a coroner to grant access to these results after a request is made as under current law.