### As Passed by the House

# 136th General Assembly

Regular Session 2025-2026

Am. H. B. No. 81

### **Representative Stewart**

Cosponsors: Representatives Miller, J., Roemer, Abrams, Barhorst, Brennan, Brownlee, Denson, Ghanbari, Glassburn, Grim, Gross, Isaacsohn, Jarrells, Jones, Lampton, Mullins, Peterson, Robb Blasdel, Russo, Sigrist, Sims, Somani, Swearingen, Troy, White, E., Williams, Willis

## A BILL

То	amend sections 4121.12, 4121.121, 4121.13,	1
	4121.41, 4121.45, 4123.44, 4123.52, 4123.54,	2
	4123.57, 4123.66, 4125.07, 4133.10, 4167.01,	3
	4167.10, and 5145.163 and to repeal sections	4
	4167.25, 4167.27, and 4167.28 of the Revised	5
	Code to make appropriations for the Bureau of	6
	Workers' Compensation for the biennium beginning	7
	July 1, 2025, and ending June 30, 2027, to	8
	provide authorization and conditions for the	9
	operation of the Bureau's programs, and to make	10
	changes to the Workers' Compensation Law.	11

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

Section 1. That sections 4121.12, 4121.121, 4121.13,	12
4121.41, 4121.45, 4123.44, 4123.52, 4123.54, 4123.57, 4123.66,	13
4125.07, 4133.10, 4167.01, 4167.10, and 5145.163 of the Revised	14
Code be amended to read as follows:	15
Sec. 4121.12. (A) There is hereby created the bureau of	16

workers' compensation board of directors consisting of eleven	17
members to be appointed by the governor with the advice and	18
consent of the senate. One member shall be an individual who, on	19
account of the individual's previous vocation, employment, or	20
affiliations, can be classed as a representative of employees;	21
two members shall be individuals who, on account of their	22
previous vocation, employment, or affiliations, can be classed	23
as representatives of employee organizations and at least one of	24
these two individuals shall be a member of the executive	25
committee of the largest statewide labor federation; three	26
members shall be individuals who, on account of their previous	27
vocation, employment, or affiliations, can be classed as	28
representatives of employers, one of whom represents self-	29
insuring employers, one of whom is a state fund employer who	30
employs one hundred or more employees, and one of whom is a	31
state fund employer who employs less than one hundred employees;	32
two members shall be individuals who, on account of their	33
vocation, employment, or affiliations, can be classed as	34
investment and securities experts who have direct experience in	35
the management, analysis, supervision, or investment of assets	36
and are residents of this state; one member who shall be a	37
certified public accountant; one member who shall be an actuary	38
who is a member in good standing with the American academy of	39
actuaries or who is an associate or fellow with the casualty	40
actuarial society; and one member shall represent the public and	41
also be an individual who, on account of the individual's	42
previous vocation, employment, or affiliations, cannot be	43
classed as either predominantly representative of employees or	44
of employers. The governor shall select the chairperson of the	45
board who shall serve as chairperson at the pleasure of the	46
governor.	47

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None of the members of the board, within one year immediately preceding the member's appointment, shall have been employed by the bureau of workers' compensation or by any person, partnership, or corporation that has provided to the bureau services of a financial or investment nature, including the management, analysis, supervision, or investment of assets.

(B) Of the initial appointments made to the board, the 54 governor shall appoint the member who represents employees, one 55 member who represents employers, and the member who represents 56 57 the public to a term ending one year after June 11, 2007; one member who represents employers, one member who represents 58 employee organizations, one member who is an investment and 59 securities expert, and the member who is a certified public 60 accountant to a term ending two years after June 11, 2007; and 61 one member who represents employers, one member who represents 62 employee organizations, one member who is an investment and 63 securities expert, and the member who is an actuary to a term 64 ending three years after June 11, 2007. Thereafter, terms of 65 office shall be for three years, with each term ending on the 66 same day of the same month as did the term that it succeeds. 67 Each member shall hold office from the date of the member's 68 appointment until the end of the term for which the member was 69 70 appointed.

Members may be reappointed. Any member appointed to fill a vacancy occurring prior to the expiration date of the term for which the member's predecessor was appointed shall hold office as a member for the remainder of that term. A member shall continue in office subsequent to the expiration date of the member's term until a successor takes office or until a period of sixty days has elapsed, whichever occurs first.

(C) In making appointments to the board, the governor 78 shall select the members from the list of names submitted by the 79 workers' compensation board of directors nominating committee 80 pursuant to this division. The nominating committee shall submit 81 to the governor a list containing four separate names for each 82 of the members on the board. Within fourteen days after the 8.3 submission of the list, the governor shall appoint individuals 84 from the list. 85

At least thirty days prior to a vacancy occurring as a 86 result of the expiration of a term and within thirty days after 87 other vacancies occurring on the board, the nominating committee 88 shall submit an initial list containing four names for each 89 vacancy. Within fourteen days after the submission of the 90 initial list, the governor either shall appoint individuals from 91 that list or request the nominating committee to submit another 92 list of four names for each member the governor has not 93 appointed from the initial list, which list the nominating 94 committee shall submit to the governor within fourteen days 95 after the governor's request. The governor then shall appoint, 96 within seven days after the submission of the second list, one 97 of the individuals from either list to fill the vacancy for 98 which the governor has not made an appointment from the initial 99 list. If the governor appoints an individual to fill a vacancy 100 occurring as a result of the expiration of a term, the 101 individual appointed shall begin serving as a member of the 102 board when the term for which the individual's predecessor was 103 appointed expires or immediately upon appointment by the 104 governor, whichever occurs later. With respect to the filling of 105 vacancies, the nominating committee shall provide the governor 106 with a list of four individuals who are, in the judgment of the 107 nominating committee, the most fully qualified to accede to 108

membership on the board.

In order for the name of an individual to be submitted to the governor under this division, the nominating committee shall approve the individual by an affirmative vote of a majority of its members.

- (D) All members of the board shall receive their reasonable and necessary expenses pursuant to section 126.31 of the Revised Code while engaged in the performance of their duties as members and also shall receive an annual salary not to exceed sixty thousand dollars in total, payable on the following basis:
- (1) Except as provided in division (D)(2) of this section, a member shall receive two thousand five hundred dollars during a month in which the member attends one or more meetings of the board and shall receive no payment during a month in which the member attends no meeting of the board.
- (2) A member may receive no more than thirty thousand dollars per year to compensate the member for attending meetings of the board, regardless of the number of meetings held by the board during a year or the number of meetings in excess of twelve within a year that the member attends.
- (3) Except as provided in division (D) (4) of this section, if a member serves on the workers' compensation audit committee, workers' compensation actuarial committee, or the workers' compensation investment committee, the member shall receive two thousand five hundred dollars during a month in which the member attends one or more meetings of the committee on which the member serves and shall receive no payment during any month in which the member attends no meeting of that committee.

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(4) A member may receive no more than thirty thousand

dollars per year to compensate the member for attending meetings

of any of the committees specified in division (D)(3) of this

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section, regardless of the number of meetings held by a

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committee during a year or the number of committees on which a

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member serves.

The chairperson of the board shall set the meeting dates

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of the board as necessary to perform the duties of the board

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under this chapter and Chapters 4123., 4125., 4127., 4131.,

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4133., and 4167. of the Revised Code. The board shall meet at

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least twelve times a year. The administrator of workers'

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compensation shall provide professional and clerical assistance

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to the board, as the board considers appropriate.

- (E) Before entering upon the duties of office, each appointed member of the board shall take an oath of office as required by sections 3.22 and 3.23 of the Revised Code and file in the office of the secretary of state the bond required under section 4121.127 of the Revised Code.
  - (F) The board shall:
- (1) Establish the overall administrative policy for the 157 bureau for the purposes of this chapter and Chapters 4123., 158 4125., 4127., 4131., 4133., and 4167. of the Revised Code; 159
- (2) Review progress of the bureau in meeting its cost and
  quality objectives and in complying with this chapter and
  Chapters 4123., 4125., 4127., 4131., 4133., and 4167. of the
  Revised Code;
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- (3) Submit an annual report to the president of the 164 senate, the speaker of the house of representatives, and the 265 governor and include all of the following in that report: 166

(a) An evaluation of the cost and quality objectives of	167
the bureau;	168
(b) A statement of the net assets available for the	169
provision of compensation and benefits under this chapter and	170
Chapters 4123., 4127., and 4131. of the Revised Code as of the	171
last day of the fiscal year;	172
(c) A statement of any changes that occurred in the net	173
assets available, including employer premiums and net investment	174
income, for the provision of compensation and benefits and	175
payment of administrative expenses, between the first and last	176
day of the fiscal year immediately preceding the date of the	177
report;	178
(d) The following information for each of the six	179
consecutive fiscal years occurring previous to the report:	180
(i) A schedule of the net assets available for	181
compensation and benefits;	182
(ii) The annual cost of the payment of compensation and	183
benefits;	184
(iii) Annual administrative expenses incurred;	185
(iv) Annual employer premiums allocated for the provision	186
of compensation and benefits.	187
(e) A description of any significant changes that occurred	188
during the six years for which the board provided the	189
information required under division $(F)(3)(d)$ of this section	190
that affect the ability of the board to compare that information	191
from year to year.	192
(4) Review all independent financial audits of the bureau.	193
The administrator shall provide access to records of the bureau	194

to facilitate the review required under this division.	195
(5) Study issues as requested by the administrator or the	196
governor;	197
(6) Contract with all of the following:	198
(a) An independent actuarial firm to assist the board in	199
making recommendations to the administrator regarding premium	200
rates;	201
(b) An outside investment counsel to assist the workers'	202
compensation investment committee in fulfilling its duties;	203
(c) An independent fiduciary counsel to assist the board	204
in the performance of its duties.	205
(7) Approve the investment policy developed by the	206
workers' compensation investment committee pursuant to section	207
4121.129 of the Revised Code if the policy satisfies the	208
requirements specified in section 4123.442 of the Revised Code;	209
(8) Review and publish the investment policy no less than	210
annually and make copies available to interested parties;	211
(9) Prohibit, on a prospective basis, any specific	212
investment it finds to be contrary to the investment policy	213
approved by the board;	214
(10) Vote to open each investment class and allow the	215
administrator to invest in an investment class only if the	216
board, by a majority vote, opens that class;	217
(11) After opening a class but prior to the administrator	218
investing in that class, adopt rules establishing due diligence	219
standards for employees of the bureau to follow when investing	220
in that class and establish policies and procedures to review	221

and monitor the performance and value of each investment class;	222
(12) Submit a report annually on the performance and value	223
of each investment class to the governor, the president and	224
minority leader of the senate, and the speaker and minority	225
leader of the house of representatives;	226
(13) Advise and consent on all of the following:	227
(a) Administrative rules the administrator submits to it	228
pursuant to division (B)(5) of section 4121.121 of the Revised	229
Code for the classification of occupations or industries, for	230
premium rates and contributions, for the amount to be credited	231
to the surplus fund, for rules and systems of rating, rate	232
revisions, and merit rating;	233
(b) The duties and authority conferred upon the	234
administrator pursuant to section 4121.37 of the Revised Code;	235
(c) Rules the administrator adopts for the health	236
partnership program and the qualified health plan system, as	237
provided in sections 4121.44, 4121.441, and 4121.442 of the	238
Revised Code;	239
(d) Rules the administrator submits to it pursuant to	240
Chapter 4167. of the Revised Code regarding the public	241
employment risk reduction program—and the protection of public—	242
health care workers from exposure incidents.	243
As used in this division, "public health care worker" and	244
"exposure incident" have the same meanings as in section 4167.25	245
of the Revised Code.	246
(14) Perform all duties required under this chapter and	247
Chapters 4123., 4125., 4127., 4131., 4133., and 4167. of the	248
Revised Code:	249

(15) Meet with the governor on an annual basis to discuss	250
the administrator's performance of the duties specified in this-	251
chapter and Chapters 4123., 4125., 4127., 4131., 4133., and	252
4167. of the Revised Code;	253
(16)—Develop and participate in a bureau of workers'	254
compensation board of directors education program that consists	255
of all of the following:	256
(a) An orientation component for newly appointed members;	257
(b) A continuing education component for board members who	258
have served for at least one year;	259
(c) A curriculum that includes education about each of the	260
following topics:	261
(i) Board member duties and responsibilities;	262
(ii) Compensation and benefits paid pursuant to this	263
chapter and Chapters 4123., 4127., and 4131. of the Revised	264
Code;	265
(iii) Ethics;	266
(iv) Governance processes and procedures;	267
(v) Actuarial soundness;	268
(vi) Investments;	269
(vii) Any other subject matter the board believes is	270
reasonably related to the duties of a board member.	271
$\frac{(17)}{(16)}$ Hold all sessions, classes, and other events for	272
the program developed pursuant to division $\frac{(F)(16)}{(F)(15)}$ of	273
this section in this state.	274
(G) The board may do both of the following:	275

appointment.

(1) Vote to close any investment class;	276
(2) Create any committees in addition to the workers'	277
compensation audit committee, the workers' compensation	278
actuarial committee, and the workers' compensation investment	279
committee that the board determines are necessary to assist the	280
board in performing its duties.	281
(H) The office of a member of the board who is convicted	282
of or pleads guilty to a felony, a theft offense as defined in	283
section 2913.01 of the Revised Code, or a violation of section	284
102.02, 102.03, 102.04, 2921.02, 2921.11, 2921.13, 2921.31,	285
2921.41, 2921.42, 2921.43, or 2921.44 of the Revised Code shall	286
be deemed vacant. The vacancy shall be filled in the same manner	287
as the original appointment. A person who has pleaded guilty to	288
or been convicted of an offense of that nature is ineligible to	289
be a member of the board. A member who receives a bill of	290
indictment for any of the offenses specified in this section	291
shall be automatically suspended from the board pending	292
resolution of the criminal matter.	293
(I) For the purposes of division (G)(1) of section 121.22	294
of the Revised Code, the meeting between the governor and the	295
board to review the administrator's performance as required-	296
under division (F)(15) of this section shall be considered a	297
meeting regarding the employment of the	298
administrator. Notwithstanding any provision to the contrary in	299
section 3.17 of the Revised Code, a board member who fails to	300
attend nine or more board meetings, including regular and	301
special meetings, during any consecutive twelve-month period	302
forfeits the member's position on the board. The resulting	303
vacancy shall be filled in the same manner as the original	304

#### Am. H. B. No. 81 As Passed by the House

Sec. 4121.121. (A) There is hereby created the bureau of	306
workers' compensation, which shall be administered by the	307
administrator of workers' compensation. A person appointed to	308
the position of administrator shall possess significant	309
management experience in effectively managing an organization or	310
organizations of substantial size and complexity. A person	311
appointed to the position of administrator also shall possess a	312
minimum of five years of experience in the field of workers'	313
compensation insurance or in another insurance industry, except	314
as otherwise provided when the conditions specified in division	315
(C) of this section are satisfied. The governor shall appoint	316
the administrator as provided in section 121.03 of the Revised	317
Code, and the administrator shall serve at the pleasure of the	318
governor. The governor shall fix the administrator's salary on	319
the basis of the administrator's experience and the	320
administrator's responsibilities and duties under this chapter	321
and Chapters 4123., 4125., 4127., 4131., 4133., and 4167. of the	322
Revised Code. The governor shall not appoint to the position of	323
administrator any person who has, or whose spouse has, given a	324
contribution to the campaign committee of the governor in an	325
amount greater than one thousand dollars during the two-year	326
period immediately preceding the date of the appointment of the	327
administrator.	328

The administrator shall hold no other public office and 329 shall devote full time to the duties of administrator. Before 330 entering upon the duties of the office, the administrator shall 331 take an oath of office as required by sections 3.22 and 3.23 of 332 the Revised Code, and shall file in the office of the secretary 333 of state, a bond signed by the administrator and by surety 334 approved by the governor, for the sum of fifty thousand dollars 335 payable to the state, conditioned upon the faithful performance 336

of the administrator's duties.

- (B) The administrator is responsible for the management of 338 the bureau and for the discharge of all administrative duties 339 imposed upon the administrator in this chapter and Chapters 340 4123., 4125., 4127., 4131., 4133., and 4167. of the Revised 341 Code, and in the discharge thereof shall do all of the 342 following:
- (1) Perform all acts and exercise all authorities and 344 345 powers, discretionary and otherwise that are required of or vested in the bureau or any of its employees in this chapter and 346 Chapters 4123., 4125., 4127., 4131., 4133., and 4167. of the 347 Revised Code, except the acts and the exercise of authority and 348 power that is required of and vested in the bureau of workers' 349 compensation board of directors or the industrial commission 350 pursuant to those chapters. The treasurer of state shall honor 351 all warrants signed by the administrator, or by one or more of 352 the administrator's employees, authorized by the administrator 353 in writing, or bearing the facsimile signature of the 354 administrator or such employee under sections 4123.42 and 355 4123.44 of the Revised Code. 356
- (2) Employ, direct, and supervise all employees required 357 in connection with the performance of the duties assigned to the 358 bureau by this chapter and Chapters 4123., 4125., 4127., 4131., 359 4133., and 4167. of the Revised Code, including an actuary, and 360 may establish job classification plans and compensation for all 361 employees of the bureau provided that this grant of authority 362 shall not be construed as affecting any employee for whom the 363 state employment relations board has established an appropriate 364 bargaining unit under section 4117.06 of the Revised Code. All 365 positions of employment in the bureau are in the classified 366

civil service except those employees the administrator may 367 appoint to serve at the administrator's pleasure in the 368 unclassified civil service pursuant to section 124.11 of the 369 Revised Code. The administrator shall fix the salaries of 370 employees the administrator appoints to serve at the 371 administrator's pleasure, including the chief operating officer, 372 staff physicians, staff certified nurse-midwives, staff clinical 373 nurse specialists, staff certified nurse practitioners, and 374 other senior management personnel of the bureau and shall 375 establish the compensation of staff attorneys of the bureau's 376 legal section and their immediate supervisors, and take whatever 377 steps are necessary to provide adequate compensation for other 378 staff attorneys. 379

The administrator may appoint a person who holds a 380 certified position in the classified service within the bureau 381 to a position in the unclassified service within the bureau. A 382 person appointed pursuant to this division to a position in the 383 unclassified service shall retain the right to resume the 384 position and status held by the person in the classified service 385 immediately prior to the person's appointment in the 386 unclassified service, regardless of the number of positions the 387 person held in the unclassified service. An employee's right to 388 resume a position in the classified service may only be 389 exercised when the administrator demotes the employee to a pay 390 range lower than the employee's current pay range or revokes the 391 employee's appointment to the unclassified service. An employee 392 who holds a position in the classified service and who is 393 appointed to a position in the unclassified service on or after 394 January 1, 2016, shall have the right to resume a position in 395 the classified service under this division only within five 396 years after the effective date of the employee's appointment in 397

the unclassified service. An employee forfeits the right to	398
resume a position in the classified service when the employee is	399
removed from the position in the unclassified service due to	400
incompetence, inefficiency, dishonesty, drunkenness, immoral	401
conduct, insubordination, discourteous treatment of the public,	402
neglect of duty, violation of this chapter or Chapter 124.,	403
4123., 4125., 4127., 4131., 4133., or 4167. of the Revised Code,	404
violation of the rules of the director of administrative	405
services or the administrator, any other failure of good	406
behavior, any other acts of misfeasance, malfeasance, or	407
nonfeasance in office, or conviction of a felony while employed	408
in the civil service. An employee also forfeits the right to	409
resume a position in the classified service upon transfer to a	410
different agency.	411

Reinstatement to a position in the classified service 412 shall be to a position substantially equal to that position in 413 the classified service held previously, as certified by the 414 department of administrative services. If the position the 415 person previously held in the classified service has been placed 416 in the unclassified service or is otherwise unavailable, the 417 person shall be appointed to a position in the classified 418 service within the bureau that the director of administrative 419 services certifies is comparable in compensation to the position 420 the person previously held in the classified service. Service in 421 the position in the unclassified service shall be counted as 422 service in the position in the classified service held by the 423 person immediately prior to the person's appointment in the 424 unclassified service. When a person is reinstated to a position 425 in the classified service as provided in this division, the 426 person is entitled to all rights, status, and benefits accruing 427 to the position during the person's time of service in the 428

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position in the unclassified service.

- (3) Reorganize the work of the bureau, its sections, 430 departments, and offices to the extent necessary to achieve the 431 most efficient performance of its functions and to that end may 432 establish, change, or abolish positions and assign and reassign 433 duties and responsibilities of every employee of the bureau. All 434 persons employed by the commission in positions that, after 435 November 3, 1989, are supervised and directed by the 436 administrator under this section are transferred to the bureau 437 in their respective classifications but subject to reassignment 438 and reclassification of position and compensation as the 439 administrator determines to be in the interest of efficient 440 administration. The civil service status of any person employed 441 by the commission is not affected by this section. Personnel 442 employed by the bureau or the commission who are subject to 443 Chapter 4117. of the Revised Code shall retain all of their 444 rights and benefits conferred pursuant to that chapter as it 445 presently exists or is hereafter amended and nothing in this 446 chapter or Chapter 4123. of the Revised Code shall be construed 447 as eliminating or interfering with Chapter 4117. of the Revised 448 Code or the rights and benefits conferred under that chapter to 449 public employees or to any bargaining unit. 450
- (4) Provide offices, equipment, supplies, and other facilities for the bureau.
- (5) Prepare and submit to the board information the 453 administrator considers pertinent or the board requires, 454 together with the administrator's recommendations, in the form 455 of administrative rules, for the advice and consent of the 456 board, for classifications of occupations or industries, for 457 premium rates and contributions, for the amount to be credited 458

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to the surplus fund, for rules and systems of rating, rate	459
revisions, and merit rating. The administrator shall obtain,	460
prepare, and submit any other information the board requires for	461
the prompt and efficient discharge of its duties.	462

- (6) Keep the accounts required by division (A) of section 4123.34 of the Revised Code and all other accounts and records necessary to the collection, administration, and distribution of the workers' compensation funds and shall obtain the statistical and other information required by section 4123.19 of the Revised Code.
- (7) Exercise the investment powers vested in the 469 administrator by section 4123.44 of the Revised Code in 470 accordance with the investment policy approved by the board 471 pursuant to section 4121.12 of the Revised Code and in 472 consultation with the chief investment officer of the bureau of 473 workers' compensation. The administrator shall not engage in any 474 prohibited investment activity specified by the board pursuant 475 to division (F)(9) of section 4121.12 of the Revised Code and 476 shall not invest in any type of investment specified in 477 divisions (B)(1) to (10) of section 4123.442 of the Revised 478 Code. All business shall be transacted, all funds invested, all 479 warrants for money drawn and payments made, and all cash and 480 securities and other property held, in the name of the bureau, 481 or in the name of its nominee, provided that nominees are 482 authorized by the administrator solely for the purpose of 483 facilitating the transfer of securities, and restricted to the 484 administrator and designated employees. 485
- (8) In accordance with Chapter 125. of the Revised Code, purchase supplies, materials, equipment, and services.
  - (9) Prepare and submit to the board an annual budget for

internal operating purposes <del> for the board's approval</del> . The	489
administrator also shall, separately from the budget the	490
industrial commission submits, prepare and submit to the	491
director of budget and management a budget for each biennium.	492
The <del>budgets <u>budget</u> submitted to the <del>board and the</del> director shall</del>	493
include estimates of the costs and necessary expenditures of the	494
bureau in the discharge of any duty imposed by law.	495

- (10) As promptly as possible in the course of efficient 496 administration, decentralize and relocate such of the personnel 497 and activities of the bureau as is appropriate to the end that 498 the receipt, investigation, determination, and payment of claims 499 may be undertaken at or near the place of injury or the 500 residence of the claimant and for that purpose establish 501 regional offices, in such places as the administrator considers 502 proper, capable of discharging as many of the functions of the 503 bureau as is practicable so as to promote prompt and efficient 504 administration in the processing of claims. All active and 505 inactive lost-time claims files shall be held at the service 506 office responsible for the claim. A claimant, at the claimant's 507 request, shall be provided with information by telephone as to 508 509 the location of the file pertaining to the claimant's claim. The administrator shall ensure that all service office employees 510 report directly to the director for their service office. 511
- (11) Provide a written binder on new coverage where the 512 administrator considers it to be in the best interest of the 513 risk. The administrator, or any other person authorized by the 514 administrator, shall grant the binder upon submission of a 515 request for coverage by the employer. A binder is effective for 516 a period of thirty days from date of issuance and is 517 nonrenewable. Payroll reports and premium charges shall coincide 518 with the effective date of the binder. 519

services;

(12) Set standards for the reasonable and maximum handling	520
time of claims payment functions, ensure, by rules, the	521
impartial and prompt treatment of all claims and employer risk	522
accounts, and establish a secure, accurate method of time	523
stamping all incoming mail and documents hand delivered to	524
bureau employees.	525
(13) Ensure that all employees of the bureau follow the	526
orders and rules of the commission as such orders and rules	527
relate to the commission's overall adjudicatory policy-making	528
and management duties under this chapter and Chapters 4123.,	529
4127., and 4131. of the Revised Code.	530
(14) Manage and operate a data processing system with a	531
common data base for the use of both the bureau and the	532
commission and, in consultation with the commission, using	533
electronic data processing equipment, shall develop a claims	534
tracking system that is sufficient to monitor the status of a	535
claim at any time and that lists appeals that have been filed	536
and orders or determinations that have been issued pursuant to	537
section 4123.511 or 4123.512 of the Revised Code, including the	538
dates of such filings and issuances.	539
(15) Establish and maintain a medical section within the	540
bureau. The medical section shall do all of the following:	541
(a) Assist the administrator in establishing standard	542
medical fees, approving medical procedures, and determining	543
eligibility and reasonableness of the compensation payments for	544
medical, hospital, and nursing services, and in establishing	545
guidelines for payment policies which recognize usual,	546
customary, and reasonable methods of payment for covered	547

(b) Provide a resource to respond to questions from claims	549
examiners for employees of the bureau;	550
(c) Audit fee bill payments;	551
(d) Implement a program to utilize, to the maximum extent	552
possible, electronic data processing equipment for storage of	553
information to facilitate authorizations of compensation	554
payments for medical, hospital, drug, and nursing services;	555
(e) Perform other duties assigned to it by the	556
administrator.	557
(16) Appoint, as the administrator determines necessary,	558
panels to review and advise the administrator on disputes	559
arising over a determination that a health care service or	560
supply provided to a claimant is not covered under this chapter	561
or Chapter 4123., 4127., or 4131. of the Revised Code or is	562
medically unnecessary. If an individual health care provider is	563
involved in the dispute, the panel shall consist of individuals	564
licensed pursuant to the same section of the Revised Code as	565
such health care provider.	566
(17) Pursuant to section 4123.65 of the Revised Code,	567
approve applications for the final settlement of claims for	568
compensation or benefits under this chapter and Chapters 4123.,	569
4127., and 4131. of the Revised Code as the administrator	570
determines appropriate, except in regard to the applications of	571
self-insuring employers and their employees.	572
(18) Comply with section 3517.13 of the Revised Code, and	573
except in regard to contracts entered into pursuant to the	574
authority contained in section 4121.44 of the Revised Code,	575
comply with the competitive bidding procedures set forth in the	576
Revised Code for all contracts into which the administrator	577

enters provided that those contracts fall within the type of	578
contracts and dollar amounts specified in the Revised Code for	579
competitive bidding and further provided that those contracts	580
are not otherwise specifically exempt from the competitive	581
bidding procedures contained in the Revised Code.	582
(19) Adopt, with the advice and consent of the board,	583
rules for the operation of the bureau.	584
(20) Prepare and submit to the board information the	585
administrator considers pertinent or the board requires,	586
together with the administrator's recommendations, in the form	587
of administrative rules, for the advice and consent of the	588
board, for the health partnership program and the qualified	589
health plan system, as provided in sections 4121.44, 4121.441,	590
and 4121.442 of the Revised Code.	591
(C) The administrator, with the advice and consent of the	592
senate, shall appoint a chief operating officer who has a	593
minimum of five years of experience in the field of workers'	594
compensation insurance or in another similar insurance industry	595
if the administrator does not possess such experience. The chief	596
operating officer shall not commence the chief operating	597
officer's duties until after the senate consents to the chief	598
operating officer's appointment. The chief operating officer	599
shall serve in the unclassified civil service of the state.	600
Sec. 4121.13. The administrator of workers' compensation	601
shall:	602
(A) Investigate, ascertain, and declare and prescribe what	603
hours of labor, safety devices, safeguards, or other means or	604
methods of protection are best adapted to render the employees	605

of every employment and place of employment and frequenters of

every place of employment safe, and to protect their welfare as	607
required by law or lawful orders, and establish and maintain	608
museums of safety and hygiene in which shall be exhibited safety	609
devices, safeguards, and other means and methods for the	610
protection of life, health, safety, and welfare of employees;	611
(B) Ascertain and fix reasonable standards and prescribe,	612
modify, and enforce reasonable orders for the adoption of safety	613
devices, safeguards, and other means or methods of protection to	614
be as nearly uniform as possible as may be necessary to carry	615
out all laws and lawful orders relative to the protection of the	616
life, health, safety, and welfare of employees in employments	617
and places of employment or frequenters of places of employment;	618
(C) Ascertain, fix, and order reasonable standards for the	619
construction, repair, and maintenance of places of employment as	620
shall render them safe;	621
(D) Investigate, ascertain, and determine reasonable	622
classifications of persons, employments, and places of	623
employment as are necessary to carry out the applicable sections	624
of sections 4101.01 to 4101.16 and 4121.01 to 4121.29 of the	625
Revised Code;	626
(E) Adopt reasonable and proper rules relative to the	627
exercise of <a href="https://example.com/his_the_administrator">https://example.com/his_the_administrator</a> powers and authorities, and	628
proper rules to govern <a href="https://doi.org/10.2016/journal.org">https://doi.org/10.2016/journal.org/1</a>	629
to regulate the mode and manner of all investigations and	630
hearings, which rules shall not be effective until ten days	631
after their publication; a copy of the rules shall be delivered	632
at cost to every citizen making application therefor;	633
(F) Investigate all cases of fraud or other illegalities	634
pertaining to the operation of the workers' compensation system	635

and its several insurance funds and for that purpose, the	636
administrator has every power of an inquisitorial nature granted	637
to the industrial commission in this chapter and Chapter 4123.	638
of the Revised Code;	639
(G) Do all things convenient and necessary to accomplish	640
the purposes directed in sections 4101.01 to 4101.16 and 4121.01	641
to 4121.28 of the Revised Code;	642
to 1121.20 of the Nevisca code,	012
(H) Nothing in this section shall be construed to	643
supersede section 4105.011 of the Revised Code in particular, or	644
Chapter 4105. of the Revised Code in general.	645
Sec. 4121.41. (A) The administrator of workers'	646
compensation shall operate a program designed to inform	647
employees and employers of their rights and responsibilities	648
under Chapter 4123. of the Revised Code and as part of that	649
program prepare and distribute pamphlets, which clearly and	650
simply explain at least all of the following:	651
(1) The rights and responsibilities of claimants and	652
employers;	653
(2) The procedures for processing claims;	654
(3) The procedure for fulfilling employer responsibility;	655
(4) All applicable statutes of limitation;	656
(5) The availability of services and benefits;	657
	650
(6) The claimant's right to representation in the	658
processing of a claim or to elect no representation.	659
The administrator shall ensure that the provisions of this	660
section are faithfully and speedily implemented.	661
(B) The bureau of workers' compensation shall maintain an	662

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ongoing program to identify employers subject to Chapter 4123.	663
of the Revised Code and to audit employers to ensure an optimum	664
level of premium payment. The bureau shall coordinate such	665
efforts with other governmental agencies which have information	666
as to employers who are subject to Chapter 4123. of the Revised	667
Code.	668
(C) The administrator shall handle complaints through the	669

(C) The administrator shall handle complaints through the service offices, the claims section, and the ombudsperson—

programworkers' compensation customer advocacy office. The administrator shall provide toll free telephone lines for employers and claimants in order to expedite the handling of complaints. The bureau shall monitor complaint traffic to ensure an adequacy of telephone service to bureau offices and shall compile statistics on complaint subjects. Based upon those compilations, the bureau shall revise procedures and rules to correct major problem areas and submit data and recommendations annually to the appropriate committees of the general assembly.

Sec. 4121.45. (A) There is hereby created a—the workers' 680 compensation ombudsperson system—customer advocacy office to 681 assist claimants and employers in matters dealing with the 682 bureau of workers' compensation and the industrial commission. 683 The industrial commission nominating council shall appoint a 684 chief ombudspersoncustomer advocate. The chief 685 ombudspersoncustomer advocate, with the advice and consent of 686 the nominating council, may appoint such assistant ombudspersons 687 advocates as the nominating council deems necessary. The 688 position of chief ombudsperson—customer advocate is for a term 689 of six years. A person appointed to the position of chief 690 ombudsperson—customer advocate shall serve at the pleasure of 691 the nominating council. The chief ombudsperson—customer advocate 692 may not be transferred, demoted, or suspended during the 693

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person's tenure and may be removed by the nominating council	694
only upon a vote of not fewer than nine members of the	695
nominating council. The chief ombudsperson customer advocate	696
shall devote the chief ombudsperson's customer advocate's full	697
time and attention to the duties of the ombudsperson's chief	698
customer advocate's office. The administrator of workers'	699
compensation shall furnish the chief ombudsperson customer	700
advocate with the office space, supplies, and clerical	701
assistance that will enable the chief <del>ombudsperson</del> <u>customer</u>	702
advocate and the ombudsperson system customer advocacy office	703
staff to perform their duties effectively. The ombudsperson-	704
program office shall be funded out of the budget of the bureau	705
and the chief ombudsperson customer advocate and the	706
ombudsperson system customer advocacy office staff shall be	707
carried on the bureau payroll. The chief ombudsperson customer	708
advocate and the ombudsperson system customer advocacy office	709
shall be under the direction of the nominating council. The	710
administrator and all employees of the bureau and the commission	711
shall give the ombudsperson system customer advocacy office	712
staff full and prompt cooperation in all matters relating to the	713
duties of the chief ombudsperson customer advocate.	714
(B) The ombudsperson system customer advocacy office staff	715

- (B) The ombudsperson system customer advocacy office staff 715 shall: 716
- (1) Answer inquiries or investigate complaints made by employers or claimants under this chapter and Chapter 4123. of the Revised Code as they relate to the processing of a claim for workers' compensation benefits;
- (2) Provide claimants and employers with information
   721
   regarding problems which arise out of the functions of the
   bureau, commission hearing officers, and the commission and the
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procedures employed in the processing of claims;	724
(3) Answer inquiries or investigate complaints of an	725
employer as they relate to reserves established and premiums	726
charged in connection with the employer's account;	727
(4) Comply with Chapter 102. and sections 2921.42 and	728
2921.43 of the Revised Code and the nominating council's human	729
resource and ethics policies;	730
(5) Not express any opinions as to the merit of a claim or	731
the correctness of a decision by the various officers or	732
agencies as the decision relates to a claim for benefits or	733
compensation.	734
For the purpose of carrying out the chief ombudsperson's	735
<pre>customer advocate's duties, the chief ombudsperson customer</pre>	736
advocate or the ombudsperson system customer advocacy office	737
staff, notwithstanding sections 4123.27 and 4123.88 of the	738
Revised Code, has the right at all reasonable times to examine	739
the contents of a claim file and discuss with parties in	740
interest the contents of the file as long as the ombudsperson-	741
<pre>customer advocate does not divulge information that would tend</pre>	742
to prejudice the case of either party to a claim or that would	743
tend to compromise a privileged attorney-client relationship,	744
physician-patient relationship, or advanced practice registered	745
nurse-patient relationship.	746
(C) The chief <pre>ombudsperson_customer advocate_shall:</pre>	747
(1) Assist any service office in its duties whenever it	748
requires assistance or information that can best be obtained	749
from central office personnel or records;	750
(2) Annually assemble reports from each assistant	751
ombudsperson—customer advocate as to their activities for the	752

preceding year together with their recommendations as to changes	753
or improvements in the operations of the workers' compensation	754
system. The chief ombudsperson customer advocate shall prepare a	755
written report summarizing the activities of the ombudsperson-	756
system customer advocacy office together with a digest of	757
recommendations. The chief ombudsperson customer advocate shall	758
transmit the report to the nominating council.	759
(3) Comply with Chapter 102. and sections 2921.42 and	760
2921.43 of the Revised Code and the nominating council's human	761
resource and ethics policies.	762
(D) No ombudsperson customer advocate or assistant	763
<pre>ombudsperson_customer advocate_shall:</pre>	764
(1) Represent a claimant or employer in claims pending	765
before or to be filed with the administrator, a district or	766
staff hearing officer, the commission, or the courts of the	767
state, nor shall <del>an ombudsperson</del> <u>a customer advocate</u> or	768
assistant ombudsperson customer advocate undertake any such	769
representation for a period of one year after the ombudsperson's	770
<u>customer advocate's</u> or assistant <del>ombudsperson's</del> <u>customer</u>	771
advocate's employment terminates or be eligible for employment	772
by the bureau or the commission or as a district or staff	773
hearing officer for one year;	774
(2) Express any opinions as to the merit of a claim or the	775
correctness of a decision by the various officers or agencies as	776
the decision relates to a claim for benefits or compensation.	777
(E) The chief ombudsperson customer advocate and assistant	778
ombudspersons—customer advocates shall receive compensation at a	779
level established by the nominating council commensurate with	780

the individual's background, education, and experience in

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workers' compensation or related fields. The chief ombudsperson-782 customer advocate and assistant ombudspersons—customer advocates 783 are full-time permanent employees in the unclassified service of 784 the state and are entitled to all benefits that accrue to such 785 employees, including, without limitation, sick, vacation, and 786 personal leaves. Assistant ombudspersons—customer advocates 787 788 serve at the pleasure of the chief <del>ombudsperson</del>customer 789 advocate.

(F) In the event of a vacancy in the position of chief 
ombudspersoncustomer advocate, the nominating council may 
appoint a person to serve as acting chief ombudspersoncustomer 
advocate until a chief ombudspersoncustomer advocate is 
appointed. The acting chief ombudspersoncustomer advocate shall 
be under the direction and control of the nominating council and 
may be removed by the nominating council with or without just 
cause.

Sec. 4123.44. The members of the bureau of workers' 798 compensation board of directors, the administrator of workers' 799 compensation, and the bureau of workers' compensation chief 800 801 investment officer are the trustees of fiduciaries to the state insurance fund. The administrator, in accordance with sections 802 4121.126 and 4121.127 of the Revised Code and the investment 803 policy approved by the board pursuant to section 4121.12 of the 804 Revised Code, and in consultation with the bureau of workers' 805 compensation chief investment officer, may invest any of the 806 surplus or reserve belonging to the state insurance fund. The 807 administrator and the bureau of workers' compensation chief 808 investment officer shall not deviate from the investment policy 809 approved by the board without the approval of the workers' 810 compensation investment committee and the board. 811

The administrator shall not invest in any type of	812
investment specified in divisions (B)(1) to (10) of section	813
4123.442 of the Revised Code. The administrator shall not make	814
an investment decision with the primary purpose of influencing	815
any social or environmental policy or attempting to influence	816
the governance of any corporation.	817

The administrator and other fiduciaries shall discharge 818 their duties with respect to the funds with the care, skill, 819 prudence, and diligence under the circumstances then prevailing 820 821 that a prudent person acting in a like capacity and familiar with such matters would use in the conduct of an enterprise of a 822 like character and with like aims, and by diversifying the 823 investments of the assets of the funds so as to minimize the 824 risk of large losses, unless under the circumstances it is 825 clearly prudent not to do so. 826

The administrator and other fiduciaries, in accordance 827 with their fiduciary duties described under this section, shall 828 make investment decisions with the sole purpose of maximizing 829 the return on investments and that are consistent with any other 830 fiduciary responsibilities of the administrator and other 831 fiduciaries under this chapter and Chapters 4121., 4127., and 832 4131. of the Revised Code.

To facilitate investment of the funds, the administrator

may establish a partnership, trust, limited liability company,

corporation, including a corporation exempt from taxation under

the Internal Revenue Code, 100 Stat. 2085, 26 U.S.C. 1, as

amended, or any other legal entity authorized to transact

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business in this state.

When reporting on the performance of investments, the 840 administrator shall comply with the performance presentation 841

standards	established	by the	e association	for	investment	84
management	and researc	h.				84

All investments shall be purchased at current market 844 prices and the evidences of title to the investments shall be 845 placed in the custody of the treasurer of state, who is hereby 846 designated as custodian, or in the custody of the treasurer of 847 state's authorized agent. Evidences of title of the investments 848 so purchased may be deposited by the treasurer of state for 849 safekeeping with an authorized agent selected by the treasurer 850 851 of state who is a qualified trustee under section 135.18 of the Revised Code. The treasurer of state or the agent shall collect 852 the principal, dividends, distributions, and interest as they 853 become due and payable and place them when collected into the 854 state insurance fund. 855

The treasurer of state shall pay for investments purchased 856 by the administrator on receipt of written or electronic 857 instructions from the administrator or the administrator's 858 designated agent authorizing the purchase, and pending receipt 859 of the evidence of title of the investment by the treasurer of 860 861 state or the treasurer of state's authorized agent. The 862 administrator may sell investments held by the administrator, 863 and the treasurer of state or the treasurer of state's authorized agent shall accept payment from the purchaser and 864 deliver evidence of title of the investment to the purchaser, on 865 receipt of written or electronic instructions from the 866 administrator or the administrator's designated agent 867 authorizing the sale, and pending receipt of the moneys for the 868 investments. The amount received shall be placed in the state 869 insurance fund. The administrator and the treasurer of state may 870 enter into agreements to establish procedures for the purchase 871 and sale of investments under this division and the custody of 872

investments.	873
j	investments.

No purchase or sale of any investment shall be made under 874 this section, except as authorized by the administrator. 875

Any statement of financial position distributed by the 876 administrator shall include the fair value, as of the statement 877 date, of all investments held by the administrator under this 878 section. 879

When in the judgment of the administrator it is necessary 880 to provide available funds for the payment of compensation or 881 benefits under this chapter, the administrator may borrow money 882 from any available source and pledge as security a sufficient 883 amount of bonds or other securities in which the state insurance 884 fund is invested. The aggregate unpaid amount of loans existing 885 at any one time for money so borrowed shall not exceed ten 886 million dollars. The bonds or other securities so pledged as 887 security for such loans to the administrator shall be the sole 888 security for the payment of the principal and interest of any 889 such loan. The administrator shall not be personally liable for 890 the payment of the principal or the interest of any such loan. 891 No such loan shall be made for a longer period of time than one 892 year. Such loans may be renewed but no one renewal shall be for 893 a period in excess of one year. Such loans shall bear such rate 894 of interest as the administrator determines and in negotiating 895 the loans, the administrator shall endeavor to secure as 896 favorable interest rates and terms as circumstances will permit. 897

The treasurer of state may deliver to the person or

governmental agency making such loan, the bonds or other

securities which are to be pledged by the administrator as

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security for such loan, upon receipt by the treasurer of state

of an order of the administrator authorizing such loan. Upon

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payment of any such loan by the administrator, the bonds or	903
other securities pledged as security therefor shall be returned	904
to the treasurer of state as custodian of such bonds.	905

The administrator may pledge with the treasurer of state such amount of bonds or other securities in which the state insurance fund is invested as is reasonably necessary as security for any certificates issued, or paid out, by the treasurer of state upon any warrants drawn by the administrator.

The administrator may secure investment information 911 services, consulting services, and other like services to 912 facilitate investment of the surplus and reserve belonging to 913 the state insurance fund. The administrator shall pay the 914 expense of securing such services from the state insurance fund. 915

The board and administrator shall not take any action to promote a policy under which the administrator makes investment decisions with the primary purpose of influencing any social or environmental policy or attempting to influence the governance of any corporation.

Sec. 4123.52. (A) The jurisdiction of the industrial 921 922 commission and the authority of the administrator of workers' compensation over each case is continuing, and the commission 923 924 may make such modification or change with respect to former findings or orders with respect thereto, as, in its opinion is 925 justified. No modification or change nor any finding or award in 926 respect of any claim shall be made with respect to disability, 927 compensation, dependency, or benefits, after five years from the 928 date of injury in the absence of medical benefits being provided 929 under this chapter or in the absence of payment of compensation 930 under section 4123.57, 4123.58, or division (A) or (B) of 931 section 4123.56 of the Revised Code or wages in lieu of 932

compensation in a manner so as to satisfy the requirements of	933
section 4123.84 of the Revised Code, in which event the	934
modification, change, finding, or award shall be made within	935
five years from the date of the last medical services being	936
rendered or the date of the last payment of compensation or from	937
the date of death, nor unless written notice of claim for the	938
specific part or parts of the body injured or disabled has been	939
given as provided in section 4123.84 or 4123.85 of the Revised	940
Code. The commission shall not make any modification, change,	941
finding, or award which shall award compensation for a back	942
period in excess of two years prior to the date of filing	943
application therefor.	944
(B)(1) As used in this division, "prosthetic device"	945
means a custom fabricated or fitted device used to replace a	946
missing appendage or other external body part. "Prosthetic	947
device" includes an artificial limb, hand, foot, or eye or an	948
intraocular lens. "Prosthetic device" does not include a dental	949
appliance, eyeglasses, hearing aid, ostomy product, or any other	950
item that does not have a significant impact on the	951
musculoskeletal functions of the body such as breast prostheses,	952
eyelashes, wigs, and other cosmetic devices.	953
(2) Notwithstanding any provision to the contrary in	954
division (A) of this section, the commission or administrator	955
may, regardless of the date of injury or the last payment of	956
compensation or benefits, order payment to purchase, repair, or	957
replace a prosthetic device if the purchase, repair, or	958
replacement is necessary due to an amputation or loss that	959
resulted from an allowed injury or occupational disease.	960
(3) Ordering a payment under division (B)(2) of this	961
section does not extend the time period during which the	962

commission or administrator may modify or change a former	963
finding or order in a claim as provided under division (A) of	964
this section.	965
$\underline{\text{(C)}}$ Notwithstanding division (A) of this section, and	966
except as otherwise provided in a rule that shall be adopted by	967
the administrator, with the advice and consent of the bureau of	968
workers' compensation board of directors, neither the	969
administrator nor the commission shall make any finding or award	970
for payment of medical or vocational rehabilitation services	971
submitted for payment more than one year after the date the	972
services were rendered or more than one year after the date the	973
services became payable under division (I) of section 4123.511	974
of the Revised Code, whichever is later. No medical or	975
vocational rehabilitation provider shall bill a claimant for	976
services rendered if the administrator or commission is	977
prohibited from making that payment under this division.	978
$\frac{(C)}{(D)}$ Division $\frac{(B)}{(C)}$ of this section does not apply to	979
requests made by the centers for medicare and medicaid services	980
in the United States department of health and human services for	981
reimbursement of conditional payments made pursuant to section	982
1395y(b)(2) of title 42, United States Code (commonly known as	983
the "Medicare Secondary Payer Act").	984
$\frac{\text{(D)}}{\text{(E)}}$ This section does not affect the right of a	985
claimant to compensation accruing subsequent to the filing of	986
any such application, provided the application is filed within	987
the time limit provided in this section.	988
$\frac{(E)}{(F)}$ This section does not deprive the commission of its	989
continuing jurisdiction to determine the questions raised by any	990
application for modification of award which has been filed with	991
the commission after June 1, 1932, and prior to the expiration	992

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of the applicable period but in respect to which no award has	993
been granted or denied during the applicable period.	994

(F) (G) The commission may, by general rules, provide for the destruction of files of cases in which no further action may be taken.

(G) (H) The commission and administrator of workers' 998 compensation each may, by general rules, provide for the 999 retention and destruction of all other records in their 1000 possession or under their control pursuant to section 121.211 1001 and sections 149.34 to 149.36 of the Revised Code. The bureau of 1002 workers' compensation may purchase or rent required equipment 1003 for the document retention media, as determined necessary to 1004 preserve the records. Photographs, microphotographs, microfilm, 1005 films, or other direct or electronic document retention media, 1006 when properly identified, have the same effect as the original 1007 record and may be offered in like manner and may be received as 1008 evidence in proceedings before the industrial commission, staff 1009 hearing officers, and district hearing officers, and in any 1010 court where the original record could have been introduced. 1011

Sec. 4123.54. (A) Except as otherwise provided in this 1012 division or divisions (I) and (K) of this section, every 1013 employee, who is injured or who contracts an occupational 1014 disease, and the dependents of each employee who is killed, or 1015 dies as the result of an occupational disease contracted in the 1016 course of employment, wherever the injury has occurred or 1017 occupational disease has been contracted, is entitled to receive 1018 the compensation for loss sustained on account of the injury, 1019 occupational disease, or death, and the medical, nurse, and 1020 hospital services and medicines, and the amount of funeral 1021 expenses in case of death, as are provided by this chapter. The 1022

compensation and benefits shall be provided, as applicable,	1023
directly from the employee's self-insuring employer as provided	1024
in section 4123.35 of the Revised Code or from the state	1025
insurance fund. An employee or dependent is not entitled to	1026
receive compensation or benefits under this division if the	1027
employee's injury or occupational disease is either of the	1028
following:	1029

- (1) Purposely self-inflicted;
- (2) Caused by the employee being intoxicated, under the 1031 influence of a controlled substance not prescribed by a 1032 physician, certified nurse-midwife, clinical nurse specialist, 1033 or certified nurse practitioner, or under the influence of 1034 marihuana if being intoxicated, under the influence of a 1035 controlled substance not prescribed by a physician, certified 1036 nurse-midwife, clinical nurse specialist, or certified nurse 1037 practitioner, or under the influence of marihuana was the 1038 proximate cause of the injury. 1039
- (B) For the purpose of this section, provided that an 1040 employer has posted written notice to employees that the results 1041 of, or the employee's refusal to submit to, any chemical test 1042 described under this division may affect the employee's 1043 eligibility for compensation and benefits pursuant to this 1044 chapter and Chapter 4121. of the Revised Code, there is a 1045 rebuttable presumption that an employee is intoxicated, under 1046 the influence of a controlled substance not prescribed by the 1047 employee's physician, certified nurse-midwife, clinical nurse 1048 specialist, or certified nurse practitioner, or under the 1049 influence of marihuana and that being intoxicated, under the 1050 influence of a controlled substance not prescribed by the 1051 employee's physician, certified nurse-midwife, clinical nurse 1052

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specialist, or certified nurse practitioner, or under the	1053
influence of marihuana is the proximate cause of an injury under	1054
either of the following conditions:	1055
(1) When any one or more of the following is true:	1056
(a) The employee, through a qualifying chemical test	1057
administered within eight hours of an injury, is determined to	1058
have an alcohol concentration level equal to or in excess of the	1059
levels established in divisions (A)(1)(b) to (i) of section	1060
4511.19 of the Revised Code.	1061
(b) The employee, through a qualifying chemical test	1062
administered within thirty-two hours of an injury, is determined	1063
to have a controlled substance not prescribed by the employee's	1064
physician, certified nurse-midwife, clinical nurse specialist,	1065
or certified nurse practitioner or marihuana in the employee's	1066
system at a level equal to or in excess of the cutoff	1067
concentration level for the particular substance as provided in	1068
section 40.87 40.85 of Title 49 of the Code of Federal	1069
Regulations, 49 C.F.R. 40.8740.85, as amended it existed on	1070
January 1, 2024, or as subsequently amended as a result of a	1071
statute or rule.	1072
(c) The employee, through a qualifying chemical test	1073
administered within thirty-two hours of an injury, is determined	1074
to have barbiturates, benzodiazepines, or methadone in the	1075
employee's system that tests above levels established by	1076
laboratories certified by the United States department of health	1077
and human services.	1078
(2) When the employee refuses to submit to a requested	1079

chemical test, on the condition that that employee is or was

given notice that the refusal to submit to any chemical test

described in division (B)(1) of this section may affect the	1082
employee's eligibility for compensation and benefits under this	1083
chapter and Chapter 4121. of the Revised Code.	1084
(C)(1) For purposes of division (B) of this section, a	1085
chemical test is a qualifying chemical test if it is	1086
administered to an employee after an injury under at least one	1087
of the following conditions:	1088
(a) When the employee's employer had reasonable cause to	1089
suspect that the employee may be intoxicated, under the	1090
influence of a controlled substance not prescribed by the	1091
employee's physician, certified nurse-midwife, clinical nurse	1092
specialist, or certified nurse practitioner, or under the	1093
influence of marihuana;	1094
(b) At the request of a police officer pursuant to section	1095
4511.191 of the Revised Code, and not at the request of the	1096
<pre>employee's employer;</pre>	1097
(c) At the request of a licensed physician, certified	1098
nurse-midwife, clinical nurse specialist, or certified nurse	1099
practitioner who is not employed by the employee's employer, and	1100
not at the request of the employee's employer.	1101
(2) As used in division (C)(1)(a) of this section,	1102
"reasonable cause" means, but is not limited to, evidence that	1103
an employee is or was using alcohol, a controlled substance, or	1104
marihuana drawn from specific, objective facts and reasonable	1105
inferences drawn from these facts in light of experience and	1106
training. These facts and inferences may be based on, but are	1107
not limited to, any of the following:	1108
(a) Observable phenomena, such as direct observation of	1109
use, possession, or distribution of alcohol, a controlled	1110

substance, or marihuana, or of the physical symptoms of being	1111
under the influence of alcohol, a controlled substance, or	1112
marihuana, such as but not limited to slurred speech; dilated	1113
pupils; odor of alcohol, a controlled substance, or marihuana;	1114
changes in affect; or dynamic mood swings;	1115
(b) A pattern of abnormal conduct, erratic or aberrant	1116
behavior, or deteriorating work performance such as frequent	1117
absenteeism, excessive tardiness, or recurrent accidents, that	1118
appears to be related to the use of alcohol, a controlled	1119
substance, or marihuana, and does not appear to be attributable	1120
to other factors;	1121
(c) The identification of an employee as the focus of a	1122
criminal investigation into unauthorized possession, use, or	1123
trafficking of a controlled substance or marihuana;	1124
(d) A report of use of alcohol, a controlled substance, or	1125
marihuana provided by a reliable and credible source;	1126
(e) Repeated or flagrant violations of the safety or work	1127
rules of the employee's employer, that are determined by the	1128
employee's supervisor to pose a substantial risk of physical	1129
injury or property damage and that appear to be related to the	1130
use of alcohol, a controlled substance, or marihuana and that do	1131
not appear attributable to other factors.	1132
(D) Nothing in this section shall be construed to affect	1133
the rights of an employer to test employees for alcohol or	1134
controlled substance abuse.	1135
(E) For the purpose of this section, laboratories	1136
certified by the United States department of health and human	1137
services or laboratories that meet or exceed the standards of	1138
that department for laboratory certification shall be used for	1139

processing the test results of a qualifying chemical test.

(F) The written notice required by division (B) of this

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section shall be the same size or larger than the proof of

1142
workers' compensation coverage furnished by the bureau of

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workers' compensation and shall be posted by the employer in the

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same location as the proof of workers' compensation coverage or

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the certificate of self-insurance.

- (G) If a condition that pre-existed an injury is

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  substantially aggravated by the injury, and that substantial
  1148
  aggravation is documented by objective diagnostic findings,
  1149
  objective clinical findings, or objective test results, no
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  compensation or benefits are payable because of the pre-existing
  1151
  condition once that condition has returned to a level that would
  1152
  have existed without the injury.
  1153
- (H)(1) Whenever, with respect to an employee of an 1154 employer who is subject to and has complied with this chapter, 1155 there is possibility of conflict with respect to the application 1156 of workers' compensation laws because the contract of employment 1157 is entered into and all or some portion of the work is or is to 1158 be performed in a state or states other than Ohio, the employer 1159 and the employee may agree to be bound by the laws of this state 1160 or by the laws of some other state in which all or some portion 1161 of the work of the employee is to be performed. The agreement 1162 shall be in writing and shall be filed with the bureau of 1163 workers' compensation within ten days after it is executed and 1164 shall remain in force until terminated or modified by agreement 1165 of the parties similarly filed. If the agreement is to be bound 1166 by the laws of this state and the employer has complied with 1167 this chapter, then the employee is entitled to compensation and 1168 benefits regardless of where the injury occurs or the disease is 1169

contracted and the rights of the employee and the employee's	11/0
dependents under the laws of this state are the exclusive remedy	1171
against the employer on account of injury, disease, or death in	1172
the course of and arising out of the employee's employment. If	1173
the agreement is to be bound by the laws of another state and	1174
the employer has complied with the laws of that state, the	1175
rights of the employee and the employee's dependents under the	1176
laws of that state are the exclusive remedy against the employer	1177
on account of injury, disease, or death in the course of and	1178
arising out of the employee's employment without regard to the	1179
place where the injury was sustained or the disease contracted.	1180
If an employer and an employee enter into an agreement under	1181
this division, the fact that the employer and the employee	1182
entered into that agreement shall not be construed to change the	1183
status of an employee whose continued employment is subject to	1184
the will of the employer or the employee, unless the agreement	1185
contains a provision that expressly changes that status.	1186

- (2) If an employee or the employee's dependents receive an 1187 award of compensation or benefits under this chapter or Chapter 1188 4121., 4127., or 4131. of the Revised Code for the same injury, 1189 occupational disease, or death for which the employee or the 1190 employee's dependents previously pursued or otherwise elected to 1191 accept workers' compensation benefits and received a decision on 1192 the merits as defined in section 4123.542 of the Revised Code 1193 under the laws of another state or recovered damages under the 1194 laws of another state, the claim shall be disallowed and the 1195 administrator or any self-insuring employer, by any lawful 1196 means, may collect from the employee or the employee's 1197 dependents any of the following: 1198
- (a) The amount of compensation or benefits paid to or on 1199 behalf of the employee or the employee's dependents by the 1200

administrator or a self-insuring employer pursuant to this	1201
chapter or Chapter 4121., 4127., or 4131. of the Revised Code	1202
for that award;	1203
(b) Any interest, attorney's fees, and costs the	1204
administrator or the self-insuring employer incurs in collecting	1205
that payment.	1206
(3) If an employee or the employee's dependents receive an	1207
award of compensation or benefits under this chapter or Chapter	1208
4121., 4127., or 4131. of the Revised Code and subsequently	1209
pursue or otherwise elect to accept workers' compensation	1210
benefits or damages under the laws of another state for the same	1211
injury, occupational disease, or death the claim under this	1212
chapter or Chapter 4121., 4127., or 4131. of the Revised Code	1213
shall be disallowed. The administrator or a self-insuring	1214
employer, by any lawful means, may collect from the employee or	1215
the employee's dependents or other-states' insurer any of the	1216
following:	1217
(a) The amount of compensation or benefits paid to or on	1218
behalf of the employee or the employee's dependents by the	1219
administrator or the self-insuring employer pursuant to this	1220
chapter or Chapter 4121., 4127., or 4131. of the Revised Code	1221
for that award;	1222
(b) Any interest, costs, and attorney's fees the	1223
administrator or the self-insuring employer incurs in collecting	1224
that payment;	1225
(c) Any costs incurred by an employer in contesting or	1226
responding to any claim filed by the employee or the employee's	1227
dependents for the same injury, occupational disease, or death	1228
that was filed after the original claim for which the employee	1229

or the employee's dependents received a decision on the merits 1230 as described in section 4123.542 of the Revised Code. 1231

- (4) If the employee's employer pays premiums into the 1232 state insurance fund, the administrator shall not charge the 1233 amount of compensation or benefits the administrator collects 1234 pursuant to division (H)(2) or (3) of this section to the 1235 employer's experience. If the administrator collects any costs 1236 incurred by an employer in contesting or responding to any claim 1237 pursuant to division (H)(2) or (3) of this section, the 1238 administrator shall forward the amount collected to that 1239 1240 employer. If the employee's employer is a self-insuring employer, the self-insuring employer shall deduct the amount of 1241 compensation or benefits the self-insuring employer collects 1242 pursuant to this division from the paid compensation the self-1243 insuring employer reports to the administrator under division 1244 (L) of section 4123.35 of the Revised Code. 1245
- (5) If an employee is a resident of a state other than 1246 this state and is insured under the workers' compensation law or 1247 similar laws of a state other than this state, the employee and 1248 the employee's dependents are not entitled to receive 1249 compensation or benefits under this chapter, on account of 1250 injury, disease, or death arising out of or in the course of 1251 employment while temporarily within this state, and the rights 1252 of the employee and the employee's dependents under the laws of 1253 the other state are the exclusive remedy against the employer on 1254 account of the injury, disease, or death. 1255
- (6) An employee, or the dependent of an employee, who 1256 elects to receive compensation and benefits under this chapter 1257 or Chapter 4121., 4127., or 4131. of the Revised Code for a 1258 claim may not receive compensation and benefits under the 1259

workers' compensation laws of any state other than this state 1260 for that same claim. For each claim submitted by or on behalf of 1261 an employee, the administrator or, if the employee is employed 1262 by a self-insuring employer, the self-insuring employer, shall 1263 request the employee or the employee's dependent to sign an 1264 election that affirms the employee's or employee's dependent's 1265 acceptance of electing to receive compensation and benefits 1266 under this chapter or Chapter 4121., 4127., or 4131. of the 1267 Revised Code for that claim that also affirmatively waives and 1268 releases the employee's or the employee's dependent's right to 1269 file for and receive compensation and benefits under the laws of 1270 any state other than this state for that claim. The employee or 1271 employee's dependent shall sign the election form within twenty-1272 eight days after the administrator or self-insuring employer 1273 submits the request or the administrator or self-insuring 1274 employer shall dismiss that claim. 1275

In the event a workers' compensation claim has been filed 1276 in another jurisdiction on behalf of an employee or the 1277 dependents of an employee, and the employee or dependents 1278 subsequently elect to receive compensation, benefits, or both 1279 under this chapter or Chapter 4121., 4127., or 4131. of the 1280 Revised Code, the employee or dependent shall withdraw or refuse 1281 acceptance of the workers' compensation claim filed in the other 1282 jurisdiction in order to pursue compensation or benefits under 1283 the laws of this state. If the employee or dependents were 1284 awarded workers' compensation benefits or had recovered damages 1285 under the laws of the other state, any compensation and benefits 1286 awarded under this chapter or Chapter 4121., 4127., or 4131. of 1287 the Revised Code shall be paid only to the extent to which those 1288 payments exceed the amounts paid under the laws of the other 1289 state. If the employee or dependent fails to withdraw or to 1290

refuse acceptance of the workers' compensation claim in the	1291
other jurisdiction within twenty-eight days after a request made	1292
by the administrator or a self-insuring employer, the	1293
administrator or self-insuring employer shall dismiss the	1294
employee's or employee's dependents' claim made in this state.	1295

- (I) If an employee who is covered under the federal 1296 "Longshore and Harbor Workers' Compensation Act," 98 Stat. 1639, 1297 33 U.S.C. 901 et seq., is injured or contracts an occupational 1298 disease or dies as a result of an injury or occupational 1299 disease, and if that employee's or that employee's dependents' 1300 claim for compensation or benefits for that injury, occupational 1301 disease, or death is subject to the jurisdiction of that act, 1302 the employee or the employee's dependents are not entitled to 1303 apply for and shall not receive compensation or benefits under 1304 this chapter and Chapter 4121. of the Revised Code. The rights 1305 of such an employee and the employee's dependents under the 1306 federal "Longshore and Harbor Workers' Compensation Act," 98 1307 Stat. 1639, 33 U.S.C. 901 et seq., are the exclusive remedy 1308 against the employer for that injury, occupational disease, or 1309 death. 1310
- (J) Compensation or benefits are not payable to a claimant

  or a dependent during the period of confinement of the claimant

  or dependent in any state or federal correctional institution,

  or in any county jail in lieu of incarceration in a state or

  federal correctional institution, whether in this or any other

  state for conviction of violation of any state or federal

  1316

  criminal law.
- (K) An employer, upon the approval of the administrator,may provide for workers' compensation coverage for theemployer's employees who are professional athletes and coaches1320

by submitting to the administrator proof of coverage under a	1321
league policy issued under the laws of another state under	1322
either of the following circumstances:	1323
(1) The employer administers the payroll and workers'	1324
compensation insurance for a professional sports team subject to	1325
a collective bargaining agreement, and the collective bargaining	1326
agreement provides for the uniform administration of workers'	1327
compensation benefits and compensation for professional	1328
athletes.	1329
(2) The employer is a professional sports league, or is a	1330
member team of a professional sports league, and all of the	1331
following apply:	1332
(a) The professional sports league operates as a single	1333
entity, whereby all of the players and coaches of the sports	1334
league are employees of the sports league and not of the	1335
individual member teams.	1336
(b) The professional sports league at all times maintains	1337
workers' compensation insurance that provides coverage for the	1338
players and coaches of the sports league.	1339
(c) Each individual member team of the professional sports	1340
league, pursuant to the organizational or operating documents of	1341
the sports league, is obligated to the sports league to pay to	1342
the sports league any workers' compensation claims that are not	1343
covered by the workers' compensation insurance maintained by the	1344
sports league.	1345
If the administrator approves the employer's proof of	1346
coverage submitted under division (K) of this section, a	1347
professional athlete or coach who is an employee of the employer	1348
and the dependents of the professional athlete or coach are not	1349

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entitled to apply for and shall not receive compensation or	1350
benefits under this chapter and Chapter 4121. of the Revised	1351
Code. The rights of such an athlete or coach and the dependents	1352
of such an athlete or coach under the laws of the state where	1353
the policy was issued are the exclusive remedy against the	1354
employer for the athlete or coach if the athlete or coach	1355
suffers an injury or contracts an occupational disease in the	1356
course of employment, or for the dependents of the athlete or	1357
the coach if the athlete or coach is killed as a result of an	1358
injury or dies as a result of an occupational disease,	1359
regardless of the location where the injury was suffered or the	1360
occupational disease was contracted.	1361

Sec. 4123.57. Partial disability compensation shall be paid as follows.

Except as provided in this section, not earlier than 1364 twenty-six weeks after the date of termination of the latest 1365 period of payments under section 4123.56 of the Revised Code or 1366 twenty-six weeks after the termination of wages in lieu of those 1367 payments, or not earlier than twenty-six weeks after the date of 1368 the injury or contraction of an occupational disease in the 1369 absence of payments under section 4123.56 of the Revised Code or 1370 wages in lieu of those payments, the employee may file an 1371 application with the bureau of workers' compensation for the 1372 determination of the percentage of the employee's permanent 1373 partial disability resulting from an injury or occupational 1374 disease. 1375

Whenever the application is filed, the bureau shall send a 1376 copy of the application to the employee's employer or the 1377 employer's representative and shall schedule the employee for a 1378 medical examination by the bureau medical section. The bureau 1379

shall send a copy of the report of the medical examination to	1380
the employee, the employer, and their representatives.	1381
Thereafter, the administrator of workers' compensation shall	1382
review the employee's claim file and make a tentative order as	1383
the evidence before the administrator at the time of the making	1384
of the order warrants. If the administrator determines that	1385
there is a conflict of evidence, the administrator shall send	1386
the application, along with the claimant's file, to the district	1387
hearing officer who shall set the application for a hearing.	1388

If an employee fails to respond to an attempt to schedule 1389 a medical examination by the bureau medical section, or fails to 1390 attend a medical examination scheduled under this section 1391 without notice or explanation, the employee's application for a 1392 finding shall be dismissed without prejudice. The employee may 1393 refile the application. A dismissed application does not toll 1394 the continuing jurisdiction of the industrial commission under 1395 section 4123.52 of the Revised Code. The administrator shall 1396 adopt rules addressing the manner in which an employee will be 1397 notified of a possible dismissal and how an employee may refile 1398 an application for a determination. 1399

The administrator shall notify the employee, the employer, 1400 and their representatives, in writing, of the tentative order 1401 and of the parties' right to request a hearing. Unless the 1402 employee, the employer, or their representative notifies the 1403 administrator, in writing, of an objection to the tentative 1404 order within twenty days after receipt of the notice thereof, 1405 the tentative order shall go into effect and the employee shall 1406 receive the compensation provided in the order. In no event 1407 shall there be a reconsideration of a tentative order issued 1408 under this division. 1409

If the employee, the employer, or their representatives	1410
timely notify the administrator of an objection to the tentative	1411
order, the matter shall be referred to a district hearing	1412
officer who shall set the application for hearing with written	1413
notices to all interested persons. Upon referral to a district	1414
hearing officer, the employer may obtain a medical examination	1415
of the employee, pursuant to rules of the industrial commission.	1416

(A) The district hearing officer, upon the application, 1417 shall determine the percentage of the employee's permanent 1418 disability, except as is subject to division (B) of this 1419 1420 section, based upon that condition of the employee resulting from the injury or occupational disease and causing permanent 1421 impairment evidenced by medical or clinical findings reasonably 1422 demonstrable. The employee shall receive sixty-six and two-1423 thirds per cent of the employee's average weekly wage, but not 1424 more than a maximum of thirty-three and one-third per cent of 1425 the statewide average weekly wage as defined in division (C) of 1426 section 4123.62 of the Revised Code, per week regardless of the 1427 average weekly wage, for the number of weeks which equals the 1428 percentage of two hundred weeks. Except on application for 1429 reconsideration, review, or modification, which is filed within 1430 ten days after the date of receipt of the decision of the 1431 district hearing officer, in no instance shall the former award 1432 be modified unless it is found from medical or clinical findings 1433 that the condition of the claimant resulting from the injury has 1434 so progressed as to have increased the percentage of permanent 1435 partial disability. A staff hearing officer shall hear an 1436 application for reconsideration filed and the staff hearing 1437 officer's decision is final. An employee may file an application 1438 for a subsequent determination of the percentage of the 1439 employee's permanent disability. If such an application is 1440

filed, the bureau shall send a copy of the application to the	1441
employer or the employer's representative. No sooner than sixty	1442
days from the date of the mailing of the application to the	1443
employer or the employer's representative, the administrator	1444
shall review the application. The administrator may require a	1445
medical examination or medical review of the employee. The	1446
administrator shall issue a tentative order based upon the	1447
evidence before the administrator, provided that if the	1448
administrator requires a medical examination or medical review,	1449
the administrator shall not issue the tentative order until the	1450
completion of the examination or review.	1451

The employer may obtain a medical examination of the 1452 employee and may submit medical evidence at any stage of the 1453 process up to a hearing before the district hearing officer, 1454 pursuant to rules of the commission. The administrator shall 1455 notify the employee, the employer, and their representatives, in 1456 writing, of the nature and amount of any tentative order issued 1457 on an application requesting a subsequent determination of the 1458 percentage of an employee's permanent disability. An employee, 1459 employer, or their representatives may object to the tentative 1460 order within twenty days after the receipt of the notice 1461 thereof. If no timely objection is made, the tentative order 1462 shall go into effect. In no event shall there be a 1463 reconsideration of a tentative order issued under this division. 1464 If an objection is timely made, the application for a subsequent 1465 determination shall be referred to a district hearing officer 1466 who shall set the application for a hearing with written notice 1467 to all interested persons. No application for subsequent 1468 percentage determinations on the same claim for injury or 1469 occupational disease shall be accepted for review by the 1470 district hearing officer unless supported by substantial 1471

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evidence of new and changed circumstances developing since the	1472
time of the hearing on the original or last determination.	1473
No award shall be made under this division based upon a	1474
-	
percentage of disability which, when taken with all other	1475
percentages of permanent disability, exceeds one hundred per	1476
cent. If the percentage of the permanent disability of the	1477
employee equals or exceeds ninety per cent, compensation for	1478
permanent partial disability shall be paid for two hundred	1479
weeks.	1480
Compensation payable under this division accrues and is	1481
payable to the employee from the date of last payment of	1482
compensation, or, in cases where no previous compensation has	1483
been paid, from the date of the injury or the date of the	1484
diagnosis of the occupational disease.	1485
When an award under this division has been made prior to	1486
the death of an employee, all unpaid installments accrued or to	1487
accrue under the provisions of the award are payable to the	1488
surviving spouse, or if there is no surviving spouse, to the	1489
dependent children of the employee, and if there are no children	1490
surviving, then to other dependents as the administrator	1491
determines.	1492
(B) For purposes of this division, "payable per week"	1493
(b) For purposes of chis division, payable per week	エサブン

Compensation paid in weekly installments according to the 1497 schedule described in this division may only be commuted to one 1498 or more lump sum payments pursuant to the procedure set forth in 1499 section 4123.64 of the Revised Code. 1500

means the seven-consecutive-day period in which compensation is

paid in installments according to the schedule associated with

the applicable injury as set forth in this division.

In cases included in the following schedule the	1501
compensation payable per week to the employee is the statewide	1502
average weekly wage as defined in division (C) of section	1503
4123.62 of the Revised Code per week and shall be paid in	1504
installments according to the following schedule:	1505
For the loss of a first finger, commonly known as a thumb,	1506
sixty weeks.	1507
For the loss of a second finger, commonly called index	1508
finger, thirty-five weeks.	1509
ringer, entrey rive weeks.	1009
For the loss of a third finger, thirty weeks.	1510
For the loss of a fourth finger, twenty weeks.	1511
For the loss of a fifth finger, commonly known as the	1512
little finger, fifteen weeks.	1513
The loss of a second, or distal, phalange of the thumb is	1514
considered equal to the loss of one half of such thumb; the loss	1515
of more than one half of such thumb is considered equal to the	1516
loss of the whole thumb.	1517
The loss of the third, or distal, phalange of any finger	1518
is considered equal to the loss of one-third of the finger.	1519
The loss of the middle, or second, phalange of any finger	1520
is considered equal to the loss of two-thirds of the finger.	1521
The loss of more than the middle and distal phalanges of	1522
any finger is considered equal to the loss of the whole finger.	1523
In no case shall the amount received for more than one finger	1524
exceed the amount provided in this schedule for the loss of a	1525
hand.	1526
For the loss of the metacarpal bone (bones of the palm)	1527

for the corresponding thumb, or fingers, add ten weeks to the	1528
number of weeks under this division.	1529
For ankylosis (total stiffness of) or contractures (due to	1530
scars or injuries) which makes any of the fingers, thumbs, or	1531
parts of either useless, the same number of weeks apply to the	1532
members or parts thereof as given for the loss thereof.	1533
	1504
If the claimant has suffered the loss of two or more	1534
fingers by amputation or ankylosis and the nature of the	1535
claimant's employment in the course of which the claimant was	1536
working at the time of the injury or occupational disease is	1537
such that the impairment or disability resulting from the loss	1538
of fingers, or loss of use of fingers, exceeds the normal	1539
impairment or disability resulting from the loss of fingers, or	1540
loss of use of fingers, the administrator may take that fact	1541
into consideration and increase the award of compensation	1542
accordingly, but the award made shall not exceed the amount of	1543
compensation for loss of a hand.	1544
For the loss of a hand, one hundred seventy-five weeks.	1545
For the loss of an arm, two hundred twenty-five weeks.	1546
For the loss of a great toe, thirty weeks.	1547
For the loss of one of the toes other than the great toe,	1548
ten weeks.	1549
The loss of more than two-thirds of any toe is considered	1550
equal to the loss of the whole toe.	1551
The loss of less than two-thirds of any toe is considered	1552
no loss, except as to the great toe; the loss of the great toe	1553
up to the interphalangeal joint is co-equal to the loss of one-	1554
	1

half of the great toe; the loss of the great toe beyond the

whole great toe.	1557
For the loss of a foot, one hundred fifty weeks.	1558
For the loss of a leg, two hundred weeks.	1559
For the loss of the sight of an eye, one hundred twenty-	1560
five weeks.	1561
For the permanent partial loss of sight of an eye, the	1562
portion of one hundred twenty-five weeks as the administrator in	1563
each case determines, based upon the percentage of vision	1564
actually lost as a result of the injury or occupational disease,	1565
but, in no case shall an award of compensation be made for less	1566
than twenty-five per cent loss of uncorrected vision. "Loss of	1567
uncorrected vision" means the percentage of vision actually lost	1568
as the result of the injury or occupational disease.	1569
For the permanent and total loss of hearing of one ear,	1570
twenty-five weeks; but in no case shall an award of compensation	1571
be made for less than permanent and total loss of hearing of one	1572
ear.	1573
For the permanent and total loss of hearing, one hundred	1574
twenty-five weeks; but, except pursuant to the next preceding	1575
paragraph, in no case shall an award of compensation be made for	1576
less than permanent and total loss of hearing.	1577
In case an injury or occupational disease results in	1578
serious facial or head disfigurement which either impairs or may	1579
in the future impair the opportunities to secure or retain	1580
employment, the administrator shall make an award of	1581
compensation as it deems proper and equitable, in view of the	1582
nature of the disfigurement, and not to exceed the sum of ten	1583
thousand dollars. For the purpose of making the award, it is not	1584

interphalangeal joint is considered equal to the loss of the

material whether the employee is gainfully employed in any	1585
occupation or trade at the time of the administrator's	1586
determination.	1587

When an award under this division has been made prior to

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the death of an employee all unpaid installments accrued or to

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accrue under the provisions of the award shall be payable to the

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surviving spouse, or if there is no surviving spouse, to the

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dependent children of the employee and if there are no such

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children, then to such dependents as the administrator

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determines.

When an employee has sustained the loss of a member by 1595 severance, but no award has been made on account thereof prior 1596 to the employee's death, the administrator shall make an award 1597 in accordance with this division for the loss which shall be 1598 payable to the surviving spouse, or if there is no surviving 1599 spouse, to the dependent children of the employee and if there 1600 are no such children, then to such dependents as the 1601 administrator determines. 1602

(C) Compensation for partial impairment under divisions 1603

(A) and (B) of this section is in addition to the compensation 1604

paid the employee pursuant to section 4123.56 of the Revised 1605

Code. A claimant may receive compensation under divisions (A) 1606

and (B) of this section. 1607

In all cases arising under division (B) of this section,

if it is determined by any one of the following: (1) the amputee

clinic at University hospital, Ohio state university; (2) the

opportunities for Ohioans with disabilities agency; (3) an

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amputee clinic or prescribing physician approved by the

administrator or the administrator's designee, that an injured

or disabled employee is in need of an artificial appliance, or

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in need of a repair thereof, regardless of whether the appliance	1615
or its repair will be serviceable in the vocational	1616
rehabilitation of the injured employee, and regardless of	1617
whether the employee has returned to or can ever again return to	1618
any gainful employment, the bureau shall pay the cost of the	1619
artificial appliance or its repair out of the surplus created by	1620
division (B) of section 4123.34 of the Revised Code.	1621

Notwithstanding any provision in this division to the 1622 contrary, when a claimant has sustained an amputation or a loss 1623 1624 enumerated in division (B) of this section as a result of an injury or occupational disease, the administrator shall pay the 1625 cost to purchase, repair, or replace a prosthetic device as 1626 defined in division (B) of section 4123.52 from the surplus fund 1627 account created pursuant to division (B) of section 4123.34 of 1628 the Revised Code, even if no award has been made under division 1629 1630 (B) of this section.

In those cases where an opportunities for Ohioans with 1631 disabilities agency's recommendation that an injured or disabled 1632 employee is in need of an artificial appliance would conflict 1633 with their state plan, adopted pursuant to the "Rehabilitation 1634 Act of 1973," 87 Stat. 355, 29 U.S.C.A. 701, the administrator 1635 or the administrator's designee or the bureau may obtain a 1636 recommendation from an amputee clinic or prescribing physician 1637 1638 that they determine appropriate.

(D) If an employee of a state fund employer makes

application for a finding and the administrator finds that the

employee has contracted silicosis as defined in division (Y), or

coal miners' pneumoconiosis as defined in division (Z), or

asbestosis as defined in division (BB) of section 4123.68 of the

Revised Code, and that a change of such employee's occupation is

1649

medically advisable in order to decrease substantially further	1645
exposure to silica dust, asbestos, or coal dust and if the	1646
employee, after the finding, has changed or shall change the	1647
employee's occupation to an occupation in which the exposure to	1648
silica dust, asbestos, or coal dust is substantially decreased,	1649
the administrator shall allow to the employee an amount equal to	1650
fifty per cent of the statewide average weekly wage per week for	1651
a period of thirty weeks, commencing as of the date of the	1652
discontinuance or change, and for a period of one hundred weeks	1653
immediately following the expiration of the period of thirty	1654
weeks, the employee shall receive sixty-six and two-thirds per	1655
cent of the loss of wages resulting directly and solely from the	1656
change of occupation but not to exceed a maximum of an amount	1657
equal to fifty per cent of the statewide average weekly wage per	1658
week. No such employee is entitled to receive more than one	1659
allowance on account of discontinuance of employment or change	1660
of occupation and benefits shall cease for any period during	1661
which the employee is employed in an occupation in which the	1662
exposure to silica dust, asbestos, or coal dust is not	1663
substantially less than the exposure in the occupation in which	1664
the employee was formerly employed or for any period during	1665
which the employee may be entitled to receive compensation or	1666
benefits under section 4123.68 of the Revised Code on account of	1667
disability from silicosis, asbestosis, or coal miners'	1668
pneumoconiosis. An award for change of occupation for a coal	1669
miner who has contracted coal miners' pneumoconiosis may be	1670
granted under this division even though the coal miner continues	1671
employment with the same employer, so long as the coal miner's	1672
employment subsequent to the change is such that the coal	1673
miner's exposure to coal dust is substantially decreased and a	1674
change of occupation is certified by the claimant as permanent.	1675
The administrator may accord to the employee medical and other	1676

benefits in accordance with section 4123.66 of the Revised Code. 1677

(E) If a firefighter or police officer makes application	1678
for a finding and the administrator finds that the firefighter	1679
or police officer has contracted a cardiovascular and pulmonary	1680
disease as defined in division (W) of section 4123.68 of the	1681
Revised Code, and that a change of the firefighter's or police	1682
officer's occupation is medically advisable in order to decrease	1683
substantially further exposure to smoke, toxic gases, chemical	1684
fumes, and other toxic vapors, and if the firefighter, or police	1685
officer, after the finding, has changed or changes occupation to	1686
an occupation in which the exposure to smoke, toxic gases,	1687
chemical fumes, and other toxic vapors is substantially	1688
decreased, the administrator shall allow to the firefighter or	1689
police officer an amount equal to fifty per cent of the	1690
statewide average weekly wage per week for a period of thirty	1691
weeks, commencing as of the date of the discontinuance or	1692
change, and for a period of seventy-five weeks immediately	1693
following the expiration of the period of thirty weeks the	1694
administrator shall allow the firefighter or police officer	1695
sixty-six and two-thirds per cent of the loss of wages resulting	1696
directly and solely from the change of occupation but not to	1697
exceed a maximum of an amount equal to fifty per cent of the	1698
statewide average weekly wage per week. No such firefighter or	1699
police officer is entitled to receive more than one allowance on	1700
account of discontinuance of employment or change of occupation	1701
and benefits shall cease for any period during which the	1702
firefighter or police officer is employed in an occupation in	1703
which the exposure to smoke, toxic gases, chemical fumes, and	1704
other toxic vapors is not substantially less than the exposure	1705
in the occupation in which the firefighter or police officer was	1706
formerly employed or for any period during which the firefighter	1707

or police officer may be entitled to receive compensation or	1708
benefits under section 4123.68 of the Revised Code on account of	1709
disability from a cardiovascular and pulmonary disease. The	1710
administrator may accord to the firefighter or police officer	1711
medical and other benefits in accordance with section 4123.66 of	1712
the Revised Code.	1713

(F) An order issued under this section is appealable 1714 pursuant to section 4123.511 of the Revised Code but is not 1715 appealable to court under section 4123.512 of the Revised Code. 1716

Sec. 4123.66. (A) In addition to the compensation provided 1717 for in this chapter, the administrator of workers' compensation 1718 shall disburse and pay from the state insurance fund the amounts 1719 for medical, nurse, and hospital services and medicine as the 1720 administrator deems proper and, in case death ensues from the 1721 injury or occupational disease, the administrator shall disburse 1722 and pay from the fund reasonable funeral expenses in an amount 1723 not to exceed seven thousand five hundred dollars. The bureau of 1724 workers' compensation shall reimburse anyone, whether dependent, 1725 volunteer, or otherwise, who pays the funeral expenses of any 1726 employee whose death ensues from any injury or occupational 1727 disease as provided in this section. The administrator may adopt 1728 rules, with the advice and consent of the bureau of workers' 1729 compensation board of directors, with respect to furnishing 1730 medical, nurse, and hospital service and medicine to injured or 1731 disabled employees entitled thereto, and for the payment 1732 therefor. In case an injury or industrial accident that injures 1733 an employee also causes damage to the employee's eyeglasses, 1734 artificial teeth or other denture, or hearing aid, or in the 1735 event an injury or occupational disease makes it necessary or 1736 advisable to replace, repair, or adjust the same, the bureau 1737 shall disburse and pay a reasonable amount to repair or replace 1738

the same. 1739

(B) The administrator, in the rules the administrator 1740 adopts pursuant to division (A) of this section, may adopt rules 1741 specifying the circumstances under which the bureau may make 1742 immediate payment for the first fill of prescription drugs for 1743 medical conditions identified in an application for compensation 1744 or benefits under section 4123.84 or 4123.85 of the Revised Code 1745 that occurs prior to the date the administrator issues an 1746 initial determination order under division (B) of section 1747 4123.511 of the Revised Code. If the claim is ultimately 1748 disallowed in a final administrative or judicial order, and if 1749 the employer is a state fund employer who pays assessments into 1750 the surplus fund account created under section 4123.34 of the 1751 Revised Code, the payments for medical services made pursuant to 1752 this division for the first fill of prescription drugs shall be 1753 charged to and paid from the surplus fund account and not 1754 charged through the state insurance fund to the employer against 1755 whom the claim was filed. 1756

(C)(1) If an employer or a welfare plan has provided to or 1757 on behalf of an employee any benefits or compensation for an 1758 injury or occupational disease and that injury or occupational 1759 1760 disease is determined compensable under this chapter, the employer or a welfare plan may request that the administrator 1761 reimburse the employer or welfare plan for the amount the 1762 employer or welfare plan paid to or on behalf of the employee in 1763 compensation or benefits. The administrator shall reimburse the 1764 employer or welfare plan for the compensation and benefits paid 1765 if, at the time the employer or welfare plan provides the 1766 benefits or compensation to or on behalf of employee, the injury 1767 or occupational disease had not been determined to be 1768 compensable under this chapter and if the employee was not 1769

receiving compensation or benefits under this chapter for that	1770
injury or occupational disease. The administrator shall	1771
reimburse the employer or welfare plan in the amount that the	1772
administrator would have paid to or on behalf of the employee	1773
under this chapter if the injury or occupational disease	1774
originally would have been determined compensable under this	1775
chapter. If the employer is a merit-rated employer, the	1776
administrator shall adjust the amount of premium next due from	1777
the employer according to the amount the administrator pays the	1778
employer. The administrator shall adopt rules, in accordance	1779
with Chapter 119. of the Revised Code, to implement this	1780
division.	1781
(2) As used in this division, "welfare plan" has the same	1782
meaning as in division (1) of 29 U.S.C.A. 1002.	1783
(D)(1) Subject to the requirements of division (D)(2) of	1784
this section, the administrator may make a payment of up to five	1785
hundred dollars to either of the following:	1786
(a) The centers of medicare and medicaid services, for	1787
reimbursement of conditional payments made pursuant to the	1788
"Medicare Secondary Payer Act," 42 U.S.C. 1395y;	1789
(b) The Ohio department of medicaid, or a medical	1790
assistance provider to whom the department has assigned a right	1791
of recovery for a claim for which the department has notified	1792
the provider that the department intends to recoup the	1793
department's prior payment for the claim, for reimbursement	1794
under sections 5160.35 to 5160.43 of the Revised Code for the	1795
cost of medical assistance paid on behalf of a medical	1796
assistance recipient.	1797

(2) The administrator may make a payment under division

(D)(1) of this section if the administrator makes a reasonable	1799
determination that <a href="both-all">both-all</a> of the following apply:	1800
(a) The payment is for reimbursement of benefits for an-	1801
injury or occupational disease in response to a request from a	1802
party listed in division (D)(1) of this section.	1803
(b) The-There is an injury or occupational disease that is	1804
compensable, or is likely to be compensable, under this chapter	1805
or Chapter 4121., 4127., or 4131. of the Revised Code.	1806
(c) The payment will resolve the request from a party	1807
listed in division (D)(1) of this section.	1808
(3) Any payment made pursuant to this division shall be	1809
charged to and paid from the surplus fund account created under	1810
section 4123.34 of the Revised Code.	1811
(4) Nothing in this division shall be construed as	1812
limiting the centers of medicare and medicaid services, the	1813
department, or any other entity with a lawful right to	1814
reimbursement from recovering sums greater than five hundred	1815
dollars.	1816
(5) The administrator may adopt rules, with the advice and	1817
consent of the bureau of workers' compensation board of	1818
directors, to implement this division.	1819
Sec. 4125.07. (A) As used in this section, "self-insuring	1820
employer" has the same meaning as in section 4123.01 of the	1821
Revised Code.	1822
(B) Not later than thirty calendar days after the date on	1823
which a professional employer organization agreement is	1824
terminated, the professional employer organization is adjudged	1825
bankrupt, the professional employer organization ceases	1826

operations within the state of Ohio, or the registration of the	1827
professional employer organization is revoked, the professional	1828
employer organization shall submit to the administrator of	1829
workers' compensation and each client employer associated with	1830
that professional employer organization a completed workers'	1831
compensation lease termination notice form provided by the	1832
administrator. The If a professional employer organization is	1833
not a self-insuring employer, the completed form shall include	1834
all client payroll and claim information listed in a format	1835
specified by the administrator and notice of all workers'	1836
compensation claims that have been reported to the professional	1837
employer organization in accordance with its internal reporting	1838
policies.	1839
(C)(1) If a professional employer organization that is a	1840
self-insuring employer is required to submit a workers!	1841
compensation lease termination notice form under division (B) of	1842
this section, not later than thirty calendar days after the	1843
lease termination the professional employer organization shall	1844
submit all of the following to the administrator for any years	1845
necessary for the administrator to develop a state fund	1846
experience modification factor for each client employer involved	1847
in the lease termination:	
in the lease termination:	1848
(a) The payroll of each client employer involved in the	1849
lease termination, organized by manual classification and year;	1850
(b) The medical and indemnity costs of each client	1851
employer involved in the lease termination, organized by claim;	1852
(c) Any other information the administrator may require to	1853
develop a state fund experience modification factor for each	1854
client employer involved in the lease termination.	1855

(2) The administrator may require a professional employer	1856
organization to submit the information required under division-	1857
(C) (1) of this section at additional times after the initial	1858
submission if the administrator determines that the information-	1859
is necessary for the administrator to develop a state fund-	1860
experience modification factor.	1861
(3) The administrator may revoke or refuse to renew a	1862
professional employer organization's status as a self-insuring	1863
employer if the professional employer organization fails to	1864
provide information requested by the administrator under-	1865
division (C) (1) or (2) of this section.	1866
(D) The administrator shall use the information provided	1867
	1868
under division (C) of this section to develop a state fund	
experience modification factor for each client employer involved	1869
in a lease termination with a professional employer organization	1870
that is a self-insuring employer.	1871
(E)(C) A professional employer organization shall report	1872
any transfer of employees between related professional employer	1873
organization entities or professional employer organization	1874
reporting entities to the administrator within fourteen calendar	1875
days after the date of the transfer on a form prescribed by the	1876
administrator. The If the professional employer organization is	1877
not a self-insuring employer, the professional employer	1878
organization or professional employer organization reporting	1879
entity shall include in the form all client payroll and claim	1880
information regarding the transferred employees listed in a	1881
format specified by the administrator and a notice of all	1882
workers' compensation claims that have been reported to the	1883
professional employer organization or professional employer	1884
	100-

organization reporting entity in accordance with the internal

reporting policies of	the professional employer organization or	1886
professional employer	organization reporting entity.	1887

- (F) Prior to entering into a professional employer 1888 organization agreement with a client employer, a professional 1889 employer organization shall disclose in writing to the client 1890 employer the reporting requirements that apply to the 1891 professional employer organization under division (C) of this 1892 section and that the administrator must develop a state fund 1893 experience modification factor for each client employer involved 1894 in a lease termination with a professional employer organization 1895 that is a self-insuring employer. 1896
- Sec. 4133.10. (A) As used in this section, "self-insuring 1897 employer" has the same meaning as in section 4123.01 of the 1898 Revised Code.
- (B) Not later than thirty calendar days after the date on 1900 which an alternate employer organization agreement is 1901 terminated, the alternate employer organization is adjudged 1902 bankrupt, the alternate employer organization ceases operations 1903 within the state of Ohio, or the registration of the alternate 1904 employer organization is revoked, the alternate employer 1905 organization shall submit to the administrator of workers' 1906 compensation and each client employer associated with that 1907 alternate employer organization a completed workers' 1908 compensation lease termination notice form provided by the 1909 administrator. The—If an alternate employer organization is not 1910 a self-insuring employer, the completed form shall include all 1911 client payroll and claim information listed in a format 1912 specified by the administrator and notice of all workers' 1913 compensation claims that have been reported to the alternate 1914 employer organization in accordance with its internal reporting 1915

policies.	1916
(C)(1) If a alternate employer organization that is a	1917
self-insuring employer is required to submit a workers!	1918
compensation lease termination notice form under division (B) of	1919
this section, not later than thirty calendar days after the	1920
lease termination the alternate employer organization shall-	1921
submit all of the following to the administrator for any years-	1922
necessary for the administrator to develop a state fund	1923
experience modification factor for each client employer involved	1924
in the lease termination:	1925
(a) The payroll of each client employer involved in the	1926
lease termination, organized by manual classification and year;	1927
(b) The medical and indemnity costs of each client	1928
employer involved in the lease termination, organized by claim;	1929
(c) Any other information the administrator may require to	1930
develop a state fund experience modification factor for each	1931
client employer involved in the lease termination.	1932
(2) The administrator may require an alternate employer	1933
organization to submit the information required under division-	1934
(C) (1) of this section at additional times after the initial	1935
submission if the administrator determines that the information-	1936
is necessary for the administrator to develop a state fund-	1937
experience modification factor.	1938
(3) The administrator may revoke or refuse to renew an	1939
alternate employer organization's status as a self-insuring	1940
employer if the alternate employer organization fails to provide	1941
information requested by the administrator under division (C)(1)	1942
or (2) of this section.	1943
(D) The administrator shall use the information provided	1944

under division (C) of this section to develop a state fund-	1945				
experience modification factor for each client employer involved					
in a lease termination with an alternate employer organization-					
that is a self-insuring employer.	1948				
(E)(C) An alternate employer organization shall report any	1949				
transfer of employees between related alternate employer	1950				
organization entities to the administrator within fourteen	1951				
calendar days after the date of the transfer on a form	1952				
prescribed by the administrator. The If the alternate employer	1953				
organization is not a self-insuring employer, the alternate	1954				
employer organization shall include in the form all client	1955				
payroll and claim information regarding the transferred	1956				
employees listed in a format specified by the administrator and	1957				
a notice of all workers' compensation claims that have been	1958				
reported to the alternate employer organization in accordance					
with the internal reporting policies of the alternate employer					
organization.	1961				
(F) Prior to entering into an alternate employer	1962				
organization agreement with a client employer, an alternate	1963				
employer organization shall disclose in writing to the client	1964				
employer the reporting requirements that apply to the alternate-	1965				
employer organization under division (C) of this section and	1966				
that the administrator must develop a state fund experience	1967				
modification factor for each client employer involved in a lease	1968				
termination with an alternate employer organization that is a	1969				
self-insuring employer.	1970				
Sec. 4167.01. As used in this chapter:	1971				
(A) "Public employer" means any of the following:	1972				
(1) The state and its instrumentalities;	1973				

(2) Any political subdivisions and their	1974
instrumentalities, including any county, county hospital,	1975
municipal corporation, city, village, township, park district,	1976
school district, state institution of higher learning, public or	1977
special district, state agency, authority, commission, or board;	1978
(3) Any other branch of public employment not mentioned in	1979
division (A)(1) or (2) of this section.	1980
(B) "Public employee" means any individual who engages to	1981
furnish services subject to the direction and control of a	1982
public employer, including those individuals working for a	1983
private employer who has contracted with a public employer and	1984
over whom the national labor relations board has declined	1985
jurisdiction. "Public employee" does not mean any of the	1986
following:	1987
(1) A peace officer employed by a public employer as	1988
defined in division (A)(2) of this section or any member of the	1989
organized militia ordered to duty by state authority pursuant to	1990
Chapter 5923. of the Revised Code;	1991
(2) Any person who engages to furnish services subject to	1992
the direction and control of a public employer but does not	1993
receive compensation, either directly or indirectly, for those	1994
services;	1995
(3) Any forest-fire investigator, natural resources	1996
officer, wildlife officer, or preserve officer;	1997
(4) Any person incarcerated in an alternative residential	1998
facility, community-based correctional facility, jail, halfway	1999
house, or prison, as those terms are defined in section 2929.01	2000
of the Revised Code.	2001
(C) "Public employee representative" means an employee	2002

organization certified by the state employment relations board	2003
under section 4117.05 of the Revised Code as the exclusive	2004
representative of the public employees in a bargaining unit.	2005
(D) "Employment risk reduction standard" means a standard	2006
which requires conditions, or the adoption or use of one or more	2007
practices, means, methods, operations, or processes, reasonably	2008
necessary or appropriate to provide safe and healthful	2009
employment and places of employment.	2010
(E) "Ohio employment risk reduction standard" means any	2011
risk reduction standard adopted or issued under this chapter.	2012
(F) "Undue hardship" means any requirement imposed under	2013
this chapter or a rule or order issued thereunder that would	2014
require a public employer to take an action with significant	2015
difficulty or expense when considered in light of all of the	2016
following factors:	2017
(1) The nature and cost of the action required under this	2018
chapter;	2019
(2) The overall financial resources of the public employer	2020
involved in the action;	2021
(3) The number of persons employed by the public employer	2022
at the particular location where the action may be required;	2023
(4) The effect on expenses and resources or the impact	2024
otherwise of the action required upon the operations of the	2025
public employer at the location where the action may be	2026
required;	2027
(5) The overall size of the public employer with respect	2028
to the number of its public employees;	2029
(6) The number, type, and location of the public	2030

employer's	ope	erations,	including	g the	composition,	structure,	and	2031
functions	of t	he workfo	orce of th	ne pul	olic entity;			2032

(7) The geographic separateness, administrative, or fiscal 2033 relationship of the public employer's operations to the whole 2034 public employer. 2035

Sec. 4167.10. (A) In order to carry out the purposes of 2036 this chapter, the administrator of workers' compensation or the 2037 administrator's designee shall, as provided in this section, 2038 enter without delay during normal working hours and at other 2039 2040 reasonable times, to inspect and investigate any plant, facility, establishment, construction site, or any other area, 2041 workplace, or environment where work is being performed by a 2042 public employee of a public employer, and any place of 2043 employment and all pertinent conditions, structures, machines, 2044 apparatus, devices, equipment, and materials therein, and 2045 question privately any public employer, administrator, 2046 department head, operator, agent, or public employee. The 2047 authority to inspect and investigate includes the taking of 2048 environmental samples, the taking and obtaining of photographs 2049 related to the purposes of the inspection or investigation, the 2050 examination of records required to be kept under section 4167.11 2051 2052 of the Revised Code and other documents and records relevant to the inspection and investigation, the issuance of subpoenas, and 2053 the conducting of tests and other studies reasonably calculated 2054 to serve the purposes of implementing and enforcing this 2055 chapter. Except as provided in this section, the administrator 2056 or the administrator's designee shall conduct scheduled the 2057 inspections and investigations only pursuant to rules adopted 2058 under section 4167.02 of the Revised Code, a request to do so by 2059 a public employee or public employee representative, or the 2060 notification the administrator receives pursuant to division (B) 2061

of section 4167.06 of the Revised Code and only if the	2062
administrator or the administrator's designee complies with this	2063
section. The administrator or the administrator's designee shall	2064
conduct all requested or required inspections within a	2065
reasonable amount of time following receipt of the request or	2066
notification.	2067

- (B) (1) Any public employee or public employee 2068 representative who believes that a violation of an Ohio 2069 employment risk reduction standard exists that threatens 2070 physical harm, or that an imminent danger exists, may request an 2071 inspection by giving written notice to the administrator or the 2072 administrator's designee of the violation or danger. The notice 2073 shall set forth with reasonable particularity the grounds for 2074 the notice, and shall be signed by the public employee or public 2075 employee representative. The names of individual public 2076 employees making the notice or referred to therein shall not 2077 appear in the copy provided to the public employer pursuant to 2078 division (B)(2) of this section and shall be kept confidential. 2079
- (2) If, upon receipt of a notification pursuant to 2080 division (B)(1) of this section, the administrator determines 2081 that there are no reasonable grounds to believe that a violation 2082 2083 or danger exists, the administrator shall inform the public employee or public employee representative in writing of the 2084 determination. If, upon receipt of a notification, the 2085 administrator determines that there are reasonable grounds to 2086 believe that a violation or danger exists, the administrator 2087 shall, within one week, excluding Saturdays, Sundays, and any 2088 legal holiday as defined in section 1.14 of the Revised Code, 2089 after receipt of the notification, notify the public employer, 2090 by certified mail, return receipt requested, of the alleged 2091 violation or danger. The notice provided to the public employer 2092

or the public employer's agent shall inform the public employer	2093
of the alleged violation or danger and that the administrator or	2094
the administrator's designee will investigate and inspect the	2095
public employer's workplace as provided in this section. The	2096
public employer must respond to the administrator, in a method	2097
determined by the administrator, concerning the alleged	2098
violation or danger, within thirty days after receipt of the	2099
notice. If the public employer does not correct the violation or	2100
danger within the thirty-day period or if the public employer	2101
fails to respond within that time period, the administrator or	2102
the administrator's designee shall investigate and inspect the	2103
public employer's workplace as provided in this section. The	2104
administrator or the administrator's designee shall not conduct	2105
any inspection prior to the end of the thirty-day period unless	2106
requested or permitted by the public employer. The administrator	2107
may, at any time upon the request of the public employer,	2108
inspect and investigate any violation or danger alleged to exist	2109
at the public employer's place of employment.	2110

(3) The authority of the administrator or the 2111 administrator's designee to investigate and inspect a premises 2112 pursuant to a public employee or public employee representative 2113 notification is not limited to the alleged violation or danger 2114 contained in the notification. The administrator or the 2115 administrator's designee may investigate and inspect any other 2116 area of the premises where there is reason to believe that a 2117 violation or danger exists. In addition, if the administrator or 2118 the administrator's designee detects any obvious or apparent 2119 violation at any temporary place of employment while en route to 2120 the premises to be inspected or investigated, and that violation 2121 presents a substantial probability that the condition or 2122 practice could result in death or serious physical harm, the 2123

administrator or the administrator's designee may use any of the 2124 enforcement mechanisms provided in this section to correct or 2125 remove the condition or practice. 2126

- (4) If, during an inspection or investigation, the 2127 administrator or the administrator's designee finds any 2128 condition or practice in any place of employment that presents a 2129 substantial probability that the condition or practice could 2130 result in death or serious physical harm, after notifying the 2131 employer of the administrator's intent to issue an order, the 2132 administrator shall issue an order, or the administrator's 2133 2134 designee shall issue an order after consultation with the administrator and upon the recommendation of the administrator, 2135 which prohibits the employment of any public employee or any 2136 continuing operation or process under such condition or practice 2137 until necessary steps are taken to correct or remove the 2138 condition or practice. The order shall not be effective for more 2139 than fifteen days, unless a court of competent jurisdiction 2140 otherwise orders as provided in section 4167.14 of the Revised 2141 Code. 2142
- (C) In making any inspections or investigations under this 2143 chapter, the administrator or the administrator's designee may 2144 administer oaths and require, by subpoena, the attendance and 2145 testimony of witnesses and the production of evidence under 2146 oath. Witnesses shall receive the fees and mileage provided for 2147 under section 119.094 of the Revised Code. In the case of 2148 contumacy, failure, or refusal of any person to comply with an 2149 order or any subpoena lawfully issued, or upon the refusal of 2150 any witness to testify to any matter regarding which the witness 2151 may lawfully be interrogated, a judge of the court of common 2152 pleas of any county in this state, on the application of the 2153 administrator or the administrator's designee, shall issue an 2154

order requiring the person to appear and to produce evidence if,	2155
as, and when so ordered, and to give testimony relating to the	2156
matter under investigation or in question. The court may punish	2157
any failure to obey the order of the court as a contempt	2158
thereof.	2159

- (D) If, upon inspection or investigation, the 2160 administrator or the administrator's designee believes that a 2161 public employer has violated any requirement of this chapter or 2162 any rule, Ohio employment risk reduction standard, or order 2163 2164 adopted or issued pursuant thereto, the administrator or the administrator's designee shall, with reasonable promptness, 2165 issue a citation to the public employer. The citation shall be 2166 in writing and describe with particularity the nature of the 2167 alleged violation, including a reference to the provision of 2168 law, Ohio employment risk reduction standard, rule, or order 2169 alleged to have been violated. In addition, the citation shall 2170 fix a time for the abatement of the violation, as provided in 2171 division (H) of this section. The administrator may prescribe 2172 procedures for the issuance of a notice with respect to minor 2173 violations and for enforcement of minor violations that have no 2174 direct or immediate relationship to safety or health. 2175
- (E) Upon receipt of any citation under this section, the 2176 public employer shall immediately post the citation, or a copy 2177 thereof, at or near each place an alleged violation referred to 2178 in the citation occurred.
- (F) The administrator may not issue a citation under this 2180 section after the expiration of six months following the final 2181 occurrence of any violation. 2182
- (G) If the administrator issues a citation pursuant to 2183 this section, the administrator shall mail the citation to the 2184

public employer by certified mail, return receipt requested. The	2185
public employer has fourteen days after receipt of the citation	2186
within which to notify the administrator that the employer	2187
wishes to contest the citation. If the employer notifies the	2188
administrator within the fourteen days that the employer wishes	2189
to contest the citation, or if within fourteen days after the	2190
issuance of a citation a public employee or public employee	2191
representative files notice that the time period fixed in the	2192
citation for the abatement of the violation is unreasonable, the	2193
administrator shall hold an adjudication hearing in accordance	2194
with Chapter 119. of the Revised Code.	2195

- (H) In establishing the time limits in which a public 2196 employer must abate a violation under this section, the 2197 administrator shall consider the costs to the public employer, 2198 the size and financial resources of the public employer, the 2199 severity of the violation, the technological feasibility of the 2200 public employer's ability to comply with requirements of the 2201 citation, the possible present and future detriment to the 2202 health and safety of any public employee for failure of the 2203 public employer to comply with requirements of the citation, and 2204 such other factors as the administrator determines appropriate. 2205 The administrator may, after considering the above factors, 2206 permit the public employer to comply with the citation over a 2207 period of up to two years and may extend that period an 2208 additional one year, as the administrator determines 2209 appropriate. 2210
- (I) Any public employer may request the administrator to

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  conduct an employment risk reduction inspection of the public

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  employer's place of employment. The administrator or the

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  administrator's designee shall conduct the inspection within a

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  reasonable amount of time following the request. Neither the

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administrator nor any other person may use any information	2216
obtained from the inspection for a period not to exceed three	2217
years in any proceeding for a violation of this chapter or any	2218
rule or order issued thereunder nor in any other action in any	2219
court in this state.	2220
Sec. 5145.163. (A) As used in this section:	2221
(1) "Customer model enterprise" means an enterprise	2222
conducted under a federal prison industries enhancement	2223
certification program in which a private party participates in	2224
the enterprise only as a purchaser of goods and services.	2225
(2) "Employer model enterprise" means an enterprise	2226
conducted under a federal prison industries enhancement	2227
certification program in which a private party participates in	2228
the enterprise as an operator of the enterprise.	2229
(3) "Injury" and "occupational disease" have the same	2230
meanings as in section 4123.01 of the Revised Code if sustained	2231
or contracted in the course of, and arising out of,	2232
participation in authorized work activity in the federal prison	2233
industries enhancement certification program.	2234
(4) "Inmate" Incarcerated worker" means any person who is	2235
committed to the custody of the department of rehabilitation and	2236
correction and who is participating in an Ohio penal industries	2237
program that is under the federal prison industries enhancement	2238
certification program.	2239
(5) "Federal prison industries enhancement certification	2240
program" means the program authorized pursuant to 18 U.S.C.	2241
1761.	2242
(6) "Injured incarcerated worker" means an individual to	2243
which division (G) of this section applies.	2244

(7) "Compensation" means compensation as provided in	2245
sections 4123.56 to 4123.58 of the Revised Code.	2246
(B) No private party shall participate in an employer	2247
model enterprise in this state unless the private party is	2248
approved by the director of rehabilitation and correction in	2249
accordance with division (C) of this section.	2250
decordance with division (e) of this section.	2200
(C) The director may approve a private party to	2251
participate in an employer model enterprise only if the private	2252
party meets the following requirements:	2253
(1) The private party provides proof of workers!	2254
compensation coverage furnished by the bureau of workers!	2255
compensation.	2256
(2) The mainstenant control of the little in control of	2257
(2)—The private party carries liability insurance in an	2257
amount the director determines to be sufficient.	2258
$\frac{(3)}{(2)}$ The private party does not have an unresolved	2259
finding for recovery by the auditor of state under section 9.24	2260
of the Revised Code.	2261
(D) (1) If the enterprise for which an inmate works is a	2262
customer model enterprise, the (D) The department may shall	2263
treat the inmate an incarcerated worker, regardless of whether	2264
the incarcerated worker works in a customer model enterprise or	2265
an employer model enterprise, as an employee of the department	2266
for the purpose of workers' compensation coverage in accordance	2267
with Chapters 4121. $\tau$ and 4123. $\tau$ and 4121. of the Revised	2268
Code.	2269
(2) If the enterprise for which an inmate works is an	2270
employer model enterprise, the private participant may treat the	2271
inmate as an employee of the private participant for the purpose	2272
of workers' compensation coverage in accordance with Chapters	2273

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4121., 4123., 4127., and 4131. of the Revised Code.	2274
(E) Except as provided in division (D) of this section,	2275
inmates incarcerated workers are not employees of the department	2276
of rehabilitation and correction or the private participant in	2277
an enterprise.	2278
(F)(1) An inmate incarcerated worker who is injured or who	2279
contracts an occupational disease <u>in the course of and</u> arising	2280
out of participation in authorized work activity in the federal	2281
prison industries enhancement certification program may request	2282
the department file a claim—for compensation or benefits—with	2283
the bureau of workers' compensation under Chapters 4121. $ au$ and	2284
4123., 4127., and 4131. of the Revised Code—while the claimant—	2285
is in the custody of the department within the timeframe	2286
provided for in section 4123.84 or 4123.85 of the Revised Code.	2287
(2) The dependent of an <pre>incarcerated worker who is</pre>	2288
killed or dies as the result of an <u>injury or</u> occupational	2289
disease contracted in the course of and arising out of	2290
participation in authorized work activity in the federal prison	2291
industries enhancement certification program may request the	2292
department file a claim for compensation and benefits with the	2293
<u>bureau</u> under Chapters 4121. $_{\tau}$ and 4123. $_{\tau}$ 4127. $_{\tau}$ and 4131. of the	2294
Revised Code within the timeframe provided for in section	2295
4123.84 or 4123.85 of the Revised Code. A party may use the	2296
appeals process under Chapters 4121. and 4123. of the Revised	2297
Code regarding applications filed under division (F)(2) of this	2298
section.	2299
(G) Notwithstanding any provision of Chapter 4121. or	2300
4123. of the Revised Code to the contrary, an inmate who files a	2301
claim pursuant to this section if the department determines that	2302
an incarcerated worker was injured or contracted an occupational	2303

disease in the course of and arising out of participation in	2304
authorized work activity in the federal prison industries	2305
enhancement certification program, whether by external	2306
accidental means or accidental in character or result, both of	2307
the following apply to the individual while that individual is	2308
in the custody of the department:	2309
(1) The individual may receive medical treatment for the	2310
injury or occupational disease.	2311
(2) The individual is barred from filing for compensation	2312
with the department or the bureau.	2313
shall receive (H) While an injured incarcerated worker is	2314
in the custody of the department, medical recommendations	2315
pertaining to, and medical treatment and have medical	2316
determinations for purposes of Chapter 4121. and 4123. of the	2317
Revised Code made by the department's medical providers for, the	2318
injured incarcerated worker shall be provided exclusively	2319
through the department's network of providers. Medical	2320
(I) Claim allowance determinations made by the	2321
department's providers department shall be limited to initial	2322
claim allowances and requests for additional conditions. The	2323
claimant An injured incarcerated worker may request appeal the	2324
department's claim allowance determination or medical treatment	2325
determination by requesting a review by the department's chief	2326
medical officer. In the event of an a further appeal, the	2327
<pre>claimant_injured incarcerated worker may receive a medical</pre>	2328
evaluation from a medical practitioner affiliated within the	2329
department's network of third-party medical contractors or a	2330
medical practitioner in a managed care organization certified by	2331
the bureau of workers' compensation under section 4121.44 of the	2332
Revised Code and located in Franklin county.	2333

(H) In (J) Except for appeals regarding determinations	2334
under division (I) of this section, and notwithstanding any	2335
provision of Chapter 4121. or 4123. of the Revised Code to the	2336
contrary, an injured incarcerated worker is barred from	2337
appealing a determination made under this section while	2338
<pre>incarcerated.</pre>	2339
(K) After an injured incarcerated worker is released from	2340
incarceration, all of the following apply:	2341
(1) A party may use the appeals process under Chapters	2342
4121. and 4123. of the Revised Code regarding any application	2343
filed by an injured incarcerated worker.	2344
(2) The released individual may receive medical treatment	2345
consistent with Chapters 4121. and 4123. of the Revised Code.	2346
(3) The released individual may seek compensation through	2347
the bureau consistent with Chapters 4121. and 4123. of the	2348
Revised Code.	2349
(L) Except for medical treatment as allowed under division	2350
(G) of this section, in accordance with division (J) of section	2351
4123.54 of the Revised Code, compensation or $\underline{\text{medical}}$ benefits	2352
are not payable to or on behalf of a claimant an injured	2353
incarcerated worker during the period of confinement of the	2354
claimant injured incarcerated worker in any correctional	2355
institution—or county jail. Any remaining amount of an award of	2356
compensation or benefits for an injury or occupational disease	2357
arising out of participation in authorized work activity in the	2358
federal prison industries enhancement certification program-	2359
shall be paid to or on behalf of a claimant after the claimant	2360
is released from imprisonment. If a claimant an injured	2361
incarcerated worker is reimprisoned within the custody of the	2362

department, compensation and benefits—shall be suspended during	2363
the <del>claimant's</del> <u>injured incarcerated worker's</u> imprisonment but	2364
shall may resume on the claimant's worker's release from	2365
imprisonment. The department may pay for medical benefits in	2366
accordance with division (G) of this section.	2367
(T) (M) After an injured incorporated worker is released	2269
(I) (M) After an injured incarcerated worker is released	2368
from the department's custody, regardless of whether the worker	2369
worked in a customer model enterprise or an employer model	2370
enterprise, all claim costs, other than medical costs paid by	2371
the department while the worker was in the department's custody,	2372
shall be paid by the department in accordance with the	2373
requirements of Chapters 4121. and 4123. of the Revised Code.	2374
(N) An <del>inmate</del> -incarcerated worker shall voluntarily	2375
	2376
consent to participate in a federal prison industries	
enhancement certification program prior to commencing	2377
participation in the program. Such consent disclaims the	2378
<pre>inmate's worker's ability to choose a medical provider while the</pre>	2379
<pre>inmate worker is imprisoned and subjects the inmate worker to</pre>	2380
the requirements of this section.	2381
Section 2. That existing sections 4121.12, 4121.121,	2382
4121.13, 4121.41, 4121.45, 4123.44, 4123.52, 4123.54, 4123.57,	2383
4123.66, 4125.07, 4133.10, 4167.01, 4167.10, and 5145.163 of the	2384
	2385
Revised Code are hereby repealed.	2303
Section 3. That sections 4167.25, 4167.27, and 4167.28 of	2386
the Revised Code are hereby repealed.	2387
Section 4. All items in this act are hereby appropriated	2388
out of any moneys in the state treasury to the credit of the	2389
designated fund. For all appropriations made in this act, those	2390
in the first column are for fiscal year 2026 and those in the	2391
in the first corumn are for fiscal year 2020 and those in the	2391

se	second column are for fiscal year 2027.				2392 2393	
	1	2	3	4	5	
А			BWC BUREAU OF WORKERS	COMPENSATION		
В	Dedic	cated Pu	rpose Fund Group			
С	7023	855407	Claims, Risk and Medical Management	\$123,887,269	\$128,050,202	
D	7023	855409	Administrative Services	\$167,215,851	\$168,637,822	
E	7023	855410	Attorney General Payments	\$6,384,084	\$6,607,527	
F	8220	855606	Coal Workers' Fund	\$197,040	\$197,040	
G	8230	855608	Marine Industry	\$75 <b>,</b> 000	\$75 <b>,</b> 000	
Н	8250	855605	Disabled Workers Relief	\$201,000	\$201,000	
I	8260	855609	Safety and Hygiene Operating	\$21,471,244	\$23,281,721	
J	8260	855610	Safety Grants	\$34,300,000	\$34,300,000	
K	8260	855611	Health and Safety Initiative	\$3,000,000	\$3,000,000	
L	8260	855612	Safety Campaign	\$250,000	\$250,000	
М	8260	855619	Safety and Health Workforce Safety Innovation Center	\$14,700,000	\$14,700,000	

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N	Dedicated Purpose Fund Group Total	\$371,681,488	\$379,300,312		
0	Federal Fund Group				
P	3490 855601 OSHA Enforcement	\$1,751,293	\$1,751,293		
Q	3FW0 855614 BLS SOII Grant	\$199,000	\$199,000		
R	Federal Fund Group Total	\$1,950,293	\$1,950,293		
S	TOTAL ALL BUDGET FUND GROUPS	\$373,631,781	\$381,250,605		
	Section 5. WORKERS' COMPENSATION FRAU	D UNIT		2394	
	Of the foregoing appropriation item 8	55410, Attorney		2395	
Ge	neral Payments, \$869,610 in fiscal year 2	2026 and \$900,046	in	2396	
fi	fiscal year 2027 shall be used to fund the expenses of the				
Workers' Compensation Fraud Unit within the Attorney General's					
Of	fice. These payments shall be processed a	at the beginning of	of	2399	
each quarter of each fiscal year and deposited into the Workers'				2400	
Сс	Compensation Section Fund (Fund 1950) used by the Attorney				
Ge	neral.			2402	
	SAFETY AND HYGIENE			2403	
	Notwithstanding section 4121.37 of th	e Revised Code, a	ıs	2404	
di	rected by the Bureau of Workers' Compensa	ation, the Treasu	rer	2405	
of	State shall remit up to \$73,721,244 cash	n in fiscal year 2	2026	2406	
an	and up to \$75,531,721 cash in fiscal year 2027 from the State				
In	Insurance Fund to the state treasury to the credit of the Safety				
an	and Hygiene Fund (Fund 8260) to be used to fund appropriation				
li	nes 855609 for the purpose of operating a	Safety and Hygie	ene	2410	
pr	ogram, 855610 to be used for Safety Grant	es, 855611 for the	9	2411	
purpose of operating a Health and Wellness Program, 855612 for 2				2412	
th	the purpose of operating a statewide safety awareness and				

Inspector General for the Bureau of Workers' Compensation and

as soon as possible thereafter, the Director of Budget and

Industrial Commission, on July 1, 2026, and January 1, 2027, or

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2442

Management shall transfer \$212,500 cash from the Workers'	2443
Compensation Fund (Fund 7023) to the Deputy Inspector General	2444
for the Bureau of Workers' Compensation and Industrial	2445
Commission Fund (Fund 5FT0).	2446
If additional amounts are needed, the Inspector General	2447
may seek Controlling Board approval for additional transfers of	2448
cash and to increase the amount appropriated in appropriation	2449
item 965604, Deputy Inspector General for the Bureau of Workers'	2450
Compensation and Industrial Commission.	2451
Section 7. The amendment of sections 4123.52 and 4123.57	2452
of the Revised Code by this act applies to claims pending on or	2453
arising on or after the effective date of this section.	2454
Section 8. This Section and Sections 4, 5, and 6 of this	2455
act are exempt from the referendum under Ohio Constitution,	2456
Article II, Section 1d and section 1.471 of the Revised Code and	2457
therefore take effect immediately when this act becomes law.	2458
Section 9. The General Assembly, applying the principle	2459
stated in division (B) of section 1.52 of the Revised Code that	2460
amendments are to be harmonized if reasonably capable of	2461
simultaneous operation, finds that the following sections,	2462
presented in this act as composites of the sections as amended	2463
by the acts indicated, are the resulting versions of the	2464
sections in effect prior to the effective date of the sections	2465
as presented in this act:	2466
Section 4123.52 of the Revised Code as amended by both	2467
H.B. 33 of the 135th General Assembly and H.B. 81 of the 133rd	2468
General Assembly.	2469
Section 4123.57 of the Revised Code as amended by both	2470
H.B. 75 and H.B. 281 of the 134th General Assembly.	2471