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H.B. 388
136th General Assembly

Bill Analysis

Version: As Introduced

Primary Sponsors: Reps. Williams and Jarrells

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SUMMARY

- Requires that the health care benefits offered to each state employee and elected state official include reimbursements to cover out-of-pocket costs the employee or official pays to purchase a supply of glucagon-like peptide-1 receptor agonists.

DETAILED ANALYSIS

State health plan and GLP-1 drugs

The bill, beginning on its effective date, requires that the health care benefits the Department of Administrative Services (DAS) must offer to each state employee (an employee paid directly by Office of Budget and Management warrant) and elected state official include reimbursements to cover out-of-pocket costs the employee or official pays to purchase a supply of glucagon-like peptide-1 receptor agonists (GLP-1 drug). To be eligible for a reimbursement, the GLP-1 drug must be:

- Approved by the federal Food and Drug Administration for chronic weight management;
- Purchased from a manufacturer's direct-to-consumer program or through a pharmacy or other entity participating in a manufacturer's direct-to-consumer program; and
- Not a compounded version of a GLP-1 drug.

Under the bill, the period during which an employee or official may receive a reimbursement is limited to 24 consecutive months. The 24-month period begins in the month in which the employee or official first applies for a reimbursement.

The bill requires the DAS Director to adopt rules to implement the bill.¹

¹ R.C. 124.826(B), (C), and (G).

Reimbursement application

For each month in which an employee or official pays out-of-pocket to purchase a supply of a GLP-1 drug, the employee or official may apply to the DAS Director for a reimbursement. The employee or official must include the following in the reimbursement application:

- Proof that, at the time treatment is initiated, the employee's or official's body mass index is at least 30, as determined by a physician; and
- The amount that the employee or official paid out-of-pocket to purchase a supply of a GLP-1 drug.²

Reimbursement amount

An employee or official whom the DAS Director determines is eligible for a reimbursement will be reimbursed in either of the following amounts:

- For any month of the first year during the 24-month period, not more than \$500;
- For any month of the second year during the 24-month period, an amount equal to $\frac{1}{2}$ of the cost the employee or official paid out of pocket to purchase a supply of a GLP-1 drug, not to exceed \$250.

No reimbursement can exceed either of these amounts. If the DAS Director determines that an employee or official is not eligible for a reimbursement in any month, the employee or official will not receive a reimbursement for that month. That employee or official may apply for a reimbursement in any subsequent month during the 24-month period.³

Subsequent reimbursement periods

Not earlier than six months after the previous 24-month period during which an employee or official applies for reimbursements under the bill elapses, the employee or official may apply to seek reimbursements for a subsequent 24-month period. The employee or official must include in the application proof that, at the time of application, the employee's or official's weight has increased by at least 20% of the total weight the employee or official lost during the previous 24-month period, measured as of the last day of that period. If the DAS Director determines the employee's or official's weight has increased by that amount, the DAS Director must approve the application. An employee or official whose application is approved may apply for reimbursements under the bill for a subsequent 24-month period. If the DAS Director determines the employee's or official's weight has not increased by that amount, the DAS Director cannot approve the application.⁴

² R.C. 124.826(D).

³ R.C. 124.826(C) and (E).

⁴ R.C. 124.826(F).

Background

State health plan

The current state health plan, effective July 1, 2025, does not cover GLP-1 drugs for weight loss. However, as of May 2026, limited partial reimbursements for GLP-1 drugs were available to individuals who participate in a weight loss program under certain circumstances.⁵ As noted above, the bill requires coverage of GLP-1 drugs beginning on its effective date. The health plan covering state employees and officials for the upcoming plan year (July 1, 2026, to June 30, 2027) specifies which drugs will be covered.⁶ Health benefit plans are a form of contract in that the plan issuer agrees to provide coverage of specified health services and prescription drugs in exchange for premiums paid by the covered individual to the plan issuer. If the bill takes effect during the upcoming plan year and is challenged, a court may examine whether the bill is inconsistent with the contracts clauses of the U.S. and Ohio Constitutions. The contracts clauses prohibit laws that impair existing contracts. When examining a contracts clause challenge, a court typically examines whether a law substantially impairs a contract and, if so, whether the state can justify the law as having a significant and legitimate public purpose and reasonably tailored the law to accomplish that purpose.⁷

HISTORY

Action	Date
Introduced	07-01-25

ANHB0388IN-136/sb

⁵ See the Department of Administrative Services (DAS) [Weight Loss Resources](#) and [Personal Health Plus](#).

⁶ See DAS [Prescription Drug](#).

⁷ U.S. Constitution, Article I, Section 10 and Ohio Constitution, Article II, Section 28; *Energy Reserves Grp., Inc. v. Kansas Power & Light Co.*, 459 U.S. 400, 411-413 (1983) and *Middletown v. Ferguson*, 25 Ohio St.3d 71, 79 (1986).