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Representatives White, Humphrey

Cosponsors: Representatives Liston, McNally, Abdullahi, Abrams, Baker, Brennan, Brent, Brewer, Brown, Callender, Dell'Aquila, Denson, Dobos, Edwards, Forhan, Grim, Isaacsohn, Jarrells, Jones, Manning, Mathews, Miller, A., Miller, J., Miller, M., Mohamed, Oelslager, Patton, Piccolantonio, Robinson, Russo, Seitz, Sims, Skindell, Thomas, C., Troy, Upchurch, Weinstein, Whitted, Williams, Young, T., Speaker Stephens

Senators Antonio, Blessing, Brenner, Cirino, Craig, Cutrona, DeMora, Dolan, Gavarone, Ingram, Johnson, Kunze, Reineke, Smith, Sykes, Wilkin, Wilson

A BILL

To amend sections 5101.342, 5180.21, and 5180.22 1
and to enact sections 5104.291 and 5180.40 of 2
the Revised Code regarding services for infants, 3
children, and parents. 4

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 5101.342, 5180.21, and 5180.22 be 5
amended and sections 5104.291 and 5180.40 of the Revised Code be 6
enacted to read as follows: 7

Sec. 5101.342. The Ohio commission on fatherhood shall do 8
both of the following: 9

(A) Organize a state summit on fatherhood every four 10
years; 11

(B) Prepare a report each year that does the following: 12

(1) Identifies resources available to fund fatherhood- 13
related programs and explores the creation of initiatives to do 14
the following: 15

(a) Build the parenting skills of fathers; 16

(b) Provide employment-related services for low-income, 17
noncustodial fathers; 18

(c) Prevent premature fatherhood; 19

(d) Provide services to fathers who are inmates in or have 20
just been released from imprisonment in a state correctional 21
institution, as defined in section 2967.01 of the Revised Code, 22
or in any other detention facility, as defined in section 23
2921.01 of the Revised Code, so that they are able to maintain 24
or reestablish their relationships with their families; 25

(e) Reconcile fathers with their families; 26

(f) Increase public awareness of the critical role fathers 27
play. 28

(2) Describes the commission's expectations for the 29
outcomes of fatherhood-related programs and initiatives and the 30
methods the commission uses for conducting annual measures of 31
those outcomes; 32

(3) Evaluates the number of fathers and children served 33
and the number and types of additional services provided as a 34
result of the recommendations made to the director of job and 35
family services pursuant to section 5101.805 of the Revised 36
Code. 37

The commission shall submit each report to the general 38
assembly in accordance with section 101.68 of the Revised Code. 39

(C) Pursuant to section 5101.805 of the Revised Code, the
commission may make recommendations to the director of job and
family services regarding funding, approval, and implementation
of fatherhood programs in this state that meet at least one of
the four purposes of the temporary assistance for needy families
block grant, as specified in 42 U.S.C. 601.

(D) The portion of the report prepared pursuant to
division (B) (2) of this section shall be prepared by the
commission in collaboration with the director of children and
youth.

(E) The commission shall submit each report prepared
pursuant to division (B) of this section to the president and
minority leader of the senate, speaker and minority leader of
the house of representatives, governor, and chief justice of the
supreme court. The first report is due not later than one year
after the last of the initial appointments to the commission is
made under section 5101.341 of the Revised Code.

Sec. 5104.291. (A) This section establishes standards and
conditions for rating the following early learning and
development programs in the step up to quality program:

(1) A licensed child care center operating a head start or
early head start program;

(2) A licensed child care center accredited by the
national association for the education of young children, or its
successor organization;

(3) A licensed type A or type B family child care home
under contract to provide head start or early head start
services;

(4) A licensed type A or type B family child care home

accredited by the national association for the education of 69
young children, or its successor organization. 70

(B)(1) On a periodic basis, the department of children and 71
youth shall do both of the following: 72

(a) Review head start program performance standards 73
described in 45 C.F.R. Part 1302 and determine which step up to 74
quality program ratings tier corresponds with minimum head start 75
program performance standards; 76

(b) Review accreditation standards for the national 77
association for the education of young children, or its 78
successor organization, and determine which step up to quality 79
program ratings tier corresponds with minimum accreditation 80
standards. 81

(2) Beginning July 1, 2025, the department shall rate each 82
program described in divisions (A)(1) to (4) of this section in 83
the step up to quality program ratings tier that the department 84
has determined corresponds with the minimum standards. 85

(C) The department shall prescribe the manner in which a 86
program shall demonstrate to the department that the program is 87
meeting the requirements of this section. 88

Sec. 5180.21. (A) The department of children and youth 89
shall establish the help me grow program as the state's 90
evidence-based parent support program that encourages early 91
prenatal and well-baby care, as well as provides parenting 92
education to promote the comprehensive health and development of 93
children. The program shall provide home visiting services to 94
families with a pregnant woman or child under five years of age 95
that meet the eligibility requirements established in rules 96
adopted under this section. Home visiting services shall be 97

provided through evidence-based home visiting models or 98
innovative, promising home visiting models recommended by the 99
Ohio home visiting consortium created under section 5180.23 of 100
the Revised Code. 101

(B) Families shall be referred to the appropriate home 102
visiting services through the central intake and referral system 103
created under section 5180.22 of the Revised Code. 104

(C) To the extent possible, the goals of the help me grow 105
program shall be consistent with the goals of the federal home 106
visiting program, as specified by the maternal and child health 107
bureau of the health resources and services administration in 108
the United States department of health and human services or its 109
successor. 110

(D) The director of children and youth ~~may~~ shall enter 111
into an interagency agreement with one or more state agencies, 112
including the department of developmental disabilities, 113
department of job and family services, department of medicaid, 114
commission on minority health, Ohio fatherhood commission, and 115
children's trust fund board, to implement the help me grow 116
program ~~and,~~ to ensure coordination of early childhood 117
programs, and to maximize reimbursement for the help me grow 118
program from any federal source. 119

In addition to creating the central intake and referral 120
system as described in section 5180.22 of the Revised Code, the 121
department of children and youth shall ensure there is a 122
consistent comprehensive screening and connection program to 123
support the coordination of home visiting services across the 124
state, including through the department of health, department of 125
developmental disabilities, department of job and family 126
services, department of medicaid, and commission on minority 127

health. Following the program's establishment, the department of 128
children and youth shall evaluate the program's effectiveness in 129
coordinating home visiting services at least once annually. 130

(E) The director may distribute help me grow program funds 131
through contracts, grants, or subsidies to entities providing 132
services under the program. 133

(F) As a condition of receiving payments for home visiting 134
services, providers shall report to the director data on the 135
program performance indicators, specified in rules adopted under 136
division (G) of this section, that are used to assess progress 137
toward achieving all of the following: 138

(1) The benchmark domains established for the federal home 139
visiting program, including improvement in maternal and newborn 140
health; reduction in child injuries, abuse, and neglect; 141
improved school readiness and achievement; reduction in crime 142
and domestic violence; and improved family economic self- 143
sufficiency; 144

(2) Improvement in birth outcomes and reduction in 145
stillbirths, as that term is defined in section 5180.12 of the 146
Revised Code; 147

(3) Reduction in tobacco use by pregnant women, new 148
parents, and others living in households with children. 149

The providers shall report the data in the format and 150
within the time frames specified in the rules. 151

The director shall prepare an annual report on the data 152
received from the providers. Each report shall include an 153
evaluation addressing the number of families and children 154
served, the number and type of services provided, health and 155
developmental outcomes for participating families and children, 156

and variation in outcomes between the types of home visiting 157
programs specified in division (B) (3) of section 5180.22 of the 158
Revised Code. The director shall submit the report to the 159
general assembly in accordance with section 101.68 of the 160
Revised Code and make the report available on the internet web 161
site maintained by the department of children and youth. 162

(G) Pursuant to Chapter 119. of the Revised Code, the 163
director shall adopt rules that are necessary and proper to 164
implement this section. The rules shall specify all of the 165
following: 166

(1) Subject to division (H) of this section, eligibility 167
requirements for home visiting services; 168

(2) Eligibility requirements for providers of home 169
visiting services; 170

(3) Standards and procedures for the provision of program 171
services, including data collection, program monitoring, and 172
program evaluation; 173

(4) Procedures for appealing the denial of an application 174
for program services or the termination of services; 175

(5) Procedures for appealing the denial of an application 176
to become a provider of program services or the termination of 177
the department's approval of a provider; 178

(6) Procedures for addressing complaints; 179

(7) The program performance indicators on which data must 180
be reported by providers of home visiting services under 181
division (F) of this section, which, to the extent possible, 182
shall be consistent with federal reporting requirements for 183
federally funded home visiting services; 184

(8) The format in which reports must be submitted under 185
division (F) of this section and the time frames within which 186
the reports must be submitted; 187

(9) Criteria for payment of approved providers of program 188
services; 189

(10) Any other rules necessary to implement the program. 190

(H) When adopting rules required by division (G) (1) of 191
this section, the ~~department~~ director shall specify that 192
families residing in the urban and rural communities specified 193
in rules adopted under section 3701.142 of the Revised Code and 194
families in the child welfare system are to receive priority 195
over other families for home visiting services. 196

(I) The department, in collaboration with the departments 197
of job and family services and medicaid, shall propose 198
strategies to increase the workforce capacity of home visiting 199
service providers and parenting support professionals, including 200
efforts to incentivize and retain such providers and 201
professionals in this state. 202

Sec. 5180.22. (A) The department of children and youth 203
shall create a central intake and referral system for all home 204
visiting programs operating in this state. Through a competitive 205
bidding process, the department of children and youth may select 206
one or more persons or government entities to operate the 207
system. In its oversight of the one or more system operators, 208
the department shall streamline the system to ensure families 209
and children receive services from home visiting programs as 210
described in division (B) (3) of this section. 211

(B) If the department of children and youth chooses to 212
select one or more system operators as described in division (A) 213

of this section, a contract with any system operator shall 214
require that the system do ~~both~~all of the following: 215

(1) Serve as a single point of entry for access, 216
assessment, and referral of families and children to appropriate 217
home visiting services based on each family's location of 218
residence; 219

(2) Use a standardized form or other mechanism to assess 220
~~for each family member's risk factors and social determinants of~~ 221
~~health, as well as ensure~~; 222

(3) Ensure that the family is families and children are 223
~~referred to the appropriate and receive services from home~~ 224
~~visiting program, which may include a program that uses programs~~ 225
that are appropriate to their level of needs, including the 226
following: 227

(a) Programs using home visiting contractors ~~who that~~ 228
provide services within a pathways community HUB ~~that fully or~~ 229
~~substantially complies with the pathways community HUB~~ 230
~~certification standards developed~~ certified by the pathways 231
community HUB institute; 232

(b) Programs that provide services using the early head 233
start home-based option. 234

(C) The standardized form or other mechanism described in 235
division (B) (2) of this section shall be agreed to by the home 236
visiting consortium created under section 5180.23 of the Revised 237
Code. 238

(D) A contract entered into under division (B) of this 239
section shall require a system operator to issue an annual 240
report to the department of children and youth that includes 241
data regarding referrals made by the central intake and referral 242

system, costs associated with the referrals, and the quality of 243
services received by families and children who were referred to 244
services through the system. The report shall be distributed to 245
the home visiting consortium created under section 5180.23 of 246
the Revised Code. 247

(E) Nothing in this section is intended to do any of the 248
following: 249

(1) Prohibit the department of children and youth from 250
using alternative promotional materials or names for the central 251
intake and referral system; 252

(2) Require the use of help me grow program promotional 253
materials or names; 254

(3) Prohibit providers, central coordinators, the 255
department of children and youth, or stakeholders from using the 256
help me grow name for promotional materials for home visiting. 257

Sec. 5180.40. To increase participation in evidence-based 258
parenting education programs, the department of children and 259
youth shall ensure state departments, agencies, and boards have 260
information to communicate with parents, caregivers, and child 261
care providers about such programs to promote their benefits, 262
including their parenting, caregiving, and educational 263
resources. 264

Section 2. That existing sections 5101.342, 5180.21, and 265
5180.22 of the Revised Code are hereby repealed. 266

Section 3. (A) As used in this section, "WIC" means the 267
Special Supplemental Nutrition Program for Women, Infants, and 268
Children established under the "Child Nutrition Act of 1966," 42 269
U.S.C. 1786. 270

(B) The Department of Health shall investigate and 271
determine the services and tools available at the federal level 272
and the services and tools implemented in other states that 273
could be implemented in Ohio to increase access to and use of 274
WIC. 275

(C) Within sixty days of the effective date of this 276
section, the Department of Health shall submit a report to the 277
General Assembly in accordance with section 101.68 of the 278
Revised Code summarizing the results of the investigation 279
described in division (B) of this section and establishing a 280
plan to increase access to and use of WIC. 281

(D) Beginning three months after the effective date of 282
this section and continuing until two years after the effective 283
date of this section, the Department of Health shall submit 284
quarterly reports to the General Assembly in accordance with 285
section 101.68 of the Revised Code detailing progress on 286
implementing the plan described in division (C), including: 287

(1) Expenditures; 288

(2) Changes made to the WIC program; 289

(3) The total number of women and children served; 290

(4) Any other relevant outcomes; 291

(5) Opportunities to further increase the number of women 292
and children served. 293

Section 4. The Department of Medicaid shall study how 294
evidence-based peer-to-peer programming that supports infant 295
vitality can be reimbursed through the Medicaid program. The 296
Department shall submit a report summarizing the results of the 297
study to the General Assembly in accordance with section 101.68 298

of the Revised Code one year after the effective date of this 299
section. 300

Section 5. (A) Not later than June 30, 2026, the Medicaid 301
Director shall evaluate, clarify, and update the Medicaid 302
program's coverage of evidence-based and evidence-informed 303
mental health and dyadic family therapy services for children 304
and their caregivers, which are intended to improve outcomes for 305
children from birth through five years of age. 306

The Director shall develop policy and billing guidance for 307
Medicaid providers to do both of the following: 308

(1) Improve the use of mental health and dyadic family 309
therapy services for children from birth through age five and 310
their families and other caregivers; 311

(2) Encourage use of the Diagnostic Classification of 312
Mental Health and Developmental Disorders of Infancy and Early 313
Childhood published by ZERO TO THREE and known as the "DC:0-5" 314
for assessing and diagnosing infants, toddlers, and young 315
children, and permit use of ICD-10 diagnosis codes, published by 316
the United States Department of Health and Human Services, for 317
Medicaid billing. 318

(B) Not later than June 30, 2027, the Medicaid Director 319
shall submit a report to the Governor and, in accordance with 320
section 101.68 of the Revised Code, the General Assembly that 321
includes both of the following: 322

(1) Information about how the Department of Medicaid has 323
engaged stakeholders to develop the necessary guidance, manuals, 324
training, and billing code use procedures associated with the 325
Medicaid coverage described under division (A) of this section; 326

(2) An evaluation of the Medicaid coverage described in 327

division (A) of this section, including:	328
(a) The number of families and children served;	329
(b) The number and types of services provided;	330
(c) Outcome metrics for families and children served.	331