

Ohio Legislative Service Commission

Office of Research and Drafting

Legislative Budget Office

Substitute Bill Comparative Synopsis

Sub. H.B. 7 135th General Assembly

House Families and Aging

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Overview

The substitute bill, I_135_0633-4, replaces provisions of the As Introduced version of the Strong Foundations Act stating the General Assembly's intent to support strong foundations for mothers and babies to address maternal and infant mortality and improve health and developmental outcomes, with the following provisions:

Doula services

(R.C. 4723.89, 4723.90, 5120.658, and 5164.071)

- Requires the Board of Nursing to establish a registry of certified doulas.
- Establishes the Doula Advisory Board within the Board of Nursing.
- Establishes a program in the Department of Rehabilitation and Correction for certified doulas to provide doula services to inmates participating in a prison nursery program.
- Establishes a program in the Department of Medicaid (ODM) to cover doula services provided by a certified doula with a Medicaid provider agreement.

Pregnancy and postpartum mobile application

(Sections 4 and 12)

- Requires the Department of Health (ODH), in collaboration with ODM, to issue a request for proposals for the creation of a mobile application that provides information and resources to pregnant and postpartum women in Ohio who are eligible for Medicaid.
- Appropriates \$525,000 in both FY 2024 and FY 2025 in GRF line item 440484, Public Health Technology Innovation, to be used for the creation of the mobile application.

WIC enrollment

(Sections 3 and 12)

- Requires ODH to investigate and determine the feasibility of incorporating the following changes to the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) enrollment and benefit distribution processes:
 - □ Creating an integrated eligibility determination application for both WIC and the Supplemental Nutrition Assistance Program (SNAP);
 - □ Incorporating all available federal waivers, including a waiver permitting the use of telephone and video calls to complete WIC enrollment;
 - Pursuing multi-program enrollment through Ohio Benefits;
 - □ Allowing for adjunctive eligibility for WIC applicants who show proof of enrollment in SNAP, Ohio Works First, or Medicaid;
 - ☐ Enabling automatic online loading of benefits to WIC nutrition cards;
 - □ Offering online shopping with WIC nutrition cards;
 - □ Exploring other ways to improve access to WIC and remove administrative burdens.
- Requires ODH to submit a report to the General Assembly within six months of the bill's effective date, detailing the results of its investigation.
- Appropriates \$2.0 million in both FY 2024 and FY 2025 in GRF line item 440416, Mothers and Children Safety Net Services, to support these efforts.

Help Me Grow

(R.C. 3701.61; Section 12)

- Requires ODH to include the Early Head Start Home-Based Option as a model of evidence-based home visiting services under the Help Me Grow Program.
- Requires, rather than authorizes as under current law, ODH to enter into interagency agreements with one or more state agencies to implement and coordinate Help Me Grow and specifies that the agencies may include the Department of Job and Family Services (ODJFS), Department of Developmental Disabilities, Commission on Minority Health, Ohio Fatherhood Commission, and Children's Trust Fund Board.
- Supplements Help Me Grow's existing central intake and referral system, by requiring ODH to establish and regularly evaluate a comprehensive screening and connection program to support the coordination of home visiting services across the state, including through various agencies like ODJFS and the Department of Developmental Disabilities.
- Specifies families at risk of participating in the child welfare systems as priority recipients of home visiting services under Help Me Grow.
- Requires ODH to specify Nurse Family Partnership, Healthy Families America, and Parents as Teachers as eligible providers of home visiting services and to evaluate on a

regular basis their effectiveness in serving families at risk of participating in the child welfare system.

- Authorizes providers of home visiting services to supplement their services with those available online or through other electronic means and requires ODH to regularly evaluate their effectiveness.
- Requires ODH to submit an annual report to the Governor analyzing the impact over the previous fiscal year of providers like Nurse Family Partnership, Healthy Families America, and Parents as Teachers and of online services.
- Requires ODH to regularly identify the challenges to Help Me Grow participation that families in rural and Appalachian communities experience and to recommend strategies to improve their participation.
- Requires ODH, in collaboration with ODJFS, to develop strategies to increase the workforce capacity of home visiting service providers and parenting support professionals.
- Appropriates \$3.0 million in both FY 2024 and FY 2025 in GRF line item 440459, Help Me Grow, for several of these purposes.

Infant vitality supports

(Sections 6 and 12)

- Requires ODM to conduct a study regarding the reimbursement of evidence-based peerto-peer programming that supports infant vitality.
- Appropriates \$3.0 million in both FY 2024 and FY 2025 in GRF line item 440474, Infant Vitality, under ODH, to fund Centering Pregnancy services in areas of the state where there are gaps in such services, as determined by the ODH Director.
- Appropriates \$1.0 million in both FY 2024 and FY 2025 in GRF line item 440474, Infant Vitality, under ODH, to establish a community-based grant program to expand access to infant vitality supports.

Early Intervention Part C

(R.C. 5123.0421; Section 11)

- Requires the Part C Early Intervention Services Program rules to deem a premature infant eligible for program services without other required conditions.
- Appropriates \$2.0 million in both FY 2024 and FY 2025 in GRF line item 322421, Part C Early Intervention, under the Department of Developmental Disabilities, to provide early intervention services to infants born before 38 weeks of gestational age.

Healthy Beginnings at Home

(Section 10)

Appropriates \$15.0 million in FY 2024 in GRF line item 195419, Healthy Beginnings at Home, to be used by the Department of Development, in coordination with ODH, to support stable housing initiatives for pregnant mothers and to improve maternal and infant health outcomes.

Appropriates \$1.0 million in both FY 2024 and FY 2025 in GRF line item 195419, Healthy Beginnings at Home, to fund Move to Prosper efforts, which makes affordable rental housing available in neighborhoods that offer access to opportunities.

Community transportation services grants

(Section 13)

- Appropriates \$1.5 million in both FY 2024 and FY 2025 in GRF line item 600551, Job and Family Services Program Support, under ODJFS.
- Requires funds to be used to award competitive community grants to fund both public and private transportation services for pregnant women and women with infants to access specified services through innovative and evidence-based solutions.

Child care

Head Start and Step Up to Quality

(R.C. 5104.291)

- Requires ODJFS to periodically review Head Start program performance standards and National Association for the Education of Young Children (NAEYC) accreditation standards and determine which Step Up to Quality ratings tier corresponds with minimum Head Start and NAEYC standards.
- Requires ODJFS to rate each licensed child day-care center and family day-care home operating or under contract to provide a Head Start or Early Head Start program in the Step Up to Quality tier that ODJFS has determined corresponds with minimum Head Start or NAEYC standards.

Resiliency grant pilot program

(Sections 7 and 13)

- Requires ODJFS to establish a pilot program to assist in the development of quality, comprehensive child care programs like Early Head Start across the state, with an emphasis on communities experiencing both high infant mortality rates and limited access to child care for families at risk of being part of the child welfare system.
- As part of the program, requires ODJFS to award resiliency grants to support new or enhanced child care programs for the foregoing communities, children, and families, including programs offering wraparound services, mental health supports, and therapeutic classrooms to assist in overcoming barriers and achieving family stability.
- Appropriates \$3.0 million in both FY 2024 and FY 2025 in GRF line item 600566, Resiliency Grant Pilot Program, to fund the program.

Ohio Commission on Fatherhood

(R.C. 3125.18, 5101.342, 5101.35, 5101.80, 5101.801, 5101.805, and 5153.16; Section 12)

- Grants the Ohio Commission on Fatherhood authority to make recommendations to the ODJFS Director concerning the funding, approval, and implementation of fatherhood programs meeting at least one of the four purposes of the federal Temporary Assistance of Needy Families (TANF) block grant.
- Authorizes ODJFS to provide TANF block grant funding to an entity that the Commission recommended and that has entered into an agreement with ODJFS to receive TANF funds.
- Makes conforming changes to the law governing the administration of Title IV-A programs, a type of TANF-funded program.
- Requires ODH to use the \$3.0 million in funds appropriated by the bill in GRF line item 440459, described above, to also support expanding access to fatherhood programming in consultation with ODJFS.

Positive parenting program

(R.C. 5101.91; Section 12)

- Requires ODJFS, in collaboration with other state departments, to develop strategies for state entities to use in (1) informing parents, caregivers, and child care providers about the Positive Parenting Program, also known as Triple P, and (2) promoting the program's benefits, including its parenting, caregiving, and educational resources.
- Requires ODH to use the \$3.0 million in funds appropriated by the bill in GRF line item 440459, described above, to also support these efforts in consultation with ODJFS.

Continuous Medicaid enrollment for young children

(R.C. 5166.45)

- Requires the Medicaid Director to establish a Medicaid waiver component to provide continuous enrollment for Medicaid-eligible children from birth through age three.
- Specifies that a child who is eligible for Medicaid will remain eligible for the continuous eligibility until the earlier of (1) the end of a continuous 48-month period, or (2) the date the child exceeds age four.
- Exempts from the waiver a child who is deemed presumptively eligible for Medicaid, is eligible for alien emergency medical assistance, or is eligible for the refugee medical assistance program.

Early childhood mental health services

(Sections 8 and 14)

- Requires the Medicaid Director to evaluate and update the Medicaid program's coverage of evidence-based mental health and dyadic family therapy services for young children and their caregivers, to improve outcomes from birth to age five.
- Requires the evaluation and updates to address mental health screening for mothers and young children and include follow-up for family dyadic therapies and other child mental health services for those with identified risk.
- Requires the Medicaid Director to develop policy and billing guidance for Medicaid providers to improve the use of mental health and dyadic family therapy services and the consistency of early childhood screenings in primary care settings, and to encourage use of specified diagnosis tools and billing codes.
- Appropriates \$6.0 million in both FY 2024 and FY 2025 in GRF line item 336511, Early Childhood Mental Health Counselors and Consultation, under the Ohio Department of Mental Health and Addiction Services.
- Requires these funds to be used to support early childhood mental health consulting, coaching, training, and mental health supports for child care assistant teachers and lead teachers and for the development of online and other training tools, service and referral supports, and to evaluate program impact with a child care professional cohort.

Medicaid program cost savings report

(R.C. 5162.137)

Requires ODM to annually (1) conduct a cost savings study of the Medicaid program and (2) prepare a report based on the study, recommending measures to reduce Medicaid program costs, and submit the report to the Governor.

Medical legal partnership grant program

(Sections 5 and 12)

- Requires ODH to establish a program to award grants to legal service organizations and medical providers that partner together to identify pregnant women, mothers, and children in need of legal services and to provide them with those services.
- Requires each legal assistance organization and medical provider partnership to monitor health outcomes for those receiving legal services under the partnership and to report those outcomes to ODH on a regular basis.
- Appropriates \$1.0 million in both FY 2024 and FY 2025 in GRF line item 440485, Health Program Support, to be used for grant awards.

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