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OHIO LEGISLATIVE SERVICE COMMISSION

Office of Research
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Office

H.B. 390
136th General Assembly

Bill Analysis

Version: As Introduced

Primary Sponsor: Rep. Schmidt

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SUMMARY

- Beginning January 1, 2027, prohibits a health plan issuer from requiring or otherwise inducing a health care provider to collect cost sharing amounts for health care services.
- Beginning January 1, 2027, requires a health plan issuer to make all reimbursement for health care services directly to a health care provider.
- Prohibits a health benefit plan or benefits contract entered into, amended, or renewed on or after January 1, 2027, from requiring (1) health care providers to collect cost sharing amounts from covered persons and (2) covered persons to pay cost sharing amounts to a health care provider.

DETAILED ANALYSIS

Required cost sharing collection

The bill prohibits a health plan issuer, beginning January 1, 2027, from requiring or otherwise inducing a health care provider to collect cost sharing amounts for health care services from an individual covered by a health benefit plan. The prohibition includes copayments and deductibles.¹ For purposes of the bill, a provider includes “a hospital, nursing home, physician, podiatrist, dentist, pharmacist, chiropractor, or other health care provider entitled to reimbursement by a health plan issuer.”² The bill further specifies that beginning January 1, 2027, a health plan issuer must make all reimbursement for covered services directly to a health care provider.³

¹ R.C. 3902.55(B).

² R.C. 3902.55(A)(3).

³ R.C. 3902.55(C).

For purposes of the provisions described above, the bill specifies that the provisions do not apply if they conflict with benefits contracts or health benefit plans entered into before January 1, 2027, unless the contract or plan is amended or renewed on or after that date.⁴

Under the bill, each health benefit plan or benefits contract entered into, amended, or renewed on or after January 1, 2027, may not require (1) health care providers to collect cost sharing amounts from covered persons, or (2) covered persons to pay cost sharing amounts to a health care provider.⁵

The bill specifies that it must not be construed to prohibit a health care provider from collecting amounts owed for uncovered services or from accepting cash payments from a covered person in lieu of accepting reimbursement under a health benefit plan.⁶

HISTORY

Action	Date
Introduced	07-01-25

ANHB0390IN-136/ar

⁴ R.C. 3902.55(D).

⁵ R.C. 3902.55(E).

⁶ R.C. 3902.55(F).