As Reported by the Senate Financial Institutions, Insurance and Technology Committee

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

ГО	amend sections 4121.12, 4121.121, 4121.13,	1
	4123.44, 4123.52, 4123.54, 4123.57, 4123.66,	2
	4125.07, 4133.10, 4167.01, 4167.10, and 5145.163	3
	and to repeal sections 4167.25, 4167.27, and	4
	4167.28 of the Revised Code to make	5
	appropriations for the Bureau of Workers'	6
	Compensation for the biennium beginning July 1,	7
	2025, and ending June 30, 2027, to provide	8
	authorization and conditions for the operation	9
	of the Bureau's programs, and to make changes to	10
	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
4123.44, 4123.52, 4123.54, 4123.57, 4123.66, 4125.07, 4133.10,	13
4167.01, 4167.10, and 5145.163 of the Revised Code be amended to	14
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.

78 (C) In making appointments to the board, the governor 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

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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. 109 In order for the name of an individual to be submitted to 110 the governor under this division, the nominating committee shall 111 approve the individual by an affirmative vote of a majority of 112 its members. 113 (D) All members of the board shall receive their 114 reasonable and necessary expenses pursuant to section 126.31 of 115 the Revised Code while engaged in the performance of their 116 duties as members and also shall receive an annual salary not to 117 exceed sixty thousand dollars in total, payable on the following 118 basis: 119 (1) Except as provided in division (D)(2) of this section, 120 a member shall receive two thousand five hundred dollars during 121 a month in which the member attends one or more meetings of the 122 board and shall receive no payment during a month in which the 123 124 member attends no meeting of the board. (2) A member may receive no more than thirty thousand 125 dollars per year to compensate the member for attending meetings 126 of the board, regardless of the number of meetings held by the 127 board during a year or the number of meetings in excess of 128 twelve within a year that the member attends. 129 (3) Except as provided in division (D)(4) of this section, 130 if a member serves on the workers' compensation audit committee, 131 workers' compensation actuarial committee, or the workers' 132 compensation investment committee, the member shall receive two 133 thousand five hundred dollars during a month in which the member 134 attends one or more meetings of the committee on which the 135 member serves and shall receive no payment during any month in 136

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which the member attends no meeting of that committee.

(4) A member may receive no more than thirty thousand	138
dollars per year to compensate the member for attending meetings	139
of any of the committees specified in division (D)(3) of this	140
section, regardless of the number of meetings held by a	141
committee during a year or the number of committees on which a	142
member serves.	143
The chairperson of the board shall set the meeting dates	144
of the board as necessary to perform the duties of the board	145
under this chapter and Chapters 4123., 4125., 4127., 4131.,	146
4133., and 4167. of the Revised Code. The board shall meet at	147
least twelve times a year. The administrator of workers'	148
compensation shall provide professional and clerical assistance	149
to the board, as the board considers appropriate.	150
(E) Before entering upon the duties of office, each	151
appointed member of the board shall take an oath of office as	152
required by sections 3.22 and 3.23 of the Revised Code and file	153
in the office of the secretary of state the bond required under	154
section 4121.127 of the Revised Code.	155
(F) The board shall:	156
(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	160
quality objectives and in complying with this chapter and	161
Chapters 4123., 4125., 4127., 4131., 4133., and 4167. of the	162
Revised Code;	163
(3) Submit an annual report to the president of the	164
senate, the speaker of the house of representatives, and the	165
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

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this section in this state.

(G) The board may do both of the following:

(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 quilty 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 304 305 appointment.

As Reported by the Senate Financial Institutions, Insurance and Technology Committee

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
 the bureau and for the discharge of all administrative duties
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 imposed upon the administrator in this chapter and Chapters
 4123., 4125., 4127., 4131., 4133., and 4167. of the Revised
 Code, and in the discharge thereof shall do all of the
 following:
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- (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 position in the unclassified service. 429

- (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 463 4123.34 of the Revised Code and all other accounts and records 464 necessary to the collection, administration, and distribution of 465 the workers' compensation funds and shall obtain the statistical 466 and other information required by section 4123.19 of the Revised 467 Code. 468 (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, 486

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purchase supplies, materials, equipment, and services.

(9) Prepare and submit to the board an annual budget for

internal operating purposes—for the board's approval. 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 budgets—budget submitted to the board and the—director shall 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 the location of the file pertaining to the claimant's claim. The 509 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

(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
4127., and 4131. Of the Nevised Code.	330
(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
bulcad. The medical section shall do dil 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
services;	548

(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 585 586 administrator considers pertinent or the board requires, 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 606

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	

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
(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. 4123.44. The members of the bureau of workers'	646
compensation board of directors, the administrator of workers'	647
compensation, and the bureau of workers' compensation chief	648
investment officer are the trustees of fiduciaries to the state	649
insurance fund. The administrator, in accordance with sections	650
4121.126 and 4121.127 of the Revised Code and the investment	651
policy approved by the board pursuant to section 4121.12 of the	652
Revised Code, and in consultation with the bureau of workers'	653
compensation chief investment officer, may invest any of the	654
surplus or reserve belonging to the state insurance fund. The	655
administrator and the bureau of workers' compensation chief	656
investment officer shall not deviate from the investment policy	657
approved by the board without the approval of the workers'	658
compensation investment committee and the board.	659
The administrator shall not invest in any type of	660
investment specified in divisions (B)(1) to (10) of section	661
4123.442 of the Revised Code. The administrator shall not make	662
an investment decision with the primary purpose of influencing	663

any social or environmental policy or attempting to influence

the governance of any corporation.

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The administrator and other fiduciaries shall discharge	666
their duties with respect to the funds with the care, skill,	667
prudence, and diligence under the circumstances then prevailing	668
that a prudent person acting in a like capacity and familiar	669
with such matters would use in the conduct of an enterprise of a	670
like character and with like aims, and by diversifying the	671
investments of the assets of the funds so as to minimize the	672
risk of large losses, unless under the circumstances it is	673
clearly prudent not to do so.	674

The administrator and other fiduciaries, in accordance 675 with their fiduciary duties described under this section, shall 676 make investment decisions with the sole purpose of maximizing 677 the return on investments and that are consistent with any other 678 fiduciary responsibilities of the administrator and other 679 fiduciaries under this chapter and Chapters 4121., 4127., and 680 4131. of the Revised Code. 681

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

business in this state.

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When reporting on the performance of investments, the

administrator shall comply with the performance presentation

standards established by the association for investment

management and research.

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All investments shall be purchased at current market 692 prices and the evidences of title to the investments shall be 693 placed in the custody of the treasurer of state, who is hereby 694 designated as custodian, or in the custody of the treasurer of 695

state's authorized agent. Evidences of title of the investments	696
so purchased may be deposited by the treasurer of state for	697
safekeeping with an authorized agent selected by the treasurer	698
of state who is a qualified trustee under section 135.18 of the	699
Revised Code. The treasurer of state or the agent shall collect	700
the principal, dividends, distributions, and interest as they	701
become due and payable and place them when collected into the	702
state insurance fund.	703

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The treasurer of state shall pay for investments purchased 704 705 by the administrator on receipt of written or electronic instructions from the administrator or the administrator's 706 designated agent authorizing the purchase, and pending receipt 707 708 of the evidence of title of the investment by the treasurer of state or the treasurer of state's authorized agent. The 709 administrator may sell investments held by the administrator, 710 and the treasurer of state or the treasurer of state's 711 authorized agent shall accept payment from the purchaser and 712 deliver evidence of title of the investment to the purchaser, on 713 receipt of written or electronic instructions from the 714 administrator or the administrator's designated agent 715 authorizing the sale, and pending receipt of the moneys for the 716 investments. The amount received shall be placed in the state 717 insurance fund. The administrator and the treasurer of state may 718 enter into agreements to establish procedures for the purchase 719 and sale of investments under this division and the custody of 720 the investments. 721

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

Any statement of financial position distributed by the 724 administrator shall include the fair value, as of the statement 725 date, of all investments held by the administrator under this 726 section.

When in the judgment of the administrator it is necessary 728 to provide available funds for the payment of compensation or 729 benefits under this chapter, the administrator may borrow money 730 from any available source and pledge as security a sufficient 731 amount of bonds or other securities in which the state insurance 732 fund is invested. The aggregate unpaid amount of loans existing 733 at any one time for money so borrowed shall not exceed ten 734 million dollars. The bonds or other securities so pledged as 735 security for such loans to the administrator shall be the sole 736 security for the payment of the principal and interest of any 737 such loan. The administrator shall not be personally liable for 738 the payment of the principal or the interest of any such loan. 739 No such loan shall be made for a longer period of time than one 740 year. Such loans may be renewed but no one renewal shall be for 741 a period in excess of one year. Such loans shall bear such rate 742 of interest as the administrator determines and in negotiating 743 the loans, the administrator shall endeavor to secure as 744 favorable interest rates and terms as circumstances will permit. 745

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 security for such loan, upon receipt by the treasurer of state of an order of the administrator authorizing such loan. Upon payment of any such loan by the administrator, the bonds or other securities pledged as security therefor shall be returned to the treasurer of state as custodian of such bonds.

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The administrator may pledge with the treasurer of state 754 such amount of bonds or other securities in which the state 755

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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 services, consulting services, and other like services to facilitate investment of the surplus and reserve belonging to the state insurance fund. The administrator shall pay the expense of securing such services from the state insurance fund.

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 769 commission and the authority of the administrator of workers' 770 compensation over each case is continuing, and the commission 771 may make such modification or change with respect to former 772 findings or orders with respect thereto, as, in its opinion is 773 justified. No modification or change nor any finding or award in 774 respect of any claim shall be made with respect to disability, 775 compensation, dependency, or benefits, after five years from the 776 777 date of injury in the absence of medical benefits being provided under this chapter or in the absence of payment of compensation 778 under section 4123.57, 4123.58, or division (A) or (B) of 779 section 4123.56 of the Revised Code or wages in lieu of 780 compensation in a manner so as to satisfy the requirements of 781 section 4123.84 of the Revised Code, in which event the 782 modification, change, finding, or award shall be made within 783 five years from the date of the last medical services being 784 rendered or the date of the last payment of compensation or from 785

the date of death, nor unless written notice of claim for the 786 specific part or parts of the body injured or disabled has been 787 given as provided in section 4123.84 or 4123.85 of the Revised 788 Code. The commission shall not make any modification, change, 789 finding, or award which shall award compensation for a back 790 period in excess of two years prior to the date of filing 791 792 application therefor. (B)(1) As used in this division, "prosthetic device" 793 means a custom fabricated or fitted device used to replace a 794 795 missing appendage or other external body part. "Prosthetic device" includes an artificial limb, hand, foot, or eye or an 796 intraocular lens. "Prosthetic device" does not include a dental 797 appliance, eyeglasses, hearing aid, ostomy product, or any other 798 item that does not have a significant impact on the 799 800 musculoskeletal functions of the body such as breast prostheses, 801 eyelashes, wigs, and other cosmetic devices. (2) Notwithstanding any provision to the contrary in 802 division (A) of this section, the commission or administrator 803 may, regardless of the date of injury or the last payment of 804 805 compensation or benefits, order payment to purchase, repair, or replace a prosthetic device if the purchase, repair, or 806 807 replacement is necessary due to an amputation or loss that resulted from an allowed injury or occupational disease. 808 809 (3) Ordering a payment under division (B)(2) of this section does not extend the time period during which the 810 commission or administrator may modify or change a former 811 finding or order in a claim as provided under division (A) of 812 813 this section. (C) Notwithstanding division (A) of this section, and 814 except as otherwise provided in a rule that shall be adopted by 815

the administrator, with the advice and consent of the bureau of	816
workers' compensation board of directors, neither the	817
administrator nor the commission shall make any finding or award	818
for payment of medical or vocational rehabilitation services	819
submitted for payment more than one year after the date the	820
services were rendered or more than one year after the date the	821
services became payable under division (I) of section 4123.511	822
of the Revised Code, whichever is later. No medical or	823
vocational rehabilitation provider shall bill a claimant for	824
services rendered if the administrator or commission is	825
prohibited from making that payment under this division.	826
$\frac{(C)}{(D)}$ Division $\frac{(B)}{(C)}$ of this section does not apply to	827
requests made by the centers for medicare and medicaid services	828
in the United States department of health and human services for	829
reimbursement of conditional payments made pursuant to section	830
1395y(b)(2) of title 42, United States Code (commonly known as	831
the "Medicare Secondary Payer Act").	832
(D)(E) This section does not affect the right of a	833
claimant to compensation accruing subsequent to the filing of	834
any such application, provided the application is filed within	835
the time limit provided in this section.	836
$\frac{(E)}{(F)}$ This section does not deprive the commission of its	837
continuing jurisdiction to determine the questions raised by any	838
application for modification of award which has been filed with	839
the commission after June 1, 1932, and prior to the expiration	840
of the applicable period but in respect to which no award has	841
been granted or denied during the applicable period.	842
$\frac{(F)}{(G)}$ The commission may, by general rules, provide for	843
the destruction of files of cases in which no further action may	844
be taken.	845

(G) (H) The commission and administrator of workers' 846 compensation each may, by general rules, provide for the 847 retention and destruction of all other records in their 848 possession or under their control pursuant to section 121.211 849 and sections 149.34 to 149.36 of the Revised Code. The bureau of 8.50 workers' compensation may purchase or rent required equipment 851 for the document retention media, as determined necessary to 852 preserve the records. Photographs, microphotographs, microfilm, 853 films, or other direct or electronic document retention media, 854 when properly identified, have the same effect as the original 855 record and may be offered in like manner and may be received as 856 evidence in proceedings before the industrial commission, staff 857 hearing officers, and district hearing officers, and in any 858 court where the original record could have been introduced. 859

Sec. 4123.54. (A) Except as otherwise provided in this 860 division or divisions (I) and (K) of this section, every 861 employee, who is injured or who contracts an occupational 862 disease, and the dependents of each employee who is killed, or 863 864 dies as the result of an occupational disease contracted in the course of employment, wherever the injury has occurred or 865 occupational disease has been contracted, is entitled to receive 866 the compensation for loss sustained on account of the injury, 867 occupational disease, or death, and the medical, nurse, and 868 hospital services and medicines, and the amount of funeral 869 expenses in case of death, as are provided by this chapter. The 870 compensation and benefits shall be provided, as applicable, 871 directly from the employee's self-insuring employer as provided 872 in section 4123.35 of the Revised Code or from the state 873 insurance fund. An employee or dependent is not entitled to 874 receive compensation or benefits under this division if the 875 employee's injury or occupational disease is either of the 876

following: 877 (1) Purposely self-inflicted; 878 (2) Caused by the employee being intoxicated, under the 879 influence of a controlled substance not prescribed by a 880 physician, certified nurse-midwife, clinical nurse specialist, 881 or certified nurse practitioner, or under the influence of 882 marihuana if being intoxicated, under the influence of a 883 controlled substance not prescribed by a physician, certified 884 nurse-midwife, clinical nurse specialist, or certified nurse 885 practitioner, or under the influence of marihuana was the 886 proximate cause of the injury. 887 (B) For the purpose of this section, provided that an 888 employer has posted written notice to employees that the results 889 of, or the employee's refusal to submit to, any chemical test 890 described under this division may affect the employee's 891 eligibility for compensation and benefits pursuant to this 892 chapter and Chapter 4121. of the Revised Code, there is a 893 rebuttable presumption that an employee is intoxicated, under 894 the influence of a controlled substance not prescribed by the 895 employee's physician, certified nurse-midwife, clinical nurse 896 specialist, or certified nurse practitioner, or under the 897 influence of marihuana and that being intoxicated, under the 898 influence of a controlled substance not prescribed by the 899 employee's physician, certified nurse-midwife, clinical nurse 900 specialist, or certified nurse practitioner, or under the 901 influence of marihuana is the proximate cause of an injury under 902 either of the following conditions: 903 (1) When any one or more of the following is true: 904 (a) The employee, through a qualifying chemical test 905 As Reported by the Senate Financial Institutions, Insurance and Technology Committee administered within eight hours of an injury, is determined to 906 have an alcohol concentration level equal to or in excess of the 907 levels established in divisions (A)(1)(b) to (i) of section 908 4511.19 of the Revised Code. 909 (b) The employee, through a qualifying chemical test 910 administered within thirty-two hours of an injury, is determined 911 to have a controlled substance not prescribed by the employee's 912 physician, certified nurse-midwife, clinical nurse specialist, 913 or certified nurse practitioner or marihuana in the employee's 914 system at a level equal to or in excess of the cutoff 915 concentration level for the particular substance as provided in 916 section 40.87 40.85 of Title 49 of the Code of Federal 917 Regulations, 49 C.F.R. 40.8740.85, as amended it existed on 918 January 1, 2024, or as subsequently amended as a result of a 919 920 statute or rule. (c) The employee, through a qualifying chemical test 921 administered within thirty-two hours of an injury, is determined 922 to have barbiturates, benzodiazepines, or methadone in the 923 employee's system that tests above levels established by 924 laboratories certified by the United States department of health 925 and human services. 926 (2) When the employee refuses to submit to a requested 927 chemical test, on the condition that that employee is or was 928 given notice that the refusal to submit to any chemical test 929 described in division (B)(1) of this section may affect the 930 employee's eligibility for compensation and benefits under this 931 chapter and Chapter 4121. of the Revised Code. 932 (C)(1) For purposes of division (B) of this section, a 933

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chemical test is a qualifying chemical test if it is

administered to an employee after an injury under at least one

of the following conditions: 936 (a) When the employee's employer had reasonable cause to 937 suspect that the employee may be intoxicated, under the 938 influence of a controlled substance not prescribed by the 939 employee's physician, certified nurse-midwife, clinical nurse 940 specialist, or certified nurse practitioner, or under the 941 influence of marihuana; 942 (b) At the request of a police officer pursuant to section 943 4511.191 of the Revised Code, and not at the request of the 944 employee's employer; 945 946 (c) At the request of a licensed physician, certified nurse-midwife, clinical nurse specialist, or certified nurse 947 practitioner who is not employed by the employee's employer, and 948 not at the request of the employee's employer. 949 (2) As used in division (C)(1)(a) of this section, 950 "reasonable cause" means, but is not limited to, evidence that 951 an employee is or was using alcohol, a controlled substance, or 952 marihuana drawn from specific, objective facts and reasonable 953 inferences drawn from these facts in light of experience and 954 955 training. These facts and inferences may be based on, but are not limited to, any of the following: 956 (a) Observable phenomena, such as direct observation of 957 use, possession, or distribution of alcohol, a controlled 958 substance, or marihuana, or of the physical symptoms of being 959 under the influence of alcohol, a controlled substance, or 960 marihuana, such as but not limited to slurred speech; dilated 961 pupils; odor of alcohol, a controlled substance, or marihuana; 962 changes in affect; or dynamic mood swings; 963 (b) A pattern of abnormal conduct, erratic or aberrant 964 behavior, or deteriorating work performance such as frequent 965 absenteeism, excessive tardiness, or recurrent accidents, that 966 appears to be related to the use of alcohol, a controlled 967 substance, or marihuana, and does not appear to be attributable 968 to other factors; 969 (c) The identification of an employee as the focus of a 970 criminal investigation into unauthorized possession, use, or 971 trafficking of a controlled substance or marihuana; 972 (d) A report of use of alcohol, a controlled substance, or 973 marihuana provided by a reliable and credible source; 974 975 (e) Repeated or flagrant violations of the safety or work rules of the employee's employer, that are determined by the 976 employee's supervisor to pose a substantial risk of physical 977 injury or property damage and that appear to be related to the 978 use of alcohol, a controlled substance, or marihuana and that do 979 980 not appear attributable to other factors. (D) Nothing in this section shall be construed to affect 981 982 the rights of an employer to test employees for alcohol or controlled substance abuse. 983 (E) For the purpose of this section, laboratories 984 certified by the United States department of health and human 985 services or laboratories that meet or exceed the standards of 986 that department for laboratory certification shall be used for 987 processing the test results of a qualifying chemical test. 988 989 (F) The written notice required by division (B) of this section shall be the same size or larger than the proof of 990 workers' compensation coverage furnished by the bureau of 991 workers' compensation and shall be posted by the employer in the 992 same location as the proof of workers' compensation coverage or 993 the certificate of self-insurance.

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

substantially aggravated by the injury, and that substantial

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aggravation is documented by objective diagnostic findings,

objective clinical findings, or objective test results, no

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compensation or benefits are payable because of the pre-existing

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condition once that condition has returned to a level that would

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have existed without the injury.

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1002 (H) (1) Whenever, with respect to an employee of an employer who is subject to and has complied with this chapter, 1003 there is possibility of conflict with respect to the application 1004 of workers' compensation laws because the contract of employment 1005 is entered into and all or some portion of the work is or is to 1006 be performed in a state or states other than Ohio, the employer 1007 and the employee may agree to be bound by the laws of this state 1008 or by the laws of some other state in which all or some portion 1009 of the work of the employee is to be performed. The agreement 1010 shall be in writing and shall be filed with the bureau of 1011 workers' compensation within ten days after it is executed and 1012 shall remain in force until terminated or modified by agreement 1013 of the parties similarly filed. If the agreement is to be bound 1014 by the laws of this state and the employer has complied with 1015 this chapter, then the employee is entitled to compensation and 1016 benefits regardless of where the injury occurs or the disease is 1017 contracted and the rights of the employee and the employee's 1018 dependents under the laws of this state are the exclusive remedy 1019 against the employer on account of injury, disease, or death in 1020 the course of and arising out of the employee's employment. If 1021 the agreement is to be bound by the laws of another state and 1022 the employer has complied with the laws of that state, the 1023 rights of the employee and the employee's dependents under the 1024

laws of that state are the exclusive remedy against the employer 1025 on account of injury, disease, or death in the course of and 1026 arising out of the employee's employment without regard to the 1027 place where the injury was sustained or the disease contracted. 1028 If an employer and an employee enter into an agreement under 1029 this division, the fact that the employer and the employee 1030 entered into that agreement shall not be construed to change the 1031 status of an employee whose continued employment is subject to 1032 the will of the employer or the employee, unless the agreement 1033 contains a provision that expressly changes that status. 1034 (2) If an employee or the employee's dependents receive an 1035

- award of compensation or benefits under this chapter or Chapter 1036 4121., 4127., or 4131. of the Revised Code for the same injury, 1037 occupational disease, or death for which the employee or the 1038 employee's dependents previously pursued or otherwise elected to 1039 accept workers' compensation benefits and received a decision on 1040 the merits as defined in section 4123.542 of the Revised Code 1041 under the laws of another state or recovered damages under the 1042 laws of another state, the claim shall be disallowed and the 1043 administrator or any self-insuring employer, by any lawful 1044 means, may collect from the employee or the employee's 1045 dependents any of the following: 1046
- (a) The amount of compensation or benefits paid to or on 1047 behalf of the employee or the employee's dependents by the 1048 administrator or a self-insuring employer pursuant to this 1049 chapter or Chapter 4121., 4127., or 4131. of the Revised Code 1050 for that award;
- (b) Any interest, attorney's fees, and costs the 1052 administrator or the self-insuring employer incurs in collecting 1053 that payment.

(3) If an employee or the employee's dependents receive an 1055 award of compensation or benefits under this chapter or Chapter 1056 4121., 4127., or 4131. of the Revised Code and subsequently 1057 pursue or otherwise elect to accept workers' compensation 1058 benefits or damages under the laws of another state for the same 1059 injury, occupational disease, or death the claim under this 1060 chapter or Chapter 4121., 4127., or 4131. of the Revised Code 1061 shall be disallowed. The administrator or a self-insuring 1062 employer, by any lawful means, may collect from the employee or 1063 the employee's dependents or other-states' insurer any of the 1064 following: 1065 (a) The amount of compensation or benefits paid to or on 1066 behalf of the employee or the employee's dependents by the 1067 administrator or the self-insuring employer pursuant to this 1068 chapter or Chapter 4121., 4127., or 4131. of the Revised Code 1069 for that award: 1070 (b) Any interest, costs, and attorney's fees the 1071 administrator or the self-insuring employer incurs in collecting 1072 that payment; 1073 1074 (c) Any costs incurred by an employer in contesting or responding to any claim filed by the employee or the employee's 1075 dependents for the same injury, occupational disease, or death 1076 that was filed after the original claim for which the employee 1077 or the employee's dependents received a decision on the merits 1078 as described in section 4123.542 of the Revised Code. 1079 (4) If the employee's employer pays premiums into the 1080 state insurance fund, the administrator shall not charge the 1081 amount of compensation or benefits the administrator collects 1082 pursuant to division (H)(2) or (3) of this section to the 1083 employer's experience. If the administrator collects any costs 1084 As Reported by the Senate Financial Institutions, Insurance and Technology Committee

incurred by an employer in contesting or responding to any claim 1085 pursuant to division (H)(2) or (3) of this section, the 1086 administrator shall forward the amount collected to that 1087 employer. If the employee's employer is a self-insuring 1088 employer, the self-insuring employer shall deduct the amount of 1089 compensation or benefits the self-insuring employer collects 1090 pursuant to this division from the paid compensation the self-1091 insuring employer reports to the administrator under division 1092 (L) of section 4123.35 of the Revised Code. 1093

- (5) If an employee is a resident of a state other than 1094 this state and is insured under the workers' compensation law or 1095 similar laws of a state other than this state, the employee and 1096 the employee's dependents are not entitled to receive 1097 compensation or benefits under this chapter, on account of 1098 injury, disease, or death arising out of or in the course of 1099 employment while temporarily within this state, and the rights 1100 of the employee and the employee's dependents under the laws of 1101 the other state are the exclusive remedy against the employer on 1102 account of the injury, disease, or death. 1103
- (6) An employee, or the dependent of an employee, who 1104 elects to receive compensation and benefits under this chapter 1105 or Chapter 4121., 4127., or 4131. of the Revised Code for a 1106 claim may not receive compensation and benefits under the 1107 workers' compensation laws of any state other than this state 1108 for that same claim. For each claim submitted by or on behalf of 1109 an employee, the administrator or, if the employee is employed 1110 by a self-insuring employer, the self-insuring employer, shall 1111 request the employee or the employee's dependent to sign an 1112 election that affirms the employee's or employee's dependent's 1113 acceptance of electing to receive compensation and benefits 1114 under this chapter or Chapter 4121., 4127., or 4131. of the 1115

Revised Code for that claim that also affirmatively waives and	1116
releases the employee's or the employee's dependent's right to	1117
file for and receive compensation and benefits under the laws of	1118
any state other than this state for that claim. The employee or	1119
employee's dependent shall sign the election form within twenty-	1120
eight days after the administrator or self-insuring employer	1121
submits the request or the administrator or self-insuring	1122
employer shall dismiss that claim.	1123

In the event a workers' compensation claim has been filed 1124 in another jurisdiction on behalf of an employee or the 1125 dependents of an employee, and the employee or dependents 1126 subsequently elect to receive compensation, benefits, or both 1127 under this chapter or Chapter 4121., 4127., or 4131. of the 1128 Revised Code, the employee or dependent shall withdraw or refuse 1129 acceptance of the workers' compensation claim filed in the other 1130 jurisdiction in order to pursue compensation or benefits under 1131 the laws of this state. If the employee or dependents were 1132 awarded workers' compensation benefits or had recovered damages 1133 under the laws of the other state, any compensation and benefits 1134 awarded under this chapter or Chapter 4121., 4127., or 4131. of 1135 the Revised Code shall be paid only to the extent to which those 1136 payments exceed the amounts paid under the laws of the other 1137 state. If the employee or dependent fails to withdraw or to 1138 refuse acceptance of the workers' compensation claim in the 1139 other jurisdiction within twenty-eight days after a request made 1140 by the administrator or a self-insuring employer, the 1141 administrator or self-insuring employer shall dismiss the 1142 employee's or employee's dependents' claim made in this state. 1143

(I) If an employee who is covered under the federal 1144
"Longshore and Harbor Workers' Compensation Act," 98 Stat. 1639, 1145
33 U.S.C. 901 et seq., is injured or contracts an occupational 1146

disease or dies as a result of an injury or occupational 1147 disease, and if that employee's or that employee's dependents' 1148 claim for compensation or benefits for that injury, occupational 1149 disease, or death is subject to the jurisdiction of that act, 1150 the employee or the employee's dependents are not entitled to 1151 apply for and shall not receive compensation or benefits under 1152 this chapter and Chapter 4121. of the Revised Code. The rights 1153 of such an employee and the employee's dependents under the 1154 federal "Longshore and Harbor Workers' Compensation Act," 98 1155 Stat. 1639, 33 U.S.C. 901 et seq., are the exclusive remedy 1156 against the employer for that injury, occupational disease, or 1157 death. 1158 (J) Compensation or benefits are not payable to a claimant 1159 or a dependent during the period of confinement of the claimant 1160 or dependent in any state or federal correctional institution, 1161 or in any county jail in lieu of incarceration in a state or 1162 federal correctional institution, whether in this or any other 1163 state for conviction of violation of any state or federal 1164 criminal law. 1165 (K) An employer, upon the approval of the administrator, 1166 may provide for workers' compensation coverage for the 1167 employer's employees who are professional athletes and coaches 1168 by submitting to the administrator proof of coverage under a 1169 league policy issued under the laws of another state under 1170 either of the following circumstances: 1171 (1) The employer administers the payroll and workers' 1172 compensation insurance for a professional sports team subject to 1173 a collective bargaining agreement, and the collective bargaining 1174 agreement provides for the uniform administration of workers' 1175

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compensation benefits and compensation for professional

athletes.	1177
(2) The employer is a professional sports league, or is a	1178
member team of a professional sports league, and all of the	1179
following apply:	1180
(a) The professional sports league operates as a single	1181
entity, whereby all of the players and coaches of the sports	1182
league are employees of the sports league and not of the	1183
individual member teams.	1184
(b) The professional sports league at all times maintains	1185
workers' compensation insurance that provides coverage for the	1186
players and coaches of the sports league.	1187
(c) Each individual member team of the professional sports	1188
league, pursuant to the organizational or operating documents of	1189
the sports league, is obligated to the sports league to pay to	1190
the sports league any workers' compensation claims that are not	1191
covered by the workers' compensation insurance maintained by the	1192
sports league.	1193
If the administrator approves the employer's proof of	1194
coverage submitted under division (K) of this section, a	1195
professional athlete or coach who is an employee of the employer	1196
and the dependents of the professional athlete or coach are not	1197
entitled to apply for and shall not receive compensation or	1198
benefits under this chapter and Chapter 4121. of the Revised	1199
Code. The rights of such an athlete or coach and the dependents	1200
of such an athlete or coach under the laws of the state where	1201
the policy was issued are the exclusive remedy against the	1202
employer for the athlete or coach if the athlete or coach	1203
suffers an injury or contracts an occupational disease in the	1204
course of employment, or for the dependents of the athlete or	1205

the coach if the athlete or coach is killed as a result of an	1206
injury or dies as a result of an occupational disease,	1207
regardless of the location where the injury was suffered or the	1208
occupational disease was contracted.	1209
Sec. 4123.57. Partial disability compensation shall be	1210
paid as follows.	1211
Except as provided in this section, not earlier than	1212
twenty-six weeks after the date of termination of the latest	1213
period of payments under section 4123.56 of the Revised Code or	1214
twenty-six weeks after the termination of wages in lieu of those	1215
payments, or not earlier than twenty-six weeks after the date of	1216
the injury or contraction of an occupational disease in the	1217
absence of payments under section 4123.56 of the Revised Code or	1218
wages in lieu of those payments, the employee may file an	1219
application with the bureau of workers' compensation for the	1220
determination of the percentage of the employee's permanent	1221
partial disability resulting from an injury or occupational	1222
disease.	1223
Whenever the application is filed, the bureau shall send a	1224
copy of the application to the employee's employer or the	1225
employer's representative and shall schedule the employee for a	1226
medical examination by the bureau medical section. The bureau	1227
shall send a copy of the report of the medical examination to	1228
the employee, the employer, and their representatives.	1229
Thereafter, the administrator of workers' compensation shall	1230
review the employee's claim file and make a tentative order as	1231
the evidence before the administrator at the time of the making	1232
of the order warrants. If the administrator determines that	1233

there is a conflict of evidence, the administrator shall send

the application, along with the claimant's file, to the district

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hearing officer who shall set the application for a hearing.

If an employee fails to respond to an attempt to schedule 1237 a medical examination by the bureau medical section, or fails to 1238 attend a medical examination scheduled under this section 1239 without notice or explanation, the employee's application for a 1240 finding shall be dismissed without prejudice. The employee may 1241 refile the application. A dismissed application does not toll 1242 the continuing jurisdiction of the industrial commission under 1243 section 4123.52 of the Revised Code. The administrator shall 1244 adopt rules addressing the manner in which an employee will be 1245 notified of a possible dismissal and how an employee may refile 1246 an application for a determination. 1247

The administrator shall notify the employee, the employer, 1248 and their representatives, in writing, of the tentative order 1249 and of the parties' right to request a hearing. Unless the 1250 employee, the employer, or their representative notifies the 1251 administrator, in writing, of an objection to the tentative 1252 order within twenty days after receipt of the notice thereof, 1253 the tentative order shall go into effect and the employee shall 1254 receive the compensation provided in the order. In no event 1255 shall there be a reconsideration of a tentative order issued 1256 under this division. 1257

If the employee, the employer, or their representatives

timely notify the administrator of an objection to the tentative

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order, the matter shall be referred to a district hearing

officer who shall set the application for hearing with written

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notices to all interested persons. Upon referral to a district

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hearing officer, the employer may obtain a medical examination

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of the employee, pursuant to rules of the industrial commission.

(A) The district hearing officer, upon the application,

shall determine the percentage of the employee's permanent 1266 disability, except as is subject to division (B) of this 1267 section, based upon that condition of the employee resulting 1268 from the injury or occupational disease and causing permanent 1269 impairment evidenced by medical or clinical findings reasonably 1270 demonstrable. The employee shall receive sixty-six and two-1271 thirds per cent of the employee's average weekly wage, but not 1272 more than a maximum of thirty-three and one-third per cent of 1273 the statewide average weekly wage as defined in division (C) of 1274 section 4123.62 of the Revised Code, per week regardless of the 1275 average weekly wage, for the number of weeks which equals the 1276 percentage of two hundred weeks. Except on application for 1277 reconsideration, review, or modification, which is filed within 1278 ten days after the date of receipt of the decision of the 1279 district hearing officer, in no instance shall the former award 1280 be modified unless it is found from medical or clinical findings 1281 that the condition of the claimant resulting from the injury has 1282 so progressed as to have increased the percentage of permanent 1283 partial disability. A staff hearing officer shall hear an 1284 application for reconsideration filed and the staff hearing 1285 officer's decision is final. An employee may file an application 1286 for a subsequent determination of the percentage of the 1287 employee's permanent disability. If such an application is 1288 filed, the bureau shall send a copy of the application to the 1289 employer or the employer's representative. No sooner than sixty 1290 days from the date of the mailing of the application to the 1291 employer or the employer's representative, the administrator 1292 shall review the application. The administrator may require a 1293 medical examination or medical review of the employee. The 1294 administrator shall issue a tentative order based upon the 1295 evidence before the administrator, provided that if the 1296 1297 administrator requires a medical examination or medical review,

the administrator shall not issue the tentative order until the 1298 completion of the examination or review. 1299

The employer may obtain a medical examination of the 1300 employee and may submit medical evidence at any stage of the 1301 process up to a hearing before the district hearing officer, 1302 pursuant to rules of the commission. The administrator shall 1303 notify the employee, the employer, and their representatives, in 1304 writing, of the nature and amount of any tentative order issued 1305 on an application requesting a subsequent determination of the 1306 percentage of an employee's permanent disability. An employee, 1307 employer, or their representatives may object to the tentative 1308 order within twenty days after the receipt of the notice 1309 thereof. If no timely objection is made, the tentative order 1310 shall go into effect. In no event shall there be a 1311 reconsideration of a tentative order issued under this division. 1312 If an objection is timely made, the application for a subsequent 1313 determination shall be referred to a district hearing officer 1314 who shall set the application for a hearing with written notice 1315 to all interested persons. No application for subsequent 1316 percentage determinations on the same claim for injury or 1317 occupational disease shall be accepted for review by the 1318 district hearing officer unless supported by substantial 1319 evidence of new and changed circumstances developing since the 1320 time of the hearing on the original or last determination. 1321

No award shall be made under this division based upon a 1322 percentage of disability which, when taken with all other 1323 percentages of permanent disability, exceeds one hundred per 1324 cent. If the percentage of the permanent disability of the 1325 employee equals or exceeds ninety per cent, compensation for 1326 permanent partial disability shall be paid for two hundred 1327 weeks.

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Compensation payable under this division accrues and is	1329
payable to the employee from the date of last payment of	1330
compensation, or, in cases where no previous compensation has	1331
been paid, from the date of the injury or the date of the	1332
diagnosis of the occupational disease.	1333
When an award under this division has been made prior to	1334
the death of an employee, all unpaid installments accrued or to	1335
accrue under the provisions of the award are payable to the	1336
surviving spouse, or if there is no surviving spouse, to the	1337
dependent children of the employee, and if there are no children	1338
surviving, then to other dependents as the administrator	1339
determines.	1340
(B) For purposes of this division, "payable per week"	1341
	_
means the seven-consecutive-day period in which compensation is	1342
paid in installments according to the schedule associated with	1343
the applicable injury as set forth in this division.	1344
Compensation paid in weekly installments according to the	1345
schedule described in this division may only be commuted to one	1346
or more lump sum payments pursuant to the procedure set forth in	1347
section 4123.64 of the Revised Code.	1348
In cases included in the following schedule the	1349
compensation payable per week to the employee is the statewide	1350
average weekly wage as defined in division (C) of section	1351
4123.62 of the Revised Code per week and shall be paid in	1352
installments according to the following schedule:	1353
installments according to the following schedule:	1333
For the loss of a first finger, commonly known as a thumb,	1354
sixty weeks.	1355
For the loss of a second finger, commonly called index	1356
finger, thirty-five weeks.	1357
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For the loss of a third finger, thirty weeks.	1358
For the loss of a fourth finger, twenty weeks.	1359
For the loss of a fifth finger, commonly known as the	1360
little finger, fifteen weeks.	1361
The loss of a second, or distal, phalange of the thumb is	1362
considered equal to the loss of one half of such thumb; the loss	1363
of more than one half of such thumb is considered equal to the	1364
loss of the whole thumb.	1365
The loss of the third, or distal, phalange of any finger	1366
is considered equal to the loss of one-third of the finger.	1367
The loss of the middle, or second, phalange of any finger	1368
is considered equal to the loss of two-thirds of the finger.	1369
The loss of more than the middle and distal phalanges of	1370
any finger is considered equal to the loss of the whole finger.	1371
In no case shall the amount received for more than one finger	1372
exceed the amount provided in this schedule for the loss of a	1373
hand.	1374
For the loss of the metacarpal bone (bones of the palm)	1375
for the corresponding thumb, or fingers, add ten weeks to the	1376
number of weeks under this division.	1377
For ankylosis (total stiffness of) or contractures (due to	1378
scars or injuries) which makes any of the fingers, thumbs, or	1379
parts of either useless, the same number of weeks apply to the	1380
members or parts thereof as given for the loss thereof.	1381
If the claimant has suffered the loss of two or more	1382
fingers by amputation or ankylosis and the nature of the	1383
claimant's employment in the course of which the claimant was	1384
working at the time of the injury or occupational disease is	1385

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such that the impairment or disability resulting from the loss	1386
of fingers, or loss of use of fingers, exceeds the normal	1387
impairment or disability resulting from the loss of fingers, or	1388
loss of use of fingers, the administrator may take that fact	1389
into consideration and increase the award of compensation	1390
accordingly, but the award made shall not exceed the amount of	1391
compensation for loss of a hand.	1392
For the loss of a hand, one hundred seventy-five weeks.	1393
For the loss of an arm, two hundred twenty-five weeks.	1394
For the loss of a great toe, thirty weeks.	1395
For the loss of one of the toes other than the great toe,	1396
ten weeks.	1397
The loss of more than two-thirds of any toe is considered	1398
equal to the loss of the whole toe.	1399
The loss of less than two-thirds of any toe is considered	1400
no loss, except as to the great toe; the loss of the great toe	1401
up to the interphalangeal joint is co-equal to the loss of one-	1402
half of the great toe; the loss of the great toe beyond the	1403
interphalangeal joint is considered equal to the loss of the	1404
whole great toe.	1405
For the loss of a foot, one hundred fifty weeks.	1406
For the loss of a leg, two hundred weeks.	1407
For the loss of the sight of an eye, one hundred twenty-	1408
five weeks.	1409
For the permanent partial loss of sight of an eye, the	1410
portion of one hundred twenty-five weeks as the administrator in	1411
each case determines, based upon the percentage of vision	1412

actually lost as a result of the injury or occupational disease,	1413
but, in no case shall an award of compensation be made for less	1414
than twenty-five per cent loss of uncorrected vision. "Loss of	1415
uncorrected vision" means the percentage of vision actually lost	1416
as the result of the injury or occupational disease.	1417
For the permanent and total loss of hearing of one ear,	1418
twenty-five weeks; but in no case shall an award of compensation	1419
be made for less than permanent and total loss of hearing of one	1420
ear.	1421
For the permanent and total loss of hearing, one hundred	1422
twenty-five weeks; but, except pursuant to the next preceding	1423
paragraph, in no case shall an award of compensation be made for	1423
less than permanent and total loss of hearing.	1425
ress than permanent and total loss of hearing.	1425
In case an injury or occupational disease results in	1426
serious facial or head disfigurement which either impairs or may	1427
in the future impair the opportunities to secure or retain	1428
employment, the administrator shall make an award of	1429
compensation as it deems proper and equitable, in view of the	1430
nature of the disfigurement, and not to exceed the sum of ten	1431
thousand dollars. For the purpose of making the award, it is not	1432
material whether the employee is gainfully employed in any	1433
occupation or trade at the time of the administrator's	1434
determination.	1435
When an award under this division has been made prior to	1436
the death of an employee all unpaid installments accrued or to	1437
accrue under the provisions of the award shall be payable to the	1438
surviving spouse, or if there is no surviving spouse, to the	1439
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dependent children of the employee and if there are no such

children, then to such dependents as the administrator

determines.

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When an employee has sustained the loss of a member by	1443
severance, but no award has been made on account thereof prior	1444
to the employee's death, the administrator shall make an award	1445
in accordance with this division for the loss which shall be	1446
payable to the surviving spouse, or if there is no surviving	1447
spouse, to the dependent children of the employee and if there	1448
are no such children, then to such dependents as the	1449
administrator determines.	1450
(C) Compensation for partial impairment under divisions	1451
(A) and (B) of this section is in addition to the compensation	1452
paid the employee pursuant to section 4123.56 of the Revised	1453
Code. A claimant may receive compensation under divisions (A)	1454
and (B) of this section.	1455

In all cases arising under division (B) of this section, 1456 if it is determined by any one of the following: (1) the amputee 1457 clinic at University hospital, Ohio state university; (2) the 1458 opportunities for Ohioans with disabilities agency; (3) an 1459 amputee clinic or prescribing physician approved by the 1460 administrator or the administrator's designee, that an injured 1461 or disabled employee is in need of an artificial appliance, or 1462 in need of a repair thereof, regardless of whether the appliance 1463 or its repair will be serviceable in the vocational 1464 rehabilitation of the injured employee, and regardless of 1465 whether the employee has returned to or can ever again return to 1466 any gainful employment, the bureau shall pay the cost of the 1467 artificial appliance or its repair out of the surplus created by 1468 division (B) of section 4123.34 of the Revised Code. 1469

Notwithstanding any provision in this division to the contrary, when a claimant has sustained an amputation or a loss 1471 enumerated in division (B) of this section as a result of an 1472

injury or occupational disease, the administrator shall pay the	1473
cost to purchase, repair, or replace a prosthetic device as	1474
defined in division (B) of section 4123.52 from the surplus fund	1475
account created pursuant to division (B) of section 4123.34 of	1476

the Revised Code, even if no award has been made under division

(B) of this section.

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In those cases where an opportunities for Ohioans with 1479 disabilities agency's recommendation that an injured or disabled 1480 employee is in need of an artificial appliance would conflict 1481 with their state plan, adopted pursuant to the "Rehabilitation 1482 Act of 1973," 87 Stat. 355, 29 U.S.C.A. 701, the administrator 1483 or the administrator's designee or the bureau may obtain a 1484 recommendation from an amputee clinic or prescribing physician 1485 that they determine appropriate. 1486

(D) If an employee of a state fund employer makes 1487 application for a finding and the administrator finds that the 1488 employee has contracted silicosis as defined in division (Y), or 1489 coal miners' pneumoconiosis as defined in division (Z), or 1490 asbestosis as defined in division (BB) of section 4123.68 of the 1491 Revised Code, and that a change of such employee's occupation is 1492 medically advisable in order to decrease substantially further 1493 exposure to silica dust, asbestos, or coal dust and if the 1494 employee, after the finding, has changed or shall change the 1495 employee's occupation to an occupation in which the exposure to 1496 silica dust, asbestos, or coal dust is substantially decreased, 1497 the administrator shall allow to the employee an amount equal to 1498 fifty per cent of the statewide average weekly wage per week for 1499 a period of thirty weeks, commencing as of the date of the 1500 discontinuance or change, and for a period of one hundred weeks 1501 immediately following the expiration of the period of thirty 1502 weeks, the employee shall receive sixty-six and two-thirds per 1503

cent of the loss of wages resulting directly and solely from the 1504 change of occupation but not to exceed a maximum of an amount 1505 equal to fifty per cent of the statewide average weekly wage per 1506 week. No such employee is entitled to receive more than one 1507 allowance on account of discontinuance of employment or change 1508 of occupation and benefits shall cease for any period during 1509 which the employee is employed in an occupation in which the 1510 exposure to silica dust, asbestos, or coal dust is not 1511 substantially less than the exposure in the occupation in which 1512 the employee was formerly employed or for any period during 1513 which the employee may be entitled to receive compensation or 1514 benefits under section 4123.68 of the Revised Code on account of 1515 disability from silicosis, asbestosis, or coal miners' 1516 pneumoconiosis. An award for change of occupation for a coal 1517 miner who has contracted coal miners' pneumoconiosis may be 1518 granted under this division even though the coal miner continues 1519 employment with the same employer, so long as the coal miner's 1520 employment subsequent to the change is such that the coal 1521 miner's exposure to coal dust is substantially decreased and a 1522 change of occupation is certified by the claimant as permanent. 1523 The administrator may accord to the employee medical and other 1524 benefits in accordance with section 4123.66 of the Revised Code. 1525 (E) If a firefighter or police officer makes application 1526 for a finding and the administrator finds that the firefighter 1527 or police officer has contracted a cardiovascular and pulmonary 1528 disease as defined in division (W) of section 4123.68 of the 1529 Revised Code, and that a change of the firefighter's or police 1530 officer's occupation is medically advisable in order to decrease 1531 substantially further exposure to smoke, toxic gases, chemical 1532

fumes, and other toxic vapors, and if the firefighter, or police

officer, after the finding, has changed or changes occupation to

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an occupation in which the exposure to smoke, toxic gases, 1535 chemical fumes, and other toxic vapors is substantially 1536 decreased, the administrator shall allow to the firefighter or 1537 police officer an amount equal to fifty per cent of the 1538 statewide average weekly wage per week for a period of thirty 1539 weeks, commencing as of the date of the discontinuance or 1540 change, and for a period of seventy-five weeks immediately 1541 following the expiration of the period of thirty weeks the 1542 administrator shall allow the firefighter or police officer 1543 sixty-six and two-thirds per cent of the loss of wages resulting 1544 directly and solely from the change of occupation but not to 1545 exceed a maximum of an amount equal to fifty per cent of the 1546 statewide average weekly wage per week. No such firefighter or 1547 police officer is entitled to receive more than one allowance on 1548 account of discontinuance of employment or change of occupation 1549 and benefits shall cease for any period during which the 1550 firefighter or police officer is employed in an occupation in 1551 which the exposure to smoke, toxic gases, chemical fumes, and 1552 other toxic vapors is not substantially less than the exposure 1553 in the occupation in which the firefighter or police officer was 1554 formerly employed or for any period during which the firefighter 1555 or police officer may be entitled to receive compensation or 1556 benefits under section 4123.68 of the Revised Code on account of 1557 disability from a cardiovascular and pulmonary disease. The 1558 administrator may accord to the firefighter or police officer 1559 medical and other benefits in accordance with section 4123.66 of 1560 the Revised Code. 1561 (F) An order issued under this section is appealable 1562 pursuant to section 4123.511 of the Revised Code but is not 1563 appealable to court under section 4123.512 of the Revised Code. 1564

Sec. 4123.66. (A) In addition to the compensation provided

for in this chapter, the administrator of workers' compensation 1566 shall disburse and pay from the state insurance fund the amounts 1567 for medical, nurse, and hospital services and medicine as the 1568 administrator deems proper and, in case death ensues from the 1569 injury or occupational disease, the administrator shall disburse 1570 and pay from the fund reasonable funeral expenses in an amount 1571 not to exceed seven thousand five hundred dollars. The bureau of 1572 workers' compensation shall reimburse anyone, whether dependent, 1573 volunteer, or otherwise, who pays the funeral expenses of any 1574 employee whose death ensues from any injury or occupational 1575 disease as provided in this section. The administrator may adopt 1576 rules, with the advice and consent of the bureau of workers' 1577 compensation board of directors, with respect to furnishing 1578 medical, nurse, and hospital service and medicine to injured or 1579 disabled employees entitled thereto, and for the payment 1580 therefor. In case an injury or industrial accident that injures 1581 an employee also causes damage to the employee's eyeglasses, 1582 artificial teeth or other denture, or hearing aid, or in the 1583 event an injury or occupational disease makes it necessary or 1584 advisable to replace, repair, or adjust the same, the bureau 1585 shall disburse and pay a reasonable amount to repair or replace 1586 the same. 1587

(B) The administrator, in the rules the administrator 1588 adopts pursuant to division (A) of this section, may adopt rules 1589 specifying the circumstances under which the bureau may make 1590 immediate payment for the first fill of prescription drugs for 1591 medical conditions identified in an application for compensation 1592 or benefits under section 4123.84 or 4123.85 of the Revised Code 1593 that occurs prior to the date the administrator issues an 1594 initial determination order under division (B) of section 1595 4123.511 of the Revised Code. If the claim is ultimately 1596

disallowed in a final administrative or judicial order, and if 1597 the employer is a state fund employer who pays assessments into 1598 the surplus fund account created under section 4123.34 of the 1599 Revised Code, the payments for medical services made pursuant to 1600 this division for the first fill of prescription drugs shall be 1601 charged to and paid from the surplus fund account and not 1602 charged through the state insurance fund to the employer against 1603 whom the claim was filed. 1604

(C)(1) If an employer or a welfare plan has provided to or 1605 on behalf of an employee any benefits or compensation for an 1606 injury or occupational disease and that injury or occupational 1607 disease is determined compensable under this chapter, the 1608 employer or a welfare plan may request that the administrator 1609 reimburse the employer or welfare plan for the amount the 1610 employer or welfare plan paid to or on behalf of the employee in 1611 compensation or benefits. The administrator shall reimburse the 1612 employer or welfare plan for the compensation and benefits paid 1613 if, at the time the employer or welfare plan provides the 1614 benefits or compensation to or on behalf of employee, the injury 1615 or occupational disease had not been determined to be 1616 compensable under this chapter and if the employee was not 1617 receiving compensation or benefits under this chapter for that 1618 injury or occupational disease. The administrator shall 1619 reimburse the employer or welfare plan in the amount that the 1620 administrator would have paid to or on behalf of the employee 1621 under this chapter if the injury or occupational disease 1622 originally would have been determined compensable under this 1623 chapter. If the employer is a merit-rated employer, the 1624 administrator shall adjust the amount of premium next due from 1625 the employer according to the amount the administrator pays the 1626 employer. The administrator shall adopt rules, in accordance 1627

with Chapter 119. of the Revised Code, to implement this	1628
division.	1629
(2) As used in this division, "welfare plan" has the same	1630
meaning as in division (1) of 29 U.S.C.A. 1002.	1631
(D)(1) Subject to the requirements of division (D)(2) of	1632
this section, the administrator may make a payment of up to five	1633
hundred dollars to either of the following:	1634
(a) The centers of medicare and medicaid services, for	1635
reimbursement of conditional payments made pursuant to the	1636
"Medicare Secondary Payer Act," 42 U.S.C. 1395y;	1637
(b) The Ohio department of medicaid, or a medical	1638
assistance provider to whom the department has assigned a right	1639
of recovery for a claim for which the department has notified	1640
the provider that the department intends to recoup the	1641
department's prior payment for the claim, for reimbursement	1642
under sections 5160.35 to 5160.43 of the Revised Code for the	1643
cost of medical assistance paid on behalf of a medical	1644
assistance recipient.	1645
(2) The administrator may make a payment under division	1646
(D)(1) of this section if the administrator makes a reasonable	1647
determination that both-all of the following apply:	1648
(a) The payment is for reimbursement of benefits for an	1649
injury or occupational disease in response to a request from a	1650
party listed in division (D)(1) of this section.	1651
(b) The There is an injury or occupational disease that is	1652
compensable, or is likely to be compensable, under this chapter	1653
or Chapter 4121., 4127., or 4131. of the Revised Code.	1654
(c) The payment will resolve the request from a party	1655

compensation claims that have been reported to the professional employer organization in accordance with its internal reporting policies. (C) (1) If a professional employer organization that is a self-insuring employer is required to submit a workers! 1688 self-insuring employer is required to submit a workers! 1689 compensation lease termination notice form under division (E) of this section, not later than thirty calendar days after the 1691 lease termination the professional employer organization shall submit all of the following to the administrator for any years 1693 necessary for the administrator to develop a state fund experience medification factor for each client employer involved in the lease termination: (a) The payrell of each client employer involved in the lease termination, organized by manual classification and year; 1698 (b) The medical and indomnity costs of each client (c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial cubmission if the administrator determines that the information is necessary for the administrator determines that the information is necessary for the administrator to develop a state fund experience medification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712 provide information requested by the administrator under		
policies. 1687 (C) (1) If a professional employer organization that is a 1688 self-insuring employer is required to submit a workers' 1689 compensation lesse termination notice form under division (B) of 1690 this section, not later than thirty calendar days after the 1691 lease termination the professional employer organization shall 1692 submit all of the following to the administrator for any years 1693 necessary for the administrator to develop a state fund 1694 experience medification factor for each client employer involved 1695 in the lease termination: 1696 (a) The payroll of each client employer involved in the 1697 lease termination, organized by manual classification and years 1698 (b) The medical and indemnity costs of each client 1699 employer involved in the lease termination, organized by claims 1700 develop a state fund experience medification factor for each 1702 client employer involved in the lease termination. 1703 (2) The administrator may require a professional employer 1704 organization to submit the information required under division 1705 (C) (1) of this section at additional times after the initial 1706 submission if the administrator determines that the information 1707 is necessary for the administrator to develop a state fund 1708 experience medification factor. 1709 (3) The administrator may revoke or refuse to renew a 1710 professional employer organization's status as a self-insuring 1711 employer if the professional employer organization fails to 1712	compensation claims that have been reported to the professional	1685
(C) (1) If a professional employer organization that is a self-inouring employer is required to submit a workers' 1688 compensation lease termination notice form under division (B) of this section, not later than thirty calendar days after the 1691 lease termination the professional employer organization shall 1692 submit all of the following to the administrator for any years 1693 necessary for the administrator to develop a state fund 1694 experience modification factor for each client employer involved 1695 in the lease termination: 1696 (a) The payroll of each client employer involved in the 1697 lease termination, organized by manual classification and year; 1698 (b) The medical and indemnity costs of each client 1699 employer involved in the lease termination, organized by claim; 1700 develop a state fund experience modification factor for each 1702 client employer involved in the lease termination. 1703 (2) The administrator may require a prefessional employer 1704 organization to submit the information required under division 1705 (C) (1) of this section at additional times after the initial 1706 submission if the administrator determines that the information 1707 is necessary for the administrator determines that the information 1707 is necessary for the administrator to develop a state fund 1708 experience modification factor. 1709 The administrator may revoke or refuse to renew a 1710 professional employer organization's status as a self-incuring 1711 employer if the professional employer organization fails to 1712	employer organization in accordance with its internal reporting	1686
self-insuring employer is required to submit a workers! 1689 compensation lease termination notice form under division (B) of 1690 this section, not later than thirty calendar days after the 1691 lease termination the professional employer organization shall 1692 submit all of the following to the administrator for any years 1693 necessary for the administrator to develop a state fund 1694 experience modification factor for each client employer involved 1695 in the lease termination: 1696 (a) The payroll of each client employer involved in the 1697 lease termination, organized by manual classification and year; 1698 (b) The medical and indemnity costs of each client employer involved in the 1699 employer involved in the lease termination, organized by claim; 1700 (c) Any other information the administrator may require to 1701 develop a state fund experience modification factor for each 1702 client employer involved in the lease termination. 1703 (2) The administrator may require a professional employer 1704 organization to submit the information required under division 1705 (C) (1) of this section at additional times after the initial 1706 submission if the administrator determines that the information 1707 is necessary for the administrator determines that the information 1708 experience modification factor. 1709 (3) The administrator may revoke or refuse to renew a 1710 professional employer organization's status as a self-insuring 1711 employer if the professional employer organization fails to 1712	policies.	1687
compensation lease termination notice form under division (B) of this section, not later than thirty calendar days after the lease termination the professional employer organization shall lease termination the professional employer organization shall lease termination the professional employer organization shall lease termination for the administrator to develop a state fund experience modification factor for each client employer involved lease in the lease termination: (a) The payroll of each client employer involved in the lease termination, organized by manual classification and year; (b) The medical and indemnity costs of each client employer involved in the lease termination, organized by claim; (c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information loss experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring loss of the professional employer organization fails to loss of the professional employer organization fails to loss or loss of the professional employer organization fails to loss or loss of the professional employer organization fails to loss or	(C)(1) If a professional employer organization that is a	1688
this section, not later than thirty calendar days after the lease termination the professional employer organization shall submit all of the following to the administrator for any years necessary for the administrator to develop a state fund experience modification factor for each client employer involved in the lease termination: (a) The payroll of each client employer involved in the lease termination, organized by manual classification and year; (b) The medical and indemnity costs of each client employer involved in the lease termination, organized by claim; (c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (G) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator determines that the information in the administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring professional employer organization's status as a self-insuring in the lease termination organization fails to 1712	self-insuring employer is required to submit a workers'	1689
submit all of the following to the administrator for any years necessary for the administrator to develop a state fund (1694) experience modification factor for each client employer involved (1695) in the lease termination: (1696) (a) The payroll of each client employer involved in the (1697) lease termination, organized by manual classification and year; (1698) (b) The medical and indemnity costs of each client (1699) employer involved in the lease termination, organized by claim; (1700) (c) Any other information the administrator may require to (1701) develop a state fund experience modification factor for each (1702) elient employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (1705) (C) (1) of this section at additional times after the initial (1706) submission if the administrator determines that the information (1707) is necessary for the administrator to develop a state fund (1708) experience modification factor. (3) The administrator may revoke or refuse to renew a (1710) professional employer organization's status as a self-insuring (1711) employer if the professional employer organization fails to (1712)	compensation lease termination notice form under division (B) of	1690
submit all of the following to the administrator for any years necessary for the administrator to develop a state fund experience modification factor for each client employer involved in the lease termination: (a) The payroll of each client employer involved in the lease termination, organized by manual classification and year; (b) The medical and indemnity costs of each client employer involved in the lease termination, organized by claim; (c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information in 1707 is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring may be a state or state fund the professional employer organization fails to 1712	this section, not later than thirty calendar days after the	1691
necessary for the administrator to develop a state fund experience modification factor for each client employer involved in the lease termination: (a) The payroll of each client employer involved in the lease termination, organized by manual classification and year; (b) The medical and indemnity costs of each client employer involved in the lease termination, organized by claim; (c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring if the professional employer organization fails to	lease termination the professional employer organization shall	1692
experience modification factor for each client employer involved in the lease termination: (a) The payroll of each client employer involved in the lease termination, organized by manual classification and year; (b) The medical and indemnity costs of each client— (c) Any other information the administrator may require to develop a state fund experience modification factor for each— (c) The administrator may require a professional employer— (c) (1) of this section at additional times after the initial— submission if the administrator determines that the information— (3) The administrator may revoke or refuse to renew a professional employer— (3) The administrator may revoke or refuse to renew a professional employer— (3) The administrator may revoke or refuse to renew a professional employer— (3) The administrator may revoke or refuse to renew a professional employer— (3) The administrator may revoke or refuse to renew a professional employer— (3) The administrator may revoke or refuse to renew a professional employer— (3) The professional employer— (3) The administrator may revoke or refuse to renew a professional employer— (3) The professional employer— (4) The professional employer— (5) The professional employer— (6) The professional employer— (7) The professional employer— (8) The professional employer— (9) The professional employer— (10) The professional employer— (11) The professional employer— (12) The professional employer— (13) The professional employer— (14) The professional employer— (15) The professional employer— (16) The professional employer— (17) T	submit all of the following to the administrator for any years	1693
in the lease termination: (a) The payroll of each client employer involved in the lease termination, organized by manual classification and year, lease termination, organized by manual classification and year, lease termination, organized by claim, lease termination the administrator may require to leavelop a state fund experience modification factor for each client employer involved in the lease termination. lease termination. leavelop a state fund experience modification factor for each client employer involved in the lease termination. leavelop leavel	necessary for the administrator to develop a state fund-	1694
(a) The payroll of each client employer involved in the lease termination, organized by manual classification and year; (b) The medical and indemnity costs of each client (c) The medical and indemnity costs of each client (de) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to	experience modification factor for each client employer involved	1695
lease termination, organized by manual classification and year; (b) The medical and indemnity costs of each client employer involved in the lease termination, organized by claim; (c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712	in the lease termination:	1696
lease termination, organized by manual classification and year; (b) The medical and indemnity costs of each client employer involved in the lease termination, organized by claim; (c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712		1.607
(b) The medical and indomnity costs of each client 1699 employer involved in the lease termination, organized by claim, 1700 (c) Any other information the administrator may require to 1701 develop a state fund experience modification factor for each 1702 client employer involved in the lease termination. 1703 (2) The administrator may require a professional employer 1704 organization to submit the information required under division 1705 (C) (1) of this section at additional times after the initial 1706 submission if the administrator determines that the information 1707 is necessary for the administrator to develop a state fund 1708 experience modification factor. 1709 (3) The administrator may revoke or refuse to renew a 1710 professional employer organization's status as a self-insuring 1711 employer if the professional employer organization fails to 1712		
employer involved in the lease termination, organized by claim; (c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C)(1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712	lease termination, organized by manual classification and year;	1698
(c) Any other information the administrator may require to develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1701	(b) The medical and indemnity costs of each client	1699
develop a state fund experience modification factor for each client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to	employer involved in the lease termination, organized by claim;	1700
client employer involved in the lease termination. (2) The administrator may require a professional employer organization to submit the information required under division 1705 (C) (1) of this section at additional times after the initial 1706 submission if the administrator determines that the information 1707 is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a 1710 professional employer organization's status as a self-insuring 1711 employer if the professional employer organization fails to 1712	(c) Any other information the administrator may require to	1701
(2) The administrator may require a professional employer organization to submit the information required under division 1705 (C) (1) of this section at additional times after the initial 1706 submission if the administrator determines that the information 1707 is necessary for the administrator to develop a state fund 1708 experience modification factor. 1709 (3) The administrator may revoke or refuse to renew a 1710 professional employer organization's status as a self-insuring 1711 employer if the professional employer organization fails to 1712	develop a state fund experience modification factor for each	1702
organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712	client employer involved in the lease termination.	1703
organization to submit the information required under division (C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712		1.004
(C) (1) of this section at additional times after the initial submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712		
submission if the administrator determines that the information is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712		1705
is necessary for the administrator to develop a state fund experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712	(C) (1) of this section at additional times after the initial	1706
experience modification factor. (3) The administrator may revoke or refuse to renew a professional employer organization's status as a self-insuring employer if the professional employer organization fails to 1712	submission if the administrator determines that the information-	1707
(3) The administrator may revoke or refuse to renew a 1710 professional employer organization's status as a self-insuring 1711 employer if the professional employer organization fails to 1712	is necessary for the administrator to develop a state fund	1708
professional employer organization's status as a self-insuring 1711 employer if the professional employer organization fails to 1712	experience modification factor.	1709
employer if the professional employer organization fails to 1712	(3) The administrator may revoke or refuse to renew a	1710
	professional employer organization's status as a self-insuring	1711
provide information requested by the administrator under 1713	employer if the professional employer organization fails to	1712
	provide information requested by the administrator under-	1713

division (C) (1) or (2) of this section. 1714 (D) The administrator shall use the information provided 1715 under division (C) of this section to develop a state fund 1716 experience modification factor for each client employer involved 1717 in a lease termination with a professional employer organization 1718 that is a self-insuring employer. 1719 (E)(C) A professional employer organization shall report 1720 any transfer of employees between related professional employer 1721 organization entities or professional employer organization 1722 reporting entities to the administrator within fourteen calendar 1723 days after the date of the transfer on a form prescribed by the 1724 administrator. The If the professional employer organization is 1725 not a self-insuring employer, the professional employer 1726 organization or professional employer organization reporting 1727 entity shall include in the form all client payroll and claim 1728 information regarding the transferred employees listed in a 1729 format specified by the administrator and a notice of all 1730 workers' compensation claims that have been reported to the 1731 professional employer organization or professional employer 1732 organization reporting entity in accordance with the internal 1733 reporting policies of the professional employer organization or 1734 professional employer organization reporting entity. 1735 (F) Prior to entering into a professional employer 1736 organization agreement with a client employer, a professional 1737 employer organization shall disclose in writing to the client 1738 employer the reporting requirements that apply to the 1739 professional employer organization under division (C) of this 1740 section and that the administrator must develop a state fund-1741 experience modification factor for each client employer involved 1742 in a lease termination with a professional employer organization 1743

that is a self-insuring employer. 1744 Sec. 4133.10. (A) As used in this section, "self-insuring 1745 employer" has the same meaning as in section 4123.01 of the 1746 Revised Code. 1747 (B) Not later than thirty calendar days after the date on 1748 which an alternate employer organization agreement is 1749 terminated, the alternate employer organization is adjudged 1750 bankrupt, the alternate employer organization ceases operations 1751 within the state of Ohio, or the registration of the alternate 1752 employer organization is revoked, the alternate employer 1753 organization shall submit to the administrator of workers' 1754 compensation and each client employer associated with that 1755 alternate employer organization a completed workers' 1756 compensation lease termination notice form provided by the 1757 administrator. The If an alternate employer organization is not 1758 a self-insuring employer, the completed form shall include all 1759 client payroll and claim information listed in a format 1760 specified by the administrator and notice of all workers' 1761 compensation claims that have been reported to the alternate 1762 employer organization in accordance with its internal reporting 1763 policies. 1764 (C) (1) If a alternate employer organization that is a 1765 self-insuring employer is required to submit a workers' 1766 compensation lease termination notice form under division (B) of 1767 this section, not later than thirty calendar days after the 1768 lease termination the alternate employer organization shall 1769 submit all of the following to the administrator for any years 1770 necessary for the administrator to develop a state fund-1771 1772 experience modification factor for each client employer involved in the lease termination: 1773

(a) The payroll of each client employer involved in the	1774
lease termination, organized by manual classification and year;	1775
(b) The medical and indemnity costs of each client	1776
employer involved in the lease termination, organized by claim;	1777
(c) Any other information the administrator may require to	1778
develop a state fund experience modification factor for each	1779
client employer involved in the lease termination.	1780
(2) The administrator may require an alternate employer	1781
organization to submit the information required under division-	1782
(C) (1) of this section at additional times after the initial	1783
submission if the administrator determines that the information-	1784
is necessary for the administrator to develop a state fund-	1785
experience modification factor.	1786
(3) The administrator may revoke or refuse to renew an	1787
alternate employer organization's status as a self-insuring	1788
employer if the alternate employer organization fails to provide	1789
information requested by the administrator under division (C)(1)	1790
or (2) of this section.	1791
(D) The administrator shall use the information provided	1792
under division (C) of this section to develop a state fund-	1793
experience modification factor for each client employer involved	1794
in a lease termination with an alternate employer organization-	1795
that is a self-insuring employer.	1796
(E)(C) An alternate employer organization shall report any	1797
transfer of employees between related alternate employer	1798
organization entities to the administrator within fourteen	1799
calendar days after the date of the transfer on a form	1800
prescribed by the administrator. The If the alternate employer	1801
organization is not a self-insuring employer, the alternate	1802

employer organization shall include in the form all client	1803
payroll and claim information regarding the transferred	1804
employees listed in a format specified by the administrator and	1805
a notice of all workers' compensation claims that have been	1806
reported to the alternate employer organization in accordance	1807
with the internal reporting policies of the alternate employer	1808
organization.	1809
(F) Prior to entering into an alternate employer	1810
organization agreement with a client employer, an alternate	1811
employer organization shall disclose in writing to the client	1812
employer the reporting requirements that apply to the alternate-	1813
employer organization under division (C) of this section and	1814
that the administrator must develop a state fund experience	1815
modification factor for each client employer involved in a lease	1816
termination with an alternate employer organization that is a	1817
self-insuring employer.	1818
Sec. 4167.01. As used in this chapter:	1819
(A) "Public employer" means any of the following:	1820
(A) "Public employer" means any of the following:(1) The state and its instrumentalities;	1820 1821
(1) The state and its instrumentalities;	1821
(1) The state and its instrumentalities;(2) Any political subdivisions and their	1821 1822
(1) The state and its instrumentalities;(2) Any political subdivisions and their instrumentalities, including any county, county hospital,	1821 1822 1823
(1) The state and its instrumentalities;(2) Any political subdivisions and their instrumentalities, including any county, county hospital,municipal corporation, city, village, township, park district,	1821 1822 1823 1824
(1) The state and its instrumentalities; (2) Any political subdivisions and their instrumentalities, including any county, county hospital, municipal corporation, city, village, township, park district, school district, state institution of higher learning, public or	1821 1822 1823 1824 1825
(1) The state and its instrumentalities; (2) Any political subdivisions and their instrumentalities, including any county, county hospital, municipal corporation, city, village, township, park district, school district, state institution of higher learning, public or special district, state agency, authority, commission, or board;	1821 1822 1823 1824 1825 1826
(1) The state and its instrumentalities; (2) Any political subdivisions and their instrumentalities, including any county, county hospital, municipal corporation, city, village, township, park district, school district, state institution of higher learning, public or special district, state agency, authority, commission, or board; (3) Any other branch of public employment not mentioned in	1821 1822 1823 1824 1825 1826
(1) The state and its instrumentalities; (2) Any political subdivisions and their instrumentalities, including any county, county hospital, municipal corporation, city, village, township, park district, school district, state institution of higher learning, public or special district, state agency, authority, commission, or board; (3) Any other branch of public employment not mentioned in division (A)(1) or (2) of this section.	1821 1822 1823 1824 1825 1826 1827 1828

(F) "Undue hardship" means any requirement imposed under	1861
this chapter or a rule or order issued thereunder that would	1862
require a public employer to take an action with significant	1863
difficulty or expense when considered in light of all of the	1864
following factors:	1865
(1) The nature and cost of the action required under this	1866
chapter;	1867
(2) The overall financial resources of the public employer	1868
involved in the action;	1869
(3) The number of persons employed by the public employer	1870
at the particular location where the action may be required;	1871
(4) The effect on expenses and resources or the impact	1872
otherwise of the action required upon the operations of the	1873
public employer at the location where the action may be	1874
required;	1875
(5) The overall size of the public employer with respect	1876
to the number of its public employees;	1877
(6) The number, type, and location of the public	1878
employer's operations, including the composition, structure, and	1879
functions of the workforce of the public entity;	1880
(7) The geographic separateness, administrative, or fiscal	1881
relationship of the public employer's operations to the whole	1882
public employer.	1883
Sec. 4167.10. (A) In order to carry out the purposes of	1884
this chapter, the administrator of workers' compensation or the	1885
administrator's designee shall, as provided in this section,	1886
enter without delay during normal working hours and at other	1887
reasonable times, to inspect and investigate any plant,	1888

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facility, establishment, construction site, or any other area,	1889
workplace, or environment where work is being performed by a	1890
public employee of a public employer, and any place of	1891
employment and all pertinent conditions, structures, machines,	1892
apparatus, devices, equipment, and materials therein, and	1893
question privately any public employer, administrator,	1894
department head, operator, agent, or public employee. The	1895
authority to inspect and investigate includes the taking of	1896
environmental samples, the taking and obtaining of photographs	1897
related to the purposes of the inspection or investigation, the	1898
examination of records required to be kept under section 4167.11	1899
of the Revised Code and other documents and records relevant to	1900
the inspection and investigation, the issuance of subpoenas, and	1901
the conducting of tests and other studies reasonably calculated	1902
to serve the purposes of implementing and enforcing this	1903
chapter. Except as provided in this section, the administrator	1904
or the administrator's designee shall conduct <u>scheduled</u> _the_	1905
inspections and investigations only pursuant to rules adopted	1906
under section 4167.02 of the Revised Code, a request to do so by	1907
a public employee or public employee representative, or the	1908
notification the administrator receives pursuant to division (B)	1909
of section 4167.06 of the Revised Code and only if the	1910
administrator or the administrator's designee complies with this	1911
section. The administrator or the administrator's designee shall	1912
conduct all requested or required inspections within a	1913
reasonable amount of time following receipt of the request or	1914
notification.	1915

(B) (1) Any public employee or public employee 1916 representative who believes that a violation of an Ohio 1917 employment risk reduction standard exists that threatens 1918 physical harm, or that an imminent danger exists, may request an 1919

inspection by giving written notice to the administrator or the 1920 administrator's designee of the violation or danger. The notice 1921 shall set forth with reasonable particularity the grounds for 1922 the notice, and shall be signed by the public employee or public 1923 employee representative. The names of individual public 1924 employees making the notice or referred to therein shall not 1925 appear in the copy provided to the public employer pursuant to 1926 division (B)(2) of this section and shall be kept confidential. 1927 (2) If, upon receipt of a notification pursuant to 1928 division (B)(1) of this section, the administrator determines 1929 that there are no reasonable grounds to believe that a violation 1930 or danger exists, the administrator shall inform the public 1931 employee or public employee representative in writing of the 1932 determination. If, upon receipt of a notification, the 1933 administrator determines that there are reasonable grounds to 1934 believe that a violation or danger exists, the administrator 1935 shall, within one week, excluding Saturdays, Sundays, and any 1936 legal holiday as defined in section 1.14 of the Revised Code, 1937 after receipt of the notification, notify the public employer, 1938 by certified mail, return receipt requested, of the alleged 1939 violation or danger. The notice provided to the public employer 1940 or the public employer's agent shall inform the public employer 1941 of the alleged violation or danger and that the administrator or 1942 the administrator's designee will investigate and inspect the 1943 public employer's workplace as provided in this section. The 1944 public employer must respond to the administrator, in a method 1945 determined by the administrator, concerning the alleged 1946 violation or danger, within thirty days after receipt of the 1947

notice. If the public employer does not correct the violation or

fails to respond within that time period, the administrator or

danger within the thirty-day period or if the public employer

1948

1949

the administrator's designee shall investigate and inspect the 1951 public employer's workplace as provided in this section. The 1952 administrator or the administrator's designee shall not conduct 1953 any inspection prior to the end of the thirty-day period unless 1954 requested or permitted by the public employer. The administrator 1955 may, at any time upon the request of the public employer, 1956 inspect and investigate any violation or danger alleged to exist 1957 at the public employer's place of employment. 1958

- (3) The authority of the administrator or the 1959 1960 administrator's designee to investigate and inspect a premises pursuant to a public employee or public employee representative 1961 notification is not limited to the alleged violation or danger 1962 contained in the notification. The administrator or the 1963 administrator's designee may investigate and inspect any other 1964 area of the premises where there is reason to believe that a 1965 violation or danger exists. In addition, if the administrator or 1966 the administrator's designee detects any obvious or apparent 1967 violation at any temporary place of employment while en route to 1968 the premises to be inspected or investigated, and that violation 1969 presents a substantial probability that the condition or 1970 practice could result in death or serious physical harm, the 1971 administrator or the administrator's designee may use any of the 1972 enforcement mechanisms provided in this section to correct or 1973 remove the condition or practice. 1974
- (4) If, during an inspection or investigation, the 1975 administrator or the administrator's designee finds any 1976 condition or practice in any place of employment that presents a 1977 substantial probability that the condition or practice could 1978 result in death or serious physical harm, after notifying the 1979 employer of the administrator's intent to issue an order, the 1980 administrator shall issue an order, or the administrator's 1981

designee shall issue an order after consultation with the	1982
administrator and upon the recommendation of the administrator,	1983
which prohibits the employment of any public employee or any	1984
continuing operation or process under such condition or practice	1985
until necessary steps are taken to correct or remove the	1986
condition or practice. The order shall not be effective for more	1987
than fifteen days, unless a court of competent jurisdiction	1988
otherwise orders as provided in section 4167.14 of the Revised	1989
Code.	1990

- (C) In making any inspections or investigations under this 1991 chapter, the administrator or the administrator's designee may 1992 administer oaths and require, by subpoena, the attendance and 1993 testimony of witnesses and the production of evidence under 1994 oath. Witnesses shall receive the fees and mileage provided for 1995 under section 119.094 of the Revised Code. In the case of 1996 contumacy, failure, or refusal of any person to comply with an 1997 order or any subpoena lawfully issued, or upon the refusal of 1998 any witness to testify to any matter regarding which the witness 1999 may lawfully be interrogated, a judge of the court of common 2000 pleas of any county in this state, on the application of the 2001 administrator or the administrator's designee, shall issue an 2002 order requiring the person to appear and to produce evidence if, 2003 as, and when so ordered, and to give testimony relating to the 2004 matter under investigation or in question. The court may punish 2005 any failure to obey the order of the court as a contempt 2006 thereof. 2007
- (D) If, upon inspection or investigation, the 2008 administrator or the administrator's designee believes that a 2009 public employer has violated any requirement of this chapter or 2010 any rule, Ohio employment risk reduction standard, or order 2011 adopted or issued pursuant thereto, the administrator or the 2012

administrator's designee shall, with reasonable promptness, 2013 issue a citation to the public employer. The citation shall be 2014 in writing and describe with particularity the nature of the 2015 alleged violation, including a reference to the provision of 2016 law, Ohio employment risk reduction standard, rule, or order 2017 alleged to have been violated. In addition, the citation shall 2018 fix a time for the abatement of the violation, as provided in 2019 division (H) of this section. The administrator may prescribe 2020 procedures for the issuance of a notice with respect to minor 2021 violations and for enforcement of minor violations that have no 2022 direct or immediate relationship to safety or health. 2023 (E) Upon receipt of any citation under this section, the 2024 public employer shall immediately post the citation, or a copy 2025 thereof, at or near each place an alleged violation referred to 2026

(F) The administrator may not issue a citation under this 2028 section after the expiration of six months following the final 2029 occurrence of any violation. 2030

2027

in the citation occurred.

(G) If the administrator issues a citation pursuant to 2031 this section, the administrator shall mail the citation to the 2032 public employer by certified mail, return receipt requested. The 2033 public employer has fourteen days after receipt of the citation 2034 within which to notify the administrator that the employer 2035 wishes to contest the citation. If the employer notifies the 2036 administrator within the fourteen days that the employer wishes 2037 to contest the citation, or if within fourteen days after the 2038 issuance of a citation a public employee or public employee 2039 representative files notice that the time period fixed in the 2040 citation for the abatement of the violation is unreasonable, the 2041 administrator shall hold an adjudication hearing in accordance 2042 with Chapter 119. of the Revised Code. 2043

- (H) In establishing the time limits in which a public 2044 employer must abate a violation under this section, the 2045 administrator shall consider the costs to the public employer, 2046 the size and financial resources of the public employer, the 2047 severity of the violation, the technological feasibility of the 2048 public employer's ability to comply with requirements of the 2049 2050 citation, the possible present and future detriment to the health and safety of any public employee for failure of the 2051 2052 public employer to comply with requirements of the citation, and such other factors as the administrator determines appropriate. 2053 The administrator may, after considering the above factors, 2054 permit the public employer to comply with the citation over a 2055 period of up to two years and may extend that period an 2056 additional one year, as the administrator determines 2057 2058 appropriate.
- (I) Any public employer may request the administrator to 2059 conduct an employment risk reduction inspection of the public 2060 employer's place of employment. The administrator or the 2061 administrator's designee shall conduct the inspection within a 2062 reasonable amount of time following the request. Neither the 2063 2064 administrator nor any other person may use any information obtained from the inspection for a period not to exceed three 2065 years in any proceeding for a violation of this chapter or any 2066 rule or order issued thereunder nor in any other action in any 2067 court in this state. 2068

Sec. 5145.163. (A) As used in this section:

(1) "Customer model enterprise" means an enterprise 2070 conducted under a federal prison industries enhancement 2071 certification program in which a private party participates in 2072

out of participation in authorized work activity in the federal

prison industries enhancement certification program may request	2130
the department file a claim—for compensation or benefits—with	2131
the bureau of workers' compensation under Chapters 4121. $ au$ and	2132
4123., 4127., and 4131. of the Revised Code—while the claimant—	2133
is in the custody of the department within the timeframe	2134
provided for in section 4123.84 or 4123.85 of the Revised Code.	2135
(2) The dependent of an inmate incarcerated worker who is	2136
killed or dies as the result of an <u>injury or</u> occupational	2137
disease contracted in the course of and arising out of	2138
participation in authorized work activity in the federal prison	2139
industries enhancement certification program may request the	2140
department file a claim for compensation and benefits with the	2141
<u>bureau</u> under Chapters 4121. $_{ au}$ and 4123. $_{ au}$ 4127. $_{ au}$ and 4131. of the	2142
Revised Code within the timeframe provided for in section	2143
4123.84 or 4123.85 of the Revised Code. A party may use the	2144
appeals process under Chapters 4121. and 4123. of the Revised	2145
Code regarding applications filed under division (F)(2) of this	2146
section.	2147
(G) Notwithstanding any provision of Chapter 4121. or	2148
4123. of the Revised Code to the contrary, an inmate who files a	2149
claim pursuant to this section if the department determines that	2150
an incarcerated worker was injured or contracted an occupational	2151
disease in the course of and arising out of participation in	2152
authorized work activity in the federal prison industries	2153
enhancement certification program, whether by external	2154
accidental means or accidental in character or result, both of	2155
the following apply to the individual while that individual is	2156
in the custody of the department:	2157
(1) The individual may receive medical treatment for the	2158
injury or occupational disease.	2159

(2) The individual is barred from filing for compensation 2160 with the department or the bureau. 2161 shall receive (H) While an injured incarcerated worker is 2162 in the custody of the department, medical recommendations 2163 pertaining to, and medical treatment and have medical 2164 determinations for purposes of Chapter 4121. and 4123. of the 2165 Revised Code made by the department's medical providers for, the 2166 injured incarcerated worker shall be provided exclusively 2167 through the department's network of providers. Medical 2168 (I) Claim allowance determinations made by the 2169 department's providers department shall be limited to initial 2170 claim allowances and requests for additional conditions. The 2171 claimant An injured incarcerated worker may request appeal the 2172 department's claim allowance determination or medical treatment 2173 determination by requesting a review by the department's chief 2174 medical officer. In the event of an-a further appeal, the 2175 claimant—injured incarcerated worker may receive a medical 2176 evaluation from a medical practitioner affiliated within the 2177 department's network of third-party medical contractors or a 2178 medical practitioner in a managed care organization certified by 2179 the bureau of workers' compensation under section 4121.44 of the 2180 Revised Code and located in Franklin county. 2181 (H) In (J) Except for appeals regarding determinations 2182 under division (I) of this section, and notwithstanding any 2183 provision of Chapter 4121. or 4123. of the Revised Code to the 2184 contrary, an injured incarcerated worker is barred from 2185 appealing a determination made under this section while 2186 2187 incarcerated. (K) After an injured incarcerated worker is released from 2188 incarceration, all of the following apply: 2189

(1) A party may use the appeals process under Chapters	2190
4121. and 4123. of the Revised Code regarding any application	2191
filed by an injured incarcerated worker.	2192
(2) The released individual may receive medical treatment	2193
consistent with Chapters 4121. and 4123. of the Revised Code.	2194
(3) The released individual may seek compensation through	2195
the bureau consistent with Chapters 4121. and 4123. of the	2196
Revised Code.	2197
(L) Except for medical treatment as allowed under division	2198
(G) of this section, in accordance with division (J) of section	2199
4123.54 of the Revised Code, compensation or $\underline{\text{medical}}$ benefits	2200
are not payable to or on behalf of a claimant <u>an injured</u>	2201
incarcerated worker during the period of confinement of the	2202
claimant injured incarcerated worker in any correctional	2203
institution—or county jail. Any remaining amount of an award of	2204
compensation or benefits for an injury or occupational disease	2205
arising out of participation in authorized work activity in the-	2206
federal prison industries enhancement certification program-	2207
shall be paid to or on behalf of a claimant after the claimant	2208
is released from imprisonment. If a claimant an injured	2209
<pre>incarcerated worker is reimprisoned within the custody of the</pre>	2210
department, compensation and benefits—shall be suspended during	2211
the claimant's <u>injured incarcerated worker's</u> imprisonment but	2212
shall may resume on the claimant's worker's release from	2213
imprisonment. The department may pay for medical benefits in	2214
accordance with division (G) of this section.	2215
(I) (M) After an injured incarcerated worker is released	2216
from the department's custody, regardless of whether the worker	2217
worked in a customer model enterprise or an employer model	2218
enterprise, all claim costs, other than medical costs paid by	2219

the department while the worker was in the department's custody, 2220 shall be paid by the department in accordance with the 2221 requirements of Chapters 4121. and 4123. of the Revised Code. 2222 (N) An inmate incarcerated worker shall voluntarily 2223 consent to participate in a federal prison industries 2224 enhancement certification program prior to commencing 2225 participation in the program. Such consent disclaims the 2226 inmate's worker's ability to choose a medical provider while the 2227 inmate worker is imprisoned and subjects the inmate worker to 2228 2229 the requirements of this section. Section 2. That existing sections 4121.12, 4121.121, 2230 4121.13, 4123.44, 4123.52, 4123.54, 4123.57, 4123.66, 4125.07, 2231 4133.10, 4167.01, 4167.10, and 5145.163 of the Revised Code are 2232 hereby repealed. 2233 Section 3. That sections 4167.25, 4167.27, and 4167.28 of 2234 2235 the Revised Code are hereby repealed. Section 4. All items in this act are hereby appropriated 2236 out of any moneys in the state treasury to the credit of the 2237 designated fund. For all appropriations made in this act, those 2238 in the first column are for fiscal year 2026 and those in the 2239 second column are for fiscal year 2027. 2240 2241 1 2 3 5 4

A BWC BUREAU OF WORKERS COMPENSATION

- B Dedicated Purpose Fund Group
- C 7023 855407 Claims, Risk and Medical \$123,887,269 \$128,050,202

 Management

Am. H. B. No. 81
As Reported by the Senate Financial Institutions, Insurance and Technology Committee

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 , 000	\$75 , 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	\$41,300,000	\$41,300,000
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
N	Dedic	cated Pu	rpose Fund Group Total	\$378,681,488	\$386,300,312
0	Feder	ral Fund	Group		
Р	3490	855601	OSHA Enforcement	\$1,751,293	\$1,751,293
Q	3FW0	855614	BLS SOII Grant	\$199,000	\$199,000
R	Feder	al Fund	Group Total	\$1,950,293	\$1,950,293

S TOTAL ALL BUDGET FUND GROUPS \$380,631,781 \$388,250,605 Section 5. WORKERS' COMPENSATION FRAUD UNIT 2242 Of the foregoing appropriation item 855410, Attorney 2243 General Payments, \$869,610 in fiscal year 2026 and \$900,046 in 2244 fiscal year 2027 shall be used to fund the expenses of the 2245 Workers' Compensation Fraud Unit within the Attorney General's 2246 Office. These payments shall be processed at the beginning of 2247 each quarter of each fiscal year and deposited into the Workers' 2248 Compensation Section Fund (Fund 1950) used by the Attorney 2249 General. 2250 SAFETY AND HYGIENE 2251 Notwithstanding section 4121.37 of the Revised Code, as 2252 directed by the Bureau of Workers' Compensation, the Treasurer 2253 of State shall remit up to \$80,721,244 cash in fiscal year 2026 2254 and up to \$82,531,721 cash in fiscal year 2027 from the State 2255 Insurance Fund to the state treasury to the credit of the Safety 2256 and Hygiene Fund (Fund 8260) to be used to fund appropriation 2257 lines 855609 for the purpose of operating a Safety and Hygiene 2258 program, 855610 to be used for Safety Grants, 855611 for the 2259 purpose of operating a Health and Wellness Program, 855612 for 2260 the purpose of operating a statewide safety awareness and 2261 education campaign, and 855619 for the purpose of funding a 2262 workforce safety innovation center program. 2263 FEDERAL GRANT PROGRAMS 2264 The foregoing appropriation item 855609, Safety and 2265 Hygiene Operating, may be used to provide the state match for 2266 federal grant funding received by the Division of Safety and 2267 Hygiene. 2268

item 965604, Deputy Inspector General for the Bureau of Workers'	2298
Compensation and Industrial Commission.	2299
Section 7. The amendment of sections 4123.52 and 4123.57	2300
of the Revised Code by this act applies to claims pending on or	2301
arising on or after the effective date of this section.	2302
Section 8. This Section and Sections 4, 5, and 6 of this	2303
act are exempt from the referendum under Ohio Constitution,	2304
Article II, Section 1d and section 1.471 of the Revised Code and	2305
therefore take effect immediately when this act becomes law.	2306
Section 9. The General Assembly, applying the principle	2307
stated in division (B) of section 1.52 of the Revised Code that	2308
amendments are to be harmonized if reasonably capable of	2309
simultaneous operation, finds that the following sections,	2310
presented in this act as composites of the sections as amended	2311
by the acts indicated, are the resulting versions of the	2312
sections in effect prior to the effective date of the sections	2313
as presented in this act:	2314
Section 4123.52 of the Revised Code as amended by both	2315
H.B. 33 of the 135th General Assembly and H.B. 81 of the 133rd	2316
General Assembly.	2317
Section 4123.57 of the Revised Code as amended by both	2318
	2319
H.B. 75 and H.B. 281 of the 134th General Assembly.	2319