

As Introduced

136th General Assembly

Regular Session

2025-2026

H. B. No. 900

Representative Brewer

Cosponsors: Representatives Lett, Upchurch, Grim, McNally

To enact sections 3701.147 and 3701.148 of the
Revised Code to create the Office of Violence
Prevention within the Department of Health and
to make an appropriation.

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

Section 1. That sections 3701.147 and 3701.148 of the
Revised Code be enacted to read as follows:

Sec. 3701.147. (A) The office of violence prevention is
created in the department of health. The purpose of the office
is to coordinate, support, and fund community violence
intervention strategies and hospital violence intervention
strategies that reduce firearm-related injury and death through
evidence-based approaches aligned with public health.

(B) The office shall do all of the following regarding
community violence intervention programs:

(1) With assistance from the department of health,
annually identify the top fifteen counties in Ohio with the
highest incidence of firearm-related violence and publish the
methodology used to determine the county rankings, including
data sources, indicators, and weighting;

(2) (a) In accordance with rules adopted under division (J) 20
of this section and to the extent that funding is available, 21
develop and administer competitive and formula-based grants to 22
support community violence intervention programs operating 23
within the fifteen counties identified pursuant to division (B) 24
(1) of this section, prioritizing funding for programs that 25
utilize evidence-based or evidence-informed strategies, 26
including: 27

(i) Street outreach and credible messenger programs; 28

(ii) Group violence reduction strategies; 29

(iii) Trauma recovery and wraparound supports; 30

(iv) Community-led conflict mediation and prevention 31
initiatives. 32

(b) The office may reserve up to five per cent of grant 33
funds for communities not identified pursuant to division (B) (1) 34
of this section but that demonstrate a significant or emerging 35
burden of firearm-related violence. 36

(3) Support the development and sustainability of the 37
community violence intervention workforce by doing all of the 38
following: 39

(a) Providing or funding training, certification, and 40
professional development for outreach workers, credible 41
messengers, and related personnel; 42

(b) Supporting organizational capacity building for 43
community-based organizations, including fiscal management, data 44
collection, and compliance; 45

(c) Promoting worker wellness and safety practices. 46

(4) Offer training, capacity building, and technical assistance to local governments, nonprofit organizations, and community-based partners implementing community violence intervention strategies; 47
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(5) Enter into agreements with public universities or research institutions to evaluate the programs funded under division (B)(2) of this section, including their impact on shootings, homicides, and other relevant outcomes. 51
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(C) The office shall do both of the following regarding hospital violence intervention programs: 55
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(1) Establish a statewide hospital violence intervention program initiative to ensure that all level I and level II trauma centers in Ohio implement evidence-based or evidence-informed bedside intervention and referral practices for victims of firearm-related injury, including standardized statewide protocols regarding the following: 57
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(a) Bedside engagement by trained intervention specialists; 63
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(b) Warm handoffs to community violence intervention programs; 65
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(c) Capacity for on-call responses twenty-four hours a day and seven days a week; 67
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(d) Follow-up case management and trauma recovery services. 69
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(2) Provide funding, technical assistance, and training to hospitals to support the implementation of hospital violence intervention programs. 71
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(D) The office may convene an advisory group to assist 74

with funding programs under division (B) (2) of this section by 75
providing recommendations on program design, funding priorities, 76
and program evaluation. The advisory group may be composed of 77
the following members: 78

(1) Individuals with lived experience of community 79
violence; 80

(2) Individuals representing community-based 81
organizations, local governments, hospitals, and victim services 82
providers. 83

(E) The office shall encourage coordination between 84
community violence intervention programs, hospital violence 85
intervention programs, and local law enforcement agencies to 86
improve public safety, information sharing, and worker safety. 87
Nothing in this section shall be construed to mandate 88
operational integration between community violence intervention 89
programs, hospital violence intervention programs, and law 90
enforcement or to modify the authority of law enforcement 91
agencies. 92

(F) (1) The office shall develop a statewide data system to 93
track referrals, service engagement, and outcomes for 94
individuals served through community violence intervention 95
programs and hospital violence intervention programs. 96

(2) Community violence intervention programs and hospital 97
violence intervention programs that receive funds under this 98
section shall participate in the statewide data system. 99

(G) The office shall consult with the department of 100
medicaid to identify and pursue opportunities to receive 101
medicaid reimbursement for the provision of community violence 102
intervention and hospital violence intervention services 103

<u>including care coordination, case management, and trauma</u>	104
<u>recovery supports.</u>	105
<u>(H) The office shall publish the following on the</u>	106
<u>department of health's internet web site:</u>	107
<u>(1) Beginning one year after the effective date of this</u>	108
<u>section and annually thereafter, a report that includes all of</u>	109
<u>the following:</u>	110
<u>(a) Statewide firearm-related injury and death trends;</u>	111
<u>(b) The impact of community violence intervention programs</u>	112
<u>and hospital violence intervention programs;</u>	113
<u>(c) The estimated fiscal impact of firearm-related</u>	114
<u>violence on state and local systems including health care,</u>	115
<u>emergency response services, and criminal justice and the extent</u>	116
<u>to which community violence intervention programs may reduce</u>	117
<u>such costs.</u>	118
<u>(2) Beginning one year after the effective date of this</u>	119
<u>section and every four years thereafter, with interim updates as</u>	120
<u>needed, a report detailing a four-year statewide violence</u>	121
<u>prevention plan that includes all of the following:</u>	122
<u>(a) An analysis of statewide and local trends in firearm-</u>	123
<u>related injury and death;</u>	124
<u>(b) Measurable goals and benchmarks for reducing community</u>	125
<u>violence;</u>	126
<u>(c) Strategies to coordinate public health, public safety,</u>	127
<u>victim services, and trauma services;</u>	128
<u>(d) Identification of gaps in community violence</u>	129
<u>intervention services and capacity limits for service provision</u>	130

<u>in communities with a high burden of violence.</u>	131
<u>(I) The violence prevention fund is created in the state</u>	132
<u>treasury, consisting of funds appropriated by the general</u>	133
<u>assembly. The office of violence prevention shall use the money</u>	134
<u>in the fund only for the following:</u>	135
<u>(1) Personnel, operations, and administration of the</u>	136
<u>office of violence prevention;</u>	137
<u>(2) Fulfillment of the requirements of this section;</u>	138
<u>(3) The provision of victim services and the operation of</u>	139
<u>trauma recovery programs.</u>	140
<u>(J) The director of health shall adopt rules as necessary</u>	141
<u>to implement this section, including rules regarding eligibility</u>	142
<u>for grants issued under division (B) (2) of this section,</u>	143
<u>reporting requirements for grant recipients, and standards for</u>	144
<u>the office to use when evaluating grant recipients.</u>	145
Sec. 3701.148. <u>(A) The office of violence prevention shall</u>	146
<u>establish regional community violence intervention coordination</u>	147
<u>hubs responsible for linking hospitals, community violence</u>	148
<u>intervention programs, local health departments, and victim</u>	149
<u>services providers.</u>	150
<u>(B) Each regional community violence intervention hub</u>	151
<u>shall have a regional coordinator that is responsible for the</u>	152
<u>following:</u>	153
<u>(1) Overseeing referral pathways;</u>	154
<u>(2) Supporting data collection and reporting;</u>	155
<u>(3) Facilitating cross-system collaboration;</u>	156
<u>(4) Providing technical assistance to local partners.</u>	157

Section 2. By December 31, 2030, a representative of the Office of Violence Prevention shall appear before the standing committees of the House of Representatives and the Senate that have jurisdiction over public health and public safety to present the following information:

(A) The results of evaluations of community violence intervention programs and hospital violence intervention programs funded pursuant to section 3701.147 of the Revised Code;

(B) The fiscal impact of community violence intervention programs and hospital violence intervention programs;

(C) Recommendations regarding future appropriations to the Office of Violence Prevention.

Section 3. All items in this act are hereby appropriated as designated out of any moneys in the state treasury to the credit of the designated fund. For all operating appropriations made in this act, those in the first column are for fiscal year 2026 and those in the second column are for fiscal year 2027. The operating appropriations made in this act are in addition to any other operating appropriations made for these fiscal years.

Section 4.

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A		DOH DEPARTMENT OF HEALTH		
B	Dedicated Purpose Fund Group			
C	5DU1 4406B2 Violence Prevention		\$0	\$30,000,000

D	Dedicated Purpose Fund Group Total	\$0	\$30,000,000
E	TOTAL ALL BUDGET FUND GROUPS	\$0	\$30,000,000

VIOLENCE PREVENTION 180

The foregoing appropriation item 4406B2, Violence 181
Prevention, shall be used to support the operations of the 182
Office of Violence Prevention, to award grants to support 183
community violence intervention programs, and to support 184
hospital violence intervention programs. When awarding grants, 185
the Office shall distribute at least eighty per cent of these 186
funds to community violence intervention programs operating in 187
the fifteen counties identified in division (B)(1) of section 188
3701.147 of the Revised Code. 189

TRANSFER OF UNCLAIMED FUNDS TO THE VIOLENCE PREVENTION 190
FUND 191

Notwithstanding division (A) of section 169.05 of the 192
Revised Code, on July 1, 2026, or as soon as possible 193
thereafter, the Director of Budget and Management shall request 194
the Director of Commerce to transfer to the Violence Prevention 195
Fund (Fund 5DU1) \$30,000,000 of unclaimed funds that have been 196
reported by holders of unclaimed funds under section 169.05 of 197
the Revised Code, irrespective of the allocation of the 198
unclaimed funds under that section. 199

Section 5. Within the limits set forth in this act, the 200
Director of Budget and Management shall establish accounts 201
indicating the source and amount of funds for each appropriation 202
made in this act, and shall determine the manner in which 203
appropriation accounts shall be maintained. Expenditures from 204
operating appropriations contained in this act shall be 205

accounted for as though made in, and are subject to all 206
applicable provisions of, H.B. 96 of the 136th General Assembly. 207