



OHIO LEGISLATIVE SERVICE COMMISSION

Bill Analysis

Yosef Schiff

H.B. 536

132nd General Assembly
(As Introduced)

Reps. Reece, Kelly, K. Smith, West, Howse, Kent

BILL SUMMARY

- Prohibits health plan issuers from implementing any practice making coverage for emergency services dependent upon a determination of whether or not an injury, symptom, or complaint was truly an emergency (selective emergency services coverage).
 - Considers failure to comply as an unfair or deceptive act or practice in the business of insurance.
 - Requires each contract the Department of Medicaid enters into with a managed care organization for the provision of health care services to Medicaid recipients to prohibit the managed care organization from implementing selective emergency services coverage.
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CONTENT AND OPERATION

Selective emergency services

The bill prohibits a health plan issuer from implementing any practice making coverage for emergency services dependent upon a determination of whether or not an injury, symptom, or complaint was truly an emergency (selective emergency services coverage) in regards to any health benefit plan. It considers failure to comply an unfair or deceptive practice in the business of insurance.¹

The bill imposes the same requirements on Medicaid managed care organizations. It does so by requiring each contract the Department of Medicaid enters

¹ R.C. 3901.21(CC) and 3901.80.

into with a managed care organization under which the managed care organization provides health care services to Medicaid recipients as part of the care management system to contain language requiring the managed care organization to comply with the prohibition.²

The bill applies to health benefit plans issued, or contracts entered into, modified, or renewed, on and after the bill's effective date. It applies to contracts the Department of Medicaid enters into with Medicaid managed care organizations on or after the bill's effective date.³

Definitions

"Emergency medical condition" means a medical condition that manifests itself by such acute symptoms of sufficient severity that a prudent layperson with an average knowledge of health and medicine could reasonably expect the absence of immediate medical attention to result in any of the following:

- Placing the health of the individual or, with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy;
- Serious impairment to bodily functions;
- Serious dysfunction of any bodily organ or part.⁴

"Emergency services" means the following:

- A medical screening examination, as required by federal law, that is within the capability of the emergency department of a hospital, including ancillary services routinely available to the emergency department, to evaluate an emergency medical condition;
- Such further medical examination and treatment that are required by federal law to stabilize an emergency medical condition and are within the capabilities of the staff and facilities available at the hospital, including any trauma and burn center of the hospital.⁵

² R.C. 5167.15.

³ Section 3 of the bill.

⁴ R.C. 1753.28(A)(1), not in the bill.

⁵ R.C. 3901.80(A)(1); R.C. 1753.28(A)(2), not in the bill.



"**Health benefit plan**" means a policy, contract, certificate, or agreement offered by a health plan issuer to provide, deliver, arrange for, pay for, or reimburse any of the costs of health care services.⁶

"**Health plan issuer**" means an entity subject to Ohio insurance laws and rules, or subject to the jurisdiction of the Superintendent of Insurance, that contracts, or offers to contract, to provide, deliver, arrange for, pay for, or reimburse any of the costs of health care services under a health benefit plan, including a sickness and accident insurance company, a health insuring corporation, a fraternal benefit society, a self-funded multiple employer welfare arrangement, or a nonfederal, government health plan.⁷

HISTORY

ACTION	DATE
Introduced	03-01-18

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⁶ R.C. 3901.80(A)(2); R.C. 3922.01, not in the bill.

⁷ R.C. 3901.80(A)(2); R.C. 3922.01, not in the bill.

