



# OHIO LEGISLATIVE SERVICE COMMISSION

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## Bill Analysis

Elizabeth Molnar

### **H.B. 617**

132nd General Assembly  
(As Introduced)

Rep. West

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### **BILL SUMMARY**

- Establishes the Ohio Telehealth Commission to examine the practice of telehealth.
  - Requires the Commission to make recommendations relating to telehealth and to prepare an annual report outlining those recommendations and describing the status of Ohio's telehealth system.
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### **CONTENT AND OPERATION**

#### **Ohio Telehealth Commission**

H.B. 617 creates the Ohio Telehealth Commission to examine telehealth, review and make recommendations on topics concerning telehealth, and prepare an annual report describing the status of Ohio's telehealth system.<sup>1</sup>

#### **Membership and appointments**

Under the bill, the Governor must appoint each of the following to the Commission:

- One representative of a health care facility;
- One health care practitioner;
- One health care workforce educator;

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<sup>1</sup> R.C. 3701.751.

- One individual with knowledge or expertise in telehealth or health information technology;
- One representative of the telecommunications industry;
- One representative of the business community;
- One representative of a health insurer;
- One representative of a labor union whose members work primarily in the health care field;
- One member of the Commission on Minority Health;
- Two members of the General Assembly, one from the majority party and one from the minority party.

Appointments must be made not later than 30 days after the bill's effective date. In addition to the members appointed by the Governor, the Directors of Aging, Developmental Disabilities, Education, Health, Job and Family Services, Rehabilitation and Correction, and Medicaid, the Executive Director of the Office of Health Transformation, and the Chairperson of the Public Utilities Commission, or their designees, are required to serve on the Commission.

Vacancies are to be filled in the same manner as original appointments. Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed holds office for the remainder of that term.

### **Terms of membership**

Members appointed by the Governor serve three year terms, with initial appointments being staggered. A member may be reappointed. A member continues in office after the expiration of the member's term until the member's successor takes office or for 90 days, whichever occurs first. The remaining members – those not appointed by the Governor – hold office until the date they are no longer serving in their respective positions.

### **Compensation**

Members serve without compensation, but must be reimbursed for actual and necessary expenses incurred in the performance of their official duties.

## **Chairperson, meetings, and subcommittees**

The Governor must select from the members a chairperson and vice-chairperson. The Commission meets at least twice a year at the call of the chairperson or vice-chairperson. A majority of Commission members constitutes a quorum. The Ohio Department of Health must provide meeting space, staff, and other administrative support to the Commission in order for it to fulfill its duties. The Commission may establish subcommittees as it considers necessary to carry out its duties or address specific telehealth concerns.

## **Commission duties**

The Commission is charged with examining telehealth, in particular the use of electronic information, imaging, and communication technologies to provide, support, and improve health care access, delivery, diagnosis, consultation, treatment, and the transfer of medical data.

## **Recommendations**

Under the bill, the Commission must review and make recommendations on the following seven telehealth-related topics:

- The ways in which telehealth and health information technologies may be used to increase access to and reduce costs associated with health care, attract and retain health providers in rural or underserved areas, and implement comprehensive health plans at the state level;
- Any barriers to the use or expansion of telehealth, including those related to payment, infrastructure, training, and workforce availability;
- The telecommunications services, assets, and infrastructure present in Ohio and the potential financial impact of developing or failing to develop such capabilities for purposes of telehealth services;
- The coordination of public and private sector initiatives to enhance networking, portal development, and connectivity in an effort to expand telehealth and telecommunications capacity;
- The ways in which the collaborative efforts of public and private partnerships may serve to increase and improve the use of telehealth in Ohio;

- Any telehealth standards or guidelines that may improve the quality of patient care and health outcomes as well as protect patient privacy and confidentiality;
- Any initiatives, projects, or grant applications involving telehealth in Ohio.

### **Annual report**

H.B. 617 requires the Commission to prepare a report each year describing the status of Ohio's telehealth system and the adequacy and allocation of telehealth services throughout the state. The report also must include the required recommendations and may include any other recommendations the Commission considers necessary. The Commission must submit its report to the Governor and General Assembly not later than December 31.<sup>2</sup>

### **Sunset review**

The bill specifies that the Commission is not subject to the law governing the sunset review of agencies.<sup>3</sup>

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## **HISTORY**

<b>ACTION</b>	<b>DATE</b>
Introduced	04-24-18

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<sup>2</sup> R.C. 101.68, not in the bill.

<sup>3</sup> R.C. 101.82 to 101.87, not in the bill.

