OHOS Bill Tracking Summary Report			Current as of 10/30/2026 10:40 AM					
Bill Number	**Bill Title**	**Sponsor(s)**	**Long Title**	**Summary**	**Current Status**	**Comments**	**OHOS Position**	**Priorities/Tier**
	OHOS HIGH PRIORITY BILL SECTION - Tier #1							
HB8	Require Biomarker Testing Coverage	WHITE A	Would require health benefit plan and Medicaid program coverage of biomarker testing under medically-appropriate circumstances.		2/18/2026 - REPORTED OUT, House Health, (Fifth Hearing)	OHOS provided proponent written testimony to the House Health Committee on 4/9/25. 2/18/26 Prior to the committe's vote, OHOS Members, Drs. Hofmeister and Saltzman provided written testimony.	Support	Tier 1 - High
HB21	Health Care Sharing Ministries Freedom To Share Act	KING A	To enact the Health Care Sharing Ministries Freedom to Share Act.	Purpose: To clarify that health care sharing ministries do not fall under traditional insurance regulation in Ohio.	6/9/2026 - Senate Financial Institutions, Insurance and Technology, (Third Hearing)	OHOS provided opponent written testimony to the House Insurance Committee on 3/18/25. Sponsor-only hearing in Senate on 2/10/26. OHOS opposes the lack of transparency for participants in the HCSM, but not the existence of HCSMs themselves. OHOS will continue to seek more disclosure language and patient protections as the bill continues its progress in the Senate.	Oppose	Tier 1 - High
HB214	Prior Authorization "Gold Card" Bill	MILLER K	Would exempt healthcare providers who consistently receive a high prior authorization approval rate for a specific service or treatment in a 12-month period from prior authorization requirements for that service/treatment. Also includes data collection provisions mirroring federal CMS requirements set to go into effect in 2027, which will require insurers to share program metrics on their public websites and with ODI on an annual basis.		5/20/2025 - House Insurance, (First Hearing)		Support	Tier 1 - High

HB219	Network Adequacy	DEETER K	To establish network adequacy standards for health insurers.	*Requires insurers to maintain adequate provider networks *Protects patient access to oncology care *Reduces "Phantom Networks" (No oncology access) *Requires sufficient provider participation	10/7/2025 - BILL AMENDED, House Insurance, (Second Hearing)	OHOS provided proponent written testimony to the House Insurance Committee on 10/7/25.	Support	Tier 1 - High
HB220	Prior Authorization Reform: Retroactive Denials, Peer to Peer, Appeals	WORKMAN H	Would ensure retroactive denial can only occur for non-covered benefits or lack of coverage at the time of service. Would require prior authorization appeals to be between the healthcare provider and a clinical peer, and require identification of the clinical peer (plan clinician) making adverse determinations. Would also prohibit insurers from charging providers to appeal rejected claims. Would require insurers to account for dosage adjustments in drug prior authorizations to treat chronic conditions.	*Requires insurers and Medicaid to honor a prior authorization approval if a provider prescribes a change in dosage for an approved drug *Prohibits retroactive denials of prior authorizations in most circumstances *Ends fees for providers appealing prior authorization denials *Increases transparency in peer-to-peer reviews by requiring disclosure of the clinical peer's specialty and relevant qualifications	6/9/2026 - Senate Financial Institutions, Insurance and Technology, (First Hearing) [1]	OHOS and ASCO provided proponent written testimony to the House Insurance Committee on 10/28/25.	Support	Tier 1 - High

HB229	Establish Licensing Process, Contract Requirements for PBMs	DEETER K	To establish a stand-alone licensing process and new contractual requirements for pharmacy benefit managers.	Beginning July 1, 2027, the bill prohibits a PBM from: (1) using plan sponsor funds for any purpose not specifically set forth in writing by the PBM, (2) failing to disclose in written solicitation materials and at least once annually to contracted plan sponsors any ownership relationship of 5% or more between the PBM and an insurer, (3) failing to remit insurance premiums within the policy period or within the time agreed to in writing between the insurer and the PBM, and (4) failing to disclose in writing the method of collecting and holding a plan sponsor's funds. The bill specifies other prohibitions and requirements for a PBM. The bill also prohibits any person from soliciting a plan, acting as a PBM, or otherwise providing pharmacy benefit management services while the person's PBM license is expired. The bill specifies that whoever knowingly violates the prohibition is guilty of a fourth degree misdemeanor. The bill specifies that a PBM or representative of a PBM, beginning July 1, 2027, must not cause or knowingly permit the use of any advertisement, promotion, solicitation, representation, proposal, or offer that is untrue, deceptive, or misleading.	3/31/2026 - SIGNED BY GOVERNOR; eff. 6/30/26	OHOS provided proponent written testimony to the House General Government Committee on 6/3/25. OHOS provided proponent written testimony to the Senate Financial Institutions, Insurance and Technology Committee on 11/4/25.	Support	Tier 1 - High
HB429	Prohibit Reimbursement Reduction	HOOPS J		"payment reduction rules (how providers get paid)" *Prohibits insurers from lowering provider payment using benchmarks or pricing methodologies that are not tied to the actual clinical service delivered. *Aims to ensure payers honor agreed-upon payment structures rather than applying unilateral post-payment adjustments or external reference pricing. *Reduces unpredictable cuts driven by payer cost-containment tools, helping practices better forecast reimbursement for services provided.	10/21/2025 - House Insurance, (First Hearing) [2]	Proibits denials for same day services	Support	Tier 1 - High
HB448	Apply Prescription Drug Rebates to Cost-Sharing Requirements (SB207 - companion/parallel version of similar concept)	BAKER R, BARHORST T	To apply prescription drug rebates to cost-sharing requirements.	HB 448 ensures that copay assistance counts toward a patient's out-of-pocket costs and prevents insurers from shifting more financial burden onto patients.	11/18/2025 - House Insurance, (First Hearing)		Support	Tier 1 - High

HB579	Regulate the use of artificial intelligence by health insurers (Companion Bill to SB164)	SCHMIDT J	To regulate the use of artificial intelligence by health insurers.	*Protects clinical decision-making: Ensures AI tools used by insurers do not override or replace physician judgment in oncology coverage and prior authorization decisions. *Improves transparency in denials: Helps address “black box” AI-driven determinations by promoting clearer, more accountable processes for coverage decisions. *Safeguards timely patient access to cancer care: Reduces the risk of inappropriate or automated denials that can delay treatment initiation or necessary therapies. *Aligns with OHOS advocacy priorities: Supports OHOS’s ongoing efforts to reduce administrative burden, improve prior authorization fairness, and protect appropriate reimbursement for complex oncology care.	3/17/2026 - House Insurance, (First Hearing) [3]		Support	Tier 1 - High
HB589	Insurance Contracts - Material Amendments	MATHEWS A	The bill expands the definition of "material amendment to a policy, requires at least 90 days written notice before amendment can take effect and extends the objection period from 15 to 30 days while requiring a good-faith discussion before implementation	*Redefines "material amendments" to specifically include changes to programs, policies, or procedures, such as updates to a provider manual *Clarifies that insurers must provide written notice of any material amendment at least 90 days before it takes effect *Extends the timeframe for a provider to object in writing to a proposed amendment from 15 days to 30 days after receiving the notice Requires both parties to sign a written agreement before a material amendment can become effective, eliminating the current provision that allows for contract termination if an objection isn't resolved	5/12/2026 - House Insurance, (Third Hearing)		Support	Tier 1 - High

HB682	Prohibit Certain Insurance Practices (Physician Administered Drugs) - Whitebagging	CRAIG M, MANNING G	To prohibit certain insurance practices related to physician-administered drugs for patients with chronic, complex, rare, or life-threatening medical conditions. (Whitebagging)	* Pharmacy Freedom: Starting January 1, 2027, health plans would be prohibited from requiring physician-administered drugs to be dispensed only by specific in-network pharmacies. * Patient Protections: Insurers could not impose additional fees or higher cost-sharing requirements based on a patient's choice of pharmacy for these treatments. * Medical vs. Pharmacy Benefit: Prevents insurers from forcing providers to bill for these drugs under a pharmacy benefit rather than a medical benefit without the patient's informed consent and a physician's attestation. * Physician Autonomy: Designed to ensure that physicians can deliver care quickly and efficiently without harmful delays caused by insurer-mandated distribution channels.	3/17/2026 - House Insurance, (Second Hearing)	Whitebagging - community practice focus only - 3/17 hearing - Live testimony by Dana Zager/Zangmeister, Marlo Blazer/Columbus Oncology and Randy Drosick MD/OHC (independently). OHOS will submit/attend 4th hearing (after the opponent hearing)	Support	Tier 1 - High
HB818	Regards Insurance, Medicaid Coverage - Scalp Cooling Systems (Companion Bill SB 313)	RITTER, K	Regarding insurance and Medicaid coverage of scalp cooling systems for individuals receiving cancer chemotherapy treatments.		5/13/2026 - Referred to Committee House Insurance		Support	Tier 1 - High
HB937	PROHIBIT CERTAIN COST-SHARING PRACTICES	BAKER R, LORENZ B	To prohibit certain health insurance cost-sharing practices.		5/20/2026 - Referred to Committee House Insurance		Support	Tier 1 - High
HB940	PRICE INCREASE LIMITS-DRUGS	COCKLEY C, GRIM M	To prohibit certain increases in the prices of, and cost sharing for, prescription drugs and drug therapy related devices and supplies during a shortage and to name this act the Medical Shortage Protection Act.		5/20/2026 - Referred to Committee House Health		Support	Tier 1 - High
HB972	PROHIBIT ACCESS RESTRICTIONS-HEALTH PLAN INSURERS	DEETER K	To prohibit a health plan issuer from imposing restrictions on pharmacy services that increase transparency and prescription drug access for patients.		7/1/2026 - Introduced			Tier 1 - High
SB160	Non-Medical Switching	LISTON B, JOHNSON T	Prohibits insurers from making mid-year drug formulary changes in order to avoid abrupt and unwarranted treatment changes that disrupt a physician's ability to exercise their medical expertise to help their patients.	* Prohibits mid year changes * Prohibits mid year cost sharing increases * Limits the ability of imposing new prior auth requirements on drugs already being used by a patient during a plan year * Allows changes to formulary on if the FDA issues safety concerns or if the manufacturer permanently discontinues the drug	6/10/2026 - PASSED BY SENATE; Vote 33-0	OHOS and ASCO provided proponent written testimony to the Senate Financial Institutions, Insurance and Technology Committee on 9/30/25.	Support	Tier 1 - High

SB162	Takebacks/Clawbacks	BLESSING III L	Would change Ohio's current 24-month insurer takeback timeframe, to 12 months (amended)	*SB 162 focuses on establishing clear and predictable limits on post-payment recoupments and improving fairness in the audit and recovery process, without altering existing provider appeal timelines under payer policies or contracts.	7/8/2026 - SIGNED BY GOVERNOR; eff. 10/7/26	Amended 4/15/26 – from 2 years to 1 year on adjustments; goes from 30 to 60 days for a provider to respond after notice is made. Provides a notice of overpayment to a provider in writing and can use an e-notice system.	Support	Tier 1 - High
SB164	Regulate the Use of Artificial Intelligence by Health Insurers (Companion Bill to HB 579)	CUTRONA A	/	* “AI in decision-making” bill (process/tool regulation) *Prohibits insurers from "downcoding" claims - automatically reducing the level of service billed by a physician to a lower-paying code - without a valid clinical reason. * Prevents health plans from denying or reducing claims based solely on diagnosis codes, procedure codes, or the duration of time a physician spent with a patient	10/28/2025 - Senate Financial Institutions, Insurance and Technology, (First Hearing)		Support	Tier 1 - High
SB165	Prohibit Automatic Downcoding	MANCHESTER S	Contains prohibitions on downcoding for all providers including limitations on reimbursment for time spent with patients. Strengthens Ohio's prudent layperson standard to protect Ohioans from unexpected medical bills.	* “Claims denial rules” bill (outcome/payment regulation) *Prohibits insurers from "downcoding" claims—automatically reducing the level of service billed by a physician to a lower-paying code—without a valid clinical reason.	10/14/2025 - Senate Financial Institutions, Insurance and Technology, (First Hearing)		Support	Tier 1 - High
SB207	CoPay Accumulator/Maximizer (HB448 - companion/parallel version of similar concept)	MANCHESTER S, LISTON B	Would require health insurers to count amounts paid by or on behalf of covered individuals toward deductibles and cost-sharing requirements.	* Requires health insurers to count all payments made by or on behalf of a patient (such as drug coupons) toward their annual out-of-pocket maximum or deductible.	6/2/2026 - Senate Financial Institutions, Insurance and Technology, (Fourth Hearing) [4]	OHOS and ASCO provided proponent written testimony to the Senate Financial Institutions, Insurance and Technology Committee on 10/21/25.	Support	Tier 1 - High
SB210	Regards Licensing Contracts for PBMs	BLESSING III L	To establish a stand-alone licensing process and new contractual requirements for pharmacy benefit managers.		6/4/2025 - Referred to Committee Senate Health		Support	Tier 1 - High
SB313	Mandated Coverage for Health Plans and Medicaid for Scalp Cooling Systems (Companion Bill HB 818)	CHAVEZ B	Regarding insurance and Medicaid coverage of scalp cooling systems for individuals receiving cancer chemotherapy treatments.		5/19/2026 - Senate Medicaid, (Second Hearing)		Support	Tier 1 - High
	OHOS PRIORITY BILL SECTION -							
HB33	PROSTATE CANCER SCREENING	JARRELLS D, JOHNSON M	To require health insurers to cover preventive screenings for certain men at high-risk for developing prostate cancer.		11/18/2025 - House Insurance, (Third Hearing)		Support	Tier 2 - Medium

HB192	PHARMACY ACCREDITATION, PBM REQUIREMENTS	BARHORST T, FISCHER T	To limit insurer accreditation requirements for pharmacies, to implement drug cost reporting requirements for pharmacy benefit managers, to prohibit certain conduct and contractual arrangements by insurers related to the provision of pharmacist services, and to name this act the Community Pharmacy Protection Act.		3/11/2026 - House Insurance, (Sixth Hearing)		Support	Tier 2 - Medium
HB271	BREAST CANCER SCREENING AND EXAMINATION COVERAGE	SCHMIDT J, WILLIAMS J	To revise the law governing insurance and Medicaid coverage of breast cancer screenings and examinations and to name this act the Breast Examination and Screening Transformation Act, or BEST Act. Would require coverage of diagnostic breast examinations and prohibits health insurers and the Medicaid program from imposing cost-sharing requirements on covered breast or cervical cancer screenings and examinations.		3/11/2026 - BILL AMENDED, House Insurance, (Fifth Hearing)	OHOS provided proponent written testimony to the House Insurance Committee on 5/27/25.	Support	Tier 2 - Medium
HB276	PROHIBIT CERTAIN ACTIONS-340B REIMBURSEMENTS	JOHN M, HOLMES A	To prohibit drug manufacturers from taking certain actions regarding reimbursements made to 340B covered entities.		11/4/2025 - BILL AMENDED, House Insurance, (Fourth Hearing)		Neutral	Tier 2 - Medium
HB289	Ohio Health Care Plan Act - PROVIDE UNIVERSAL HEALTH CARE COVERAGE	RADER T, GRIM M	To establish and operate the Ohio Health Care Plan to provide universal health care coverage to all Ohio residents.	*Seeks to eliminate deductibles, copays and surprise bills *Covers all Ohioans regardless of income or health status	10/14/2025 - House Insurance, (First Hearing)		Support	Tier 2 - Medium
HB390	COLLECTION OF COPAYS	SCHMIDT J	Would shift the responsibility of collecting a patient's cost-sharing amount—copays, deductibles, and coinsurance—from physicians to health insurers.		10/21/2025 - House Insurance, (First Hearing)		Neutral	Tier 2 - Medium
HB573	CREATE PEDIATRIC CANCER RESEARCH FUND	SYNENBERG E, PICCOLANTONIO B	To create the Pediatric Cancer Research Fund and to authorize voluntary contributions to it.		11/12/2025 - Referred to Committee House Health		Support	Tier 2 - Medium
HB922	COVERAGE REQUIREMENT-COLORECTAL CANCER SCREENINGS	TIMS D	To require insurance and Medicaid coverage of colorectal cancer screenings for individuals age 21 and older.		5/20/2026 - Referred to Committee House Insurance		Support	Tier 2 - Medium
SB25	PROHIBIT SUN LAMP TANNING-UNDER AGE 16	JOHNSON T	To prohibit the provision of sun lamp tanning services to individuals under age 16.		4/2/2025 - Senate Health, (Second Hearing)	OHOS provided proponent written testimony to the Senate Health Committee on 4/2/25.	Support	Tier 2 - Medium

SB46	ADD SCREENING AWARENESS-COLORECTAL CANCER AWARENESS MONTH	INGRAM C	To add screening awareness to Colorectal Cancer Awareness Month.		11/19/2025 - Senate Health, (Second Hearing)		Support	Tier 2 - Medium
SB166	NO FEES FOR EFTs	MANNING N	To prohibit fees for electronic fund transfers or remittance advice transactions by health insurer and the Medicaid program.		4/2/2025 - Referred to Committee Senate Medicaid		Support	Tier 2 - Medium
SB198	PROHIBIT CERTAIN ACTIONS-340B REIMBURSEMENTS	KOEHLER K	To prohibit drug manufacturers from taking certain actions regarding reimbursements made to 340B covered entities.		5/13/2026 - SUBSTITUTE BILL ACCEPTED, Senate Health, (Fourth Hearing)		Neutral	Tier 2 - Medium
SB317	CREATE PEDIATRIC CANCER RESEARCH FUND	WEINSTEIN C	To create the Pediatric Cancer Research Fund in the state treasury to support hospitals conducting pediatric cancer research and to authorize voluntary contributions to the fund, including when registering motor vehicles or filing state income tax returns.		11/18/2025 - Referred to Committee Senate Finance		Support	Tier 2 - Medium
	OHOS BILL SECTION - Tier #3							
HB12	DRUG PRACTICES-RIGHT TO TRY	GROSS J, SWEARINGEN D	Regarding prescribing, dispensing, and administering drugs and to name this act the Jeff, Dave, and Angie Patient Right to Try Act.		6/11/2025 - BILL AMENDED, House Health, (Sixth Hearing)		Oppose	
HB59	REVISE, STREAMLINE OCCUPATIONAL REGULATIONS	FOWLER S, HINER M	To revise and streamline the state's occupational regulations. (it might affect licensing costs or administrative burden for oncology practices in Ohio)		4/15/2026 - Senate Government Oversight and Reform, (Fourth Hearing)			
HB96	OPERATING BUDGET	STEWART B	To make operating appropriations for the biennium beginning July 1, 2025, and ending June 30, 2027, to levy taxes, and to provide authorization and conditions for the operation of state programs.		10/1/2025 - Consideration of Governor's Veto; Senate Overrides Veto on Item 66, Vote 21-11		Interested Party	

HB99	INSURANCE REGULATIONS-EXCLUDE AG NONPROFITS	PETERSON B	To exclude nonprofit agricultural membership organizations from insurance regulations. (Farm Bureau Bill)		4/8/2025 - BILL AMENDED, House Insurance, (Third Hearing)	OHOS provided opponent written testimony to the House Insurance Committee on 4/8/25.	Oppose	
HB112	RIGHT TO REFUSE MEDICAL INTERVENTIONS	GROSS J, LEAR B	To prohibit discrimination against an individual for the refusal of certain medical interventions for reasons of conscience, including religious convictions, and to name this act the Conscientious Right to Refuse Act.		11/5/2025 - BILL AMENDED, House Judiciary, (First Hearing)			
HB207	MONTH DESIGNATION-MALE WELLNESS	LORENZ B, ROGERS E	To designate June as 'Male Wellness Month' and the third Monday in June as 'Take Your Dad to the Doctor and Dentist Day' (DAD) Day) and to name this act the Male Wellness Month Act.		3/11/2026 - Senate Health, (Third Hearing)		Support	
HB257	LAW CHANGES-MEDICAL DEBT (Companion to SB 444)	GRIM M, SCHMIDT J	To limit the rate of interest on medical debt, to prohibit reporting medical debt to a consumer reporting agency, and to name this act the Ohio Medical Debt Fairness Act.	Interest capped at 3%, Can still be reported to Credit Bureau, cannot garnish wages under a certain level of poverty (see Blood Cancer United)	3/11/2026 - BILL AMENDED, House Health, (Sixth Hearing)		Neutral	
HB277	HEALTH CARE WORKERS' EMPLOYMENT STATUS	CRAIG M, DEETER K	To specify that a health care worker is not the employee of a health care worker platform or health care facility for purposes of specified laws under certain circumstances.		6/4/2025 - House Commerce and Labor, (First Hearing)			
HB281	REGARDING HOSPITALS, IMMIGRATION ENFORCEMENT	WILLIAMS J	Regarding hospitals and the enforcement of federal immigration law.		6/11/2025 - House Public Safety, (First Hearing)			
HB318	LAW CHANGES-MEDICAID ESTATE RECOVERY	STEPHENS J, BRENNAN S	To make changes to the law governing the Medicaid Estate Recovery Program.		3/17/2026 - BILL AMENDED, House Medicaid, (Third Hearing)			
HB324	DRUG PROHIBITION-SEVERE ADVERSE EFFECTS	MATHEWS A, CRAIG M	To prohibit certain sales of drugs causing severe adverse effects, to establish conditions on the prescribing of such drugs, and to name this act the Patient Protection Act.		6/10/2026 - SUBSTITUTE BILL ACCEPTED, Senate Health, (Third Hearing)			
HB347	REGARDING ABORTION INFORMED CONSENT	ODIOSO M, WILLIAMS J	To enact the Share the Health and Empower With Informed Notices (SHE WINS) Act regarding abortion informed consent.		6/10/2026 - Senate Health, (Third Hearing)			

HB353	PROFESSIONAL TITLE CHANGE-PHYSICIAN ASSOCIATE	LAMPTON B, MANNING G	To change the professional title used by physician assistants to 'physician associate.'		11/19/2025 - House Health, (Third Hearing)			
HB374	REGARDING PRESCRIPTION DRUG READERS	SIGRIST M, ABRAMS C	Regarding prescription drug readers for visually impaired patients.		6/8/2026 - BILL AMENDED, House Insurance, (Third Hearing)			
HB438	REGARDING HEALTH INSURANCE PREMIUMS, BENEFITS	RADER T, BROWNLEE K	Regarding health insurance premiums and benefits and to name this act the Fair Access to Medical Insurance for Local Youth and Families (FAMILY) Act.		11/4/2025 - House Insurance, (First Hearing)			
HB469	A.I. PROHIBITION-LEGAL PERSONHOOD	CLAGGETT T	To declare artificial intelligence systems nonsentient and to prohibit them from obtaining legal personhood.		11/13/2025 - House Technology and Innovation, (Third Hearing)		Support	
HB479	IMAGING SUPERVISION-CONTRAST ADMINISTRATION	SCHMIDT J	Regarding physician supervision of contrast administration for imaging.		6/12/2026 - Sent to Governor for Signature		Support	
HB521	NURSE STAFFING, STUDENT LOANS	LETT C, COCKLEY C	To require hospitals to establish and comply with registered nurse staffing plans that protect patient safety, to create the Nursing Student Loan-to-Grant Program, to make an appropriation, and to name this act the Ohio Nurse Workforce and Safe Patient Act.		10/22/2025 - Referred to Committee House Health			
HB552	HOSPICE MEDICAID REIMBURSEMENT CHANGES	PIZZULLI J, LETT C	To make changes to the law regarding Medicaid reimbursement for hospice providers.		11/4/2025 - House Medicaid, (First Hearing)			
HB663	CREATE AI STUDY COMMISSION	COCKLEY C, FISCHER T	To create the Artificial Intelligence Study Commission to study and make recommendations regarding the use of artificial intelligence in state and local government.		2/4/2026 - Referred to Committee House Technology and Innovation			
HB668	LAW REVISION-RADIATION TECHNICIAN, OPERATOR	KING A	To revise the law governing general X-ray machine operators and other radiation technicians.		3/4/2026 - House Health, (First Hearing)			
HB675	ESTABLISH MEDICAID MCO PAYMENT PROGRAM	STEPHENS J, DEETER K	To establish a temporary program for hospital payments made by Medicaid managed care organizations and to name this act the Healthier Rural Hospitals Act.		2/18/2026 - Referred to Committee House Finance			

HB699	HEALTH INSURANCE REQUIREMENT-PRESCRIPTION DRUGS	ABDULLAHI M, LETT C	To require prescription drug coverage by health plan issuers.		5/19/2026 - House Insurance, (First Hearing)			
HB740	REGARDING DISPLAY, CREATION-VETERAN MEDICAL BENEFITS POSTER	MCNALLY L, BAKER R	Regarding the creation and display of a poster containing information on veterans medical benefits.		3/18/2026 - Referred to Committee House Veterans and Military Development			
HB763	LIMITED LICENSURE-INTERNATIONAL PHYSICIANS	WHITE A	To authorize the State Medical Board to issue limited licenses to certain international physicians.		5/20/2026 - House Health, (First Hearing)			
HB767	REQUIRE COVERAGE-MENOPAUSE, PERIMENOPAUSE	BRYANT BAILEY A, SOMANI A	To require insurance and Medicaid coverage of the diagnosis and treatment of menopause, perimenopause, and menopausal and perimenopausal symptoms and to name this act the Ohio Menopause, Perimenopause, and Hormone Therapy Coverage Act.		3/25/2026 - Referred to Committee House Insurance			
HB774	PLATE CREATION-PEDIATRIC CANCER AWARENESS	DOVILLA M, SWEENEY B	To create the 'Pediatric Cancer Awareness' license plate.		3/25/2026 - Referred to Committee House Transportation			
HB775	REGARDING STATE AGENCY AUTHORITY-ADMINISTRATIVE RULE ADOPTION	CALLENDER J, DOVILLA M	Regarding state agencies' general authority to adopt administrative rules and to amend the version of section 3313.902 of the Revised Code that is scheduled to take effect on July 1, 2026, to continue the change on and after that date.		6/2/2026 - House General Government, (First Hearing)			
HB780	ELIMINATE MEDICAID CARE MANAGEMENT SYSTEM	BROWNLEE K	To eliminate the care management system from the Medicaid program and to name this act the Medicaid Savings Act.		5/19/2026 - House Medicaid, (First Hearing)			
HB834	REQUIRE AGENCIES IMPROVE SERVICE DELIVERY	THOMAS D	To require state agencies to improve the delivery of government services.		5/13/2026 - Referred to Committee House General Government			
HB835	AUTHORIZE AID-IN-DYING MEDICATION	SYNENBERG E	To authorize an individual with a terminal condition and the ability to make and communicate health care decisions to request a prescription for an aid-in-dying medication and to name this act the Ohio Medical Aid in Dying (MAiD) Act.		5/13/2026 - Referred to Committee House Health			
HB863	REGARDING INFECTION PREVENTION TEXTILES	MATHEWS A	Regarding health care facilities and infection prevention textiles.		5/27/2026 - House Health, (First Hearing)			
HB888	CONCERNING INFERTILITY SERVICE COVERAGE	WHITE E, BRYANT BAILEY A	Concerning insurance and Medicaid coverage for specified infertility services.		5/20/2026 - Referred to Committee House Insurance			

HB889	AUTHORIZE FERTILITY TREATMENT TAX CREDIT	WHITE E	To authorize a nonrefundable income tax credit for fertility treatment expenses.		5/20/2026 - Referred to Committee House Ways and Means			
HB890	SET PRESCRIPTION DRUG PAYMENT LIMITS	HALL D	To establish the Prescription Drug Affordability Board and Prescription Drug Affordability Stakeholder Council, to authorize the establishment of upper payment limits on certain prescription drug products, to repeal the law establishing the Prescription Drug Transparency and Affordability Advisory Council, and to name this act the Prescription Relief and Inflation Cost Elimination or P.R.I.C.E. Act.		5/20/2026 - Referred to Committee House Insurance			
HB904	ESTABLISH REINSURANCE PROGRAM	SOMANI A	To establish a reinsurance program.		5/20/2026 - Referred to Committee House Insurance			
HB905	PROHIBIT COMMON OWNERSHIP-HEALTH CARE ENTITIES	SOMANI A	To prohibit various types of health care entities from being under common ownership.		5/20/2026 - Referred to Committee House Health			
HB936	SALES TAX EXEMPTION-MEDICAL ITEMS, SERVICES	BAKER R, SIGRIST M	Tto authorize a sales and use tax exemption for medical items and services eligible to be purchased with proceeds from flexible spending and health savings accounts.		5/20/2026 - Referred to Committee House Ways and Means			
HB963	REVISE LAW-PHYSICIAN ASSISTANT PRACTICE	DEETER K, CRAIG M	To revise the law governing the practice of physician assistants.		6/10/2026 - Referred to Committee House Health			
HB1004	REVISE PHARMACIST NICOTINE REPLACEMENT THERAPY DISPENSING LAWS	BIRD A, JOHN M	To revise the law governing pharmacist dispensing of nicotine replacement therapy and to authorize pharmacists to dispense oral contraceptive therapy pursuant to protocols developed by the State Board of Pharmacy.		9/8/2026 - Introduced			
HJR6	CONSTITUTIONAL AMENDMENT-LIMIT PROPERTY TAXES	FISCHER T, LEAR B	Proposing to amend Section 2 of Article XII of the Constitution of the State of Ohio to limit property taxes, whether voted or unvoted, to one and one-quarter per cent or, for certain owner-occupied homes, one per cent of real property's true value.		9/15/2025 - Referred to Committee House Ways and Means			
HJR10	CONSTITUTIONAL CHANGE-PROPERTY TAX INCREASES	LARE J, MILLER K	Proposing to enact Section 2b of Article XII of the Constitution of the State of Ohio to partially exempt the increased value of owner-occupied residences from taxation.		9/8/2026 - Introduced			

SB170	REGARDING INDIVIDUALIZED INVESTIGATIONAL TREATMENTS	HUFFMAN S, ROEGNER K	Regarding individualized investigational treatments for life-threatening or severely debilitating illnesses.		2/18/2026 - BILL AMENDED, Senate Health, (Third Hearing)		Support	
SB209	PATIENT RIGHT TO TRY ACT	CUTRONA A, REYNOLDS M	Regarding prescribing, dispensing, and administering drugs and to name this act the Jeff, Dave, and Angie Patient Right to Try Act.		5/28/2025 - Referred to Committee Senate Health		Oppose	
SB222	REQUIRE CORRECTIVE PLAN-DISABLED MEDICAID GROUP	ROEGNER K	To require an audit and corrective action plan for the Aged, Blind, and Disabled Medicaid eligibility group and to make an appropriation.		6/18/2025 - Referred to Committee Senate Finance			
SB249	AUTHORIZE DISPENSING IVERMECTIN WITHOUT PRESCRIPTION	LANG G, JOHNSON T	To authorize the dispensing of ivermectin without a prescription.		4/15/2026 - Senate Health, (Second Hearing)		Oppose	
SB309	REQUIRE ABORTION PILL PROVIDER LIABILITY EDUCATION	KOEHLER K	To enact the Abortion Pill Provider Liability Education (APPLE) Act.		2/11/2026 - Senate Health, (Second Hearing)			
SB324	REVISE LAW-X-RAY MACHINE OPERATOR, RADIATION TECHNICIAN	HUFFMAN S	To revise the law governing general X-ray machine operators and other radiation technicians.		6/10/2026 - PASSED BY SENATE; Vote 33-0			
SB344	REGARDING HEALTH CARE FACILITIES-INFECTION PREVENTION TEXTILES	LANG G	Regarding health care facilities and infection prevention textiles.		5/20/2026 - Senate Health, (First Hearing)			
SB385	LICENSE, REGULATE-NATUROPATHIC MEDICINE	JOHNSON T	To license and regulate the practice of naturopathic medicine.		6/10/2026 - Senate Health, (Second Hearing)			

SB386	ELIMINATE CARE MANAGEMENT SYSTEM-MEDICAID PROGRAM	BLESSING III L, LISTON B	To eliminate the care management system from the Medicaid program and to name this act the Medicaid Savings Act.		4/14/2026 - Senate Medicaid, (First Hearing)			
SB387	REGARDING PHARMACOGENOMIC TESTING-MEDICAID MCOS	BLESSING III L	Regarding coverage of pharmacogenomic testing by Medicaid managed care organizations.		6/2/2026 - Senate Medicaid, (Second Hearing)			
SB396	ESTABLISH INSURANCE BENEFITS-FAMILY, MEDICAL LEAVE	BLESSING III L, LISTON B	To establish family and medical leave insurance benefits.		6/2/2026 - Senate Financial Institutions, Insurance and Technology, (First Hearing)			
SB423	SPECIFY EMPLOYMENT STATUS-HEALTH CARE WORKER	MANCHESTER S	To specify that a health care worker is not the employee of a health care worker platform or health care facility for purposes of specified laws under certain circumstances.		6/10/2026 - PASSED BY SENATE; Vote 33-0			
SB434	PROVIDE EDUCATIONAL MATERIALS-OPIOID, BENZODIAZEPINE DISPENSING	REYNOLDS M	To require that addiction-related educational materials be provided when dispensing opioid analgesics and benzodiazepines and to name this act the Verified Opioid and Intoxicant Consumer Education or VOICE Act.		5/13/2026 - Referred to Committee Senate Health			
SB436	CHANGE PROFESSIONAL TITLE-PHYSICIAN ASSOCIATE	LANG G	To change the professional title used by physician assistants to 'physician associate.'		5/13/2026 - Referred to Committee Senate Health			
SB444	REGARDING MEDICAL DEBT(Companion Bill to HB 257)	PATTON T	Regarding medical debt and to name this act the Ohio Medical Debt Fairness Act.		6/2/2026 - Referred to Committee Senate Finance		Neutral	
SCR14	URGE CONGRESS-REJECT AI REGULATION MORATORIUM	BLESSING III L	To urge the Congress of the United States to reject any moratorium on state laws regulating artificial intelligence.		5/12/2026 - Senate Financial Institutions, Insurance and Technology, (First Hearing)			