



## Ohio Osteopathic Association

### *Board of Trustees Advocacy Report*

April 2025

#### **HB 96 – State Operating Budget for FY26/27**

- Status and Next Steps: Governor DeWine introduced his final two-year operating budget proposal in February and the Ohio House of Representatives passed their version of HB 96 on a largely party-line vote earlier this week. The Ohio Senate is expected to make changes in May with a target floor vote of June 12<sup>th</sup>. From there, both chambers will appoint a Conference Committee to resolve differences and send a final version of the budget back to DeWine by June 30<sup>th</sup>. Healthcare policy, especially Medicaid funding and eligibility, are key issues in HB 96 and remain our top focus.
- OOA Priorities for Senate Consideration: We have some real opportunities to advance the practice of Osteopathic Medicine in Ohio by increasing our representation on the State Medical Board and securing more funding for DO educational programs. While there remains a lot of uncertainty over the future of Medicaid, we can continue to advocate for stable state funding while Congress and the Trump Administration decide on future funding levels and programmatic changes.
  - OSMB Board Seat: Under current law, the State Medical Board is comprised of 12 members with only one member required to be an Osteopathic Physician. By contrast, there are 7 MD's, a Podiatrist, and 3 'consumer' members who are often attorneys. According to SMBO data, the number of licensed DO's has been growing in recent years and adding a seat would reflect this trend. After MD's, DO's represent the second largest group of physician licensees and with more than 8,500 current licenses (plus another 2,500 training certificates), Osteopathic Medicine makes up 10% of total licenses issued by the Medical Board. Only licensed massage therapists (LMT's) have more licenses, however there is no interest in putting non-physicians on the board (except for consumer members).
  - Funding for DO Medical Education: The lobbying team for OU-HCOM has expressed an interest in working with State Senators Steve Huffman, MD and Terry Johnson, DO to revise the current state funding formula for medical schools and residencies. According to Vorys Advisors, the funding formula unintentionally provides a reduced *per capita* amount to DO schools. We hope to have more information in the next couple of weeks and believe this is an excellent opportunity to secure additional support for OU-HCOM and Xavier University as well as expanded residency opportunities.
  - Support for Ohio Medicaid: Both the DeWine Administration budget proposal and the House-passed version of HB 96 include 'trigger' language that would curtail or eliminate Medicaid Expansion should the federal government reduce its cost share. Additionally, funding is included to maintain the rate increases we secured two years ago. In general, Medicaid funding for hospitals and providers is stable in HB 96 and we should continue to advocate for stable and reliable Medicaid funding. The biggest threats to Medicaid are reduced state tax revenues resulting from economic turmoil or cuts from Congress.
- Other Notable Healthcare Items: DeWine proposed two notable policy changes that were removed by the Ohio House of Representatives. The first was a significant increase in state tobacco taxes and the second was making booster seat and seat belt violations a primary offense. These are longtime priorities for anti-tobacco and injury prevention advocates, respectively. We are still reviewing House changes; however, it appears the House budget includes some new or expanded investments in treatment and services for individuals with rare diseases. One final area of concern is the removal of lead abatement funding and program under ODH.

## Tracked Legislation and OOA Priorities

- Healthcare Non-Compete Clauses: Several years ago, OOA helped State Senator Dr. Terry Johnson craft a bill to limit the use of non-compete clauses in healthcare contracts. Dr. Johnson was concerned that these clauses were limiting the ability of rural hospitals and other facilities to recruit physicians from larger, urban health systems. OOA supported SB 126 in the previous General Assembly, though it did not move. Dr. Johnson is likely to reintroduce the measure, especially given some of the recent developments in federal litigation surrounding non-compete clauses. In a related development, State Senators Bill Blessing (R-Cincinnati) and Bill DeMora (D-Columbus) introduced Senate Bill 11 earlier this year; the bill would broadly limit the use of ‘post-employment agreements’ in all industries, including healthcare.
- Senate Bill 1 (Higher Education Reform): The Ohio General Assembly passed, and Governor DeWine signed Senate Bill 1 last month. Sponsored by State Senator Jerry Cirino (R-Kirtland), the bill makes several reforms to Ohio’s public universities aimed at limiting DEI initiatives, changing Board of Trustees structure, limiting collective bargaining for faculty, and addressing the teaching of controversial subjects. The bill will take effect this summer, though some groups have threatened to challenge the law in court. The bill does include an exemption for national accreditation and grant programs that require a DEI component; this is meant to protect medical research and clinical education programs.
- Health Insurance and Prescribing Legislation: Several health insurance related bills were recently introduced, including Rep. Kevin Miller’s PA gold card bill (HB 214) and an updated non-medical switching bill from State Senators Beth Liston, MD and Terry Johnson, DO (SB 160). While we are still analyzing these bills, it is likely that OOA will want to support most of them. Hearings could begin in May, though we do not anticipate any votes until the fall at the earliest. We will face strong opposition from the business community and health plans. Lawmakers are also exploring additional measures to crack down on PBM’s that would benefit patients and pharmacies. We will provide a detailed summary of these bills for review.
- Other Notable Tracked Bills: Full tracking sheet submitted with report.

Senate Bill 7	State Senator Terry Johnson, DO	Requires K-12 schools to provide education to students on substance abuse; passed Seante unanimously this week
Senate Bill 25	State Senator Terry Johnson, DO	Prohibits minors from using indoor tanning beds without parental consent; pending in Senate Health Committee
Senate Bill 86	State Senator Steve Huffman, MD	Restricts the sale of intoxicating hemp products; pending in Senate General Government Committee
House Bill 52	State Representative Kellie Deeter	Modifies scope of practice and supervision for CRNA’s; pending in House Health Committee, sub bill under negotiation
House Bill 57	State Representatives Dontavius Jarrells and Josh Williams	Requires schools to stock overdose reversal drugs and adopt policies; pending in House Education Committee
House Bill 162	State Representative Gary Click	Modifies parental access to children’s EMR, creates new disclosure requirements; pending in House Health Committee
House Bill 182	State Representative Levi Dean	Prohibits municipal water systems from including fluoride; pending in House Natural Resources Committee