

THE SEHCB REPORT

Volume 1, Issue 3

September 2008

SEHCB Rolls Out Second Set of Best Practice Standards

Focused on improving health of public school employees and their families

Cheryl Reeves
SEHCB Staff

The School Employees Health Care Board has announced the second set of best practices to be adopted by all health care plans providing coverage to public school employees and their families.

The set of best practices requires that all health care plans providing coverage to public school employees and their families institute non payment for egregious medical errors and require vendor compensation transparency. A third proposed best practice mandates tobacco-free schools.

The best practices are expected to be discussed and open for public comment by the Board at its October meeting. If adopted, the best practices will go through the state's rulemaking process and become law.

**Questions or comments?
Contact the SEHCB at
(614) 728-7518 or by email at
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From the Desk of The Executive Director

Moving best practices from policy to law

Bruce J. Gilbert
Executive Director, SEHCB

The School Employees Health Care Board is charged by statute with the responsibility of identifying, evaluating and adopting best practices which must be integrated into all health plans offering coverage to Ohio's public school employees and their families. Potential best practices are reviewed by the Board and public comment invited. After assuring that all viewpoints are considered, the Board adopts those best practices that it thinks offer the opportunity to meaningfully reduce healthcare costs and improve the health status of public school employees and their dependents. Best practices adopted by the Board must then go through the state's rulemaking process before ultimately becoming part of the Ohio Administrative Code.

Once the Board decides that a 'best practice' should become a rule, we prepare a draft of the new rule(s). Those drafted rules are filed with the Joint Committee for Agency Rule Review (JCARR), the Legislative Service Commission, and the Secretary of State. These filings are accompanied by a notice of the date, time, and location for a public hearing to be held pertaining to those rules. That notice along with the complete content of the proposed rules is also posted on the Ohio Register's website and available electronically from that source.

JCARR has 59 days to review filed rules (29 additional days if rules are refiled). At some time during that review period, the rules are on the agenda of a JCARR meeting that is also open for public testimony. The function of that Committee is to review rules and make sure they (a) do not exceed the scope of the Board's rule-making authority, (b) do not conflict with any other law or rule, and (c) do not conflict with the intent of the legislature in enacting relevant statute(s).

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LEARN MORE ABOUT THE SEHCB

Information about the School Employees Health Care Board and its activities can be found on our webpage at www.sehcb.ohio.gov.

The Board's website includes announcements, contact information, meeting minutes, educational presentations, and a calendar of Board events.

If you have any questions about the website, or the Board and its activities, you can contact us by telephone at (614) 728-7518.

SEHCB CALENDAR OF EVENTS

OCTOBER BOARD MEETING

DATE: WEDNESDAY, OCTOBER 22, 2008

PLACE: 8050 N. HIGH STREET, COLUMBUS

TIME: 9:00 AM

Regularly scheduled meeting of the Board and Advisory Committee.

NOVEMBER BOARD MEETING

DATE: WEDNESDAY, NOVEMBER 12, 2008

PLACE: COLUMBUS CONVENTION CENTER

TIME: 9:00 AM

Regularly scheduled meeting of the Board and Advisory Committee at the Capital Conference.

DECEMBER BOARD MEETING

DATE: WEDNESDAY, DECEMBER 3, 2008

PLACE: 8050 N. HIGH STREET, COLUMBUS

TIME: 9:00 AM

Regularly scheduled meeting of the Board and Advisory Committee.

The Board's first set of 'best practices' has been reduced to proposed rules and filed. A public hearing was held on September 9th, and the proposed rules are on the agenda of a JCARR meeting set for October 6th. I fully expect to be able to advise you, in our next communication, that the first set of 'best practices' has become law.

Once the rules do become law, we'll start discussing implementation and timelines, as well as ways in which the Board and our staff can assist you in compliance efforts. In the meantime, please feel free to contact us with any questions you may have about our activities.

Learning about...

Tobacco Use

Stopping tobacco use is the single biggest thing you can do to improve your health...

Tobacco use is a risk for heart, stroke, lung and other diseases. Many of the 47 million Americans who use tobacco acknowledge the addictive grip of nicotine.

- According to the US Department of Health and Human Services, tobacco use remains the leading cause of preventable death and disease in America.
- According to the US Centers for Disease Control (CDC), nationwide antismoking efforts have already led to a 30% drop in smoking during the past decade.
- Tobacco use also claims over 430,000 lives every year; more than AIDS, alcohol, car accidents, murders, and suicides combined; the annual cost of treating tobacco-related diseases exceeds \$89 billion.
- Long term effects of tobacco use include: Diseases of the heart and blood vessels, including angina, arteriosclerosis and hypertension, heart attacks, stroke, lung cancer, chronic obstructive lung disease, emphysema, chronic bronchitis, ulcers, impotence, and other reproductive health problems.
- Smokeless tobacco is just as much a health hazard as smoking. People who use smokeless tobacco greatly increase their risk of cancers including those of the pharynx (throat). Other effects include gum disease, tooth loss, and loss of bone in the jaw. Users may also have problems with high blood pressure and be at increased risk for heart disease.