

As Reported by the Committee of Conference

124th General Assembly

Regular Session

2001-2002

Am. Sub. H. B. No. 412

REPRESENTATIVES Seitz, Schmidt, Kearns, Webster, Raga, Brinkman,
DeWine, Setzer, Husted, Faber, Gilb, Fessler, Hoops, Schaffer, Lendrum,
Flowers, Olman, Sullivan, Ogg, G. Smith, Trakas, Peterson, Clancy,
Callender, Roman, Wolpert, Latta, Womer Benjamin, Calvert, Carey, Kilbane,
Reidelbach, Aslanides, Widowfield, Niehaus, Williams, Blasdel, Buehrer,
Stapleton, Manning, Damschroder, Evans, Cates, Hughes, Grendell, Young
SENATORS Jacobson, Carnes, Mumper, Nein, Wachtmann, Amstutz,
Randy Gardner, Jordan, Harris, White

A B I L L

To amend sections 2305.11, 2315.21, 3721.02, and 1
3721.17 and to enact section 5111.411 of the 2
Revised Code relative to the results of a home 3
inspection or nursing facility survey, liability of 4
a residential care facility or a home for punitive 5
damages, to the definition of "medical claim" for 6
the statute of limitations for medical claims, and 7
to the statute of limitations for home or 8
residential facility care. 9

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

Section 1. That sections 2305.11, 2315.21, 3721.02, and 10
3721.17 be amended and section 5111.411 of the Revised Code be 11
enacted to read as follows: 12

Sec. 2305.11. (A) An action for libel, slander, malicious 13

prosecution, or false imprisonment, an action for malpractice 14
other than an action upon a medical, dental, optometric, or 15
chiropractic claim, or an action upon a statute for a penalty or 16
forfeiture shall be commenced within one year after the cause of 17
action accrued, provided that an action by an employee for the 18
payment of unpaid minimum wages, unpaid overtime compensation, or 19
liquidated damages by reason of the nonpayment of minimum wages or 20
overtime compensation shall be commenced within two years after 21
the cause of action accrued. 22

(B)(1) Subject to division (B)(2) of this section, an action 23
upon a medical, dental, optometric, or chiropractic claim shall be 24
commenced within one year after the cause of action accrued, 25
except that, if prior to the expiration of that one-year period, a 26
claimant who allegedly possesses a medical, dental, optometric, or 27
chiropractic claim gives to the person who is the subject of that 28
claim written notice that the claimant is considering bringing an 29
action upon that claim, that action may be commenced against the 30
person notified at any time within one hundred eighty days after 31
the notice is so given. 32

(2) Except as to persons within the age of minority or of 33
unsound mind, as provided by section 2305.16 of the Revised Code: 34

(a) In no event shall any action upon a medical, dental, 35
optometric, or chiropractic claim be commenced more than four 36
years after the occurrence of the act or omission constituting the 37
alleged basis of the medical, dental, optometric, or chiropractic 38
claim. 39

(b) If an action upon a medical, dental, optometric, or 40
chiropractic claim is not commenced within four years after the 41
occurrence of the act or omission constituting the alleged basis 42
of the medical, dental, optometric, or chiropractic claim, then, 43
notwithstanding the time when the action is determined to accrue 44

under division (B)(1) of this section, any action upon that claim
is barred.

(C) A civil action for unlawful abortion pursuant to section
2919.12 of the Revised Code, a civil action authorized by division
(H) of section 2317.56 of the Revised Code, a civil action
pursuant to division (B)(1) or (2) of section 2307.51 of the
Revised Code for performing a dilation and extraction procedure or
attempting to perform a dilation and extraction procedure in
violation of section 2919.15 of the Revised Code, and a civil
action pursuant to division (B)(1) or (2) of section 2307.52 of
the Revised Code for terminating or attempting to terminate a
human pregnancy after viability in violation of division (A) or
(B) of section 2919.17 of the Revised Code shall be commenced
within one year after the performance or inducement of the
abortion, within one year after the attempt to perform or induce
the abortion in violation of division (A) or (B) of section
2919.17 of the Revised Code, within one year after the performance
of the dilation and extraction procedure, or, in the case of a
civil action pursuant to division (B)(2) of section 2307.51 of the
Revised Code, within one year after the attempt to perform the
dilation and extraction procedure.

(D) As used in this section:

(1) "Hospital" includes any person, corporation, association,
board, or authority that is responsible for the operation of any
hospital licensed or registered in the state, including, but not
limited to, those ~~which~~ that are owned or operated by the state,
political subdivisions, any person, any corporation, or any
combination thereof. "Hospital" also includes any person,
corporation, association, board, entity, or authority that is
responsible for the operation of any clinic that employs a
full-time staff of physicians practicing in more than one
recognized medical specialty and rendering advice, diagnosis,

care, and treatment to individuals. "Hospital" does not include 77
any hospital operated by the government of the United States or 78
any of its branches. 79

(2) "Physician" means a person who is licensed to practice 80
medicine and surgery or osteopathic medicine and surgery by the 81
state medical board or a person who otherwise is authorized to 82
practice medicine and surgery or osteopathic medicine and surgery 83
in this state. 84

(3) "Medical claim" means any claim that is asserted in any 85
civil action against a physician, podiatrist, ~~or~~ hospital, home, 86
or residential facility, against any employee or agent of a 87
physician, podiatrist, ~~or~~ hospital, home, or residential facility, 88
or against a registered nurse or physical therapist, and that 89
arises out of the medical diagnosis, care, or treatment of any 90
person. "Medical claim" includes ~~derivative~~ the following: 91

(a) Derivative claims for relief that arise from the medical 92
diagnosis, care, or treatment of a person; 93

(b) Claims that arise out of the medical diagnosis, care, or 94
treatment of any person and to which either of the following 95
apply: 96

(i) The claim results from acts or omissions in providing 97
medical care. 98

(ii) The claim results from the hiring, training, 99
supervision, retention, or termination of caregivers providing 100
medical diagnosis, care, or treatment. 101

(c) Claims that arise out of the medical diagnosis, care, or 102
treatment of any person and that are brought under section 3721.17 103
of the Revised Code. 104

(4) "Podiatrist" means any person who is licensed to practice 105
podiatric medicine and surgery by the state medical board. 106

(5) "Dentist" means any person who is licensed to practice dentistry by the state dental board.

(6) "Dental claim" means any claim that is asserted in any civil action against a dentist, or against any employee or agent of a dentist, and that arises out of a dental operation or the dental diagnosis, care, or treatment of any person. "Dental claim" includes derivative claims for relief that arise from a dental operation or the dental diagnosis, care, or treatment of a person.

(7) "Derivative claims for relief" include, but are not limited to, claims of a parent, guardian, custodian, or spouse of an individual who was the subject of any medical diagnosis, care, or treatment, dental diagnosis, care, or treatment, dental operation, optometric diagnosis, care, or treatment, or chiropractic diagnosis, care, or treatment, that arise from that diagnosis, care, treatment, or operation, and that seek the recovery of damages for any of the following:

(a) Loss of society, consortium, companionship, care, assistance, attention, protection, advice, guidance, counsel, instruction, training, or education, or any other intangible loss that was sustained by the parent, guardian, custodian, or spouse;

(b) Expenditures of the parent, guardian, custodian, or spouse for medical, dental, optometric, or chiropractic care or treatment, for rehabilitation services, or for other care, treatment, services, products, or accommodations provided to the individual who was the subject of the medical diagnosis, care, or treatment, the dental diagnosis, care, or treatment, the dental operation, the optometric diagnosis, care, or treatment, or the chiropractic diagnosis, care, or treatment.

(8) "Registered nurse" means any person who is licensed to practice nursing as a registered nurse by the state board of nursing.

(9) "Chiropractic claim" means any claim that is asserted in any civil action against a chiropractor, or against any employee or agent of a chiropractor, and that arises out of the chiropractic diagnosis, care, or treatment of any person. "Chiropractic claim" includes derivative claims for relief that arise from the chiropractic diagnosis, care, or treatment of a person.

(10) "Chiropractor" means any person who is licensed to practice chiropractic by the chiropractic examining board.

(11) "Optometric claim" means any claim that is asserted in any civil action against an optometrist, or against any employee or agent of an optometrist, and that arises out of the optometric diagnosis, care, or treatment of any person. "Optometric claim" includes derivative claims for relief that arise from the optometric diagnosis, care, or treatment of a person.

(12) "Optometrist" means any person licensed to practice optometry by the state board of optometry.

(13) "Physical therapist" means any person who is licensed to practice physical therapy under Chapter 4755. of the Revised Code.

(14) "Home" has the same meaning as in section 3721.10 of the Revised Code.

(15) "Residential facility" means a facility licensed under section 5123.19 of the Revised Code.

Sec. 2315.21. (A) As used in this section:

(1) "Tort action" means a civil action for damages for injury or loss to person or property. "Tort action" includes a product liability claim for damages for injury or loss to person or property that is subject to sections 2307.71 to 2307.80 of the Revised Code, but does not include a civil action for damages for a breach of contract or another agreement between persons.

(2) "Trier of fact" means the jury or, in a nonjury action,
the court. 168
169

(3) "Home" has the same meaning as in section 3721.10 of the
Revised Code. 170
171

(B) Subject to division (D) of this section, punitive or
exemplary damages are not recoverable from a defendant in question
in a tort action unless both of the following apply: 172
173
174

(1) The actions or omissions of that defendant demonstrate
malice, aggravated or egregious fraud, oppression, or insult, or
that defendant as principal or master authorized, participated in,
or ratified actions or omissions of an agent or servant that so
demonstrate+. 175
176
177
178
179

(2) The plaintiff in question has adduced proof of actual
damages that resulted from actions or omissions as described in
division (B)(1) of this section. 180
181
182

(C)(1) In a tort action, the trier of fact shall determine
the liability of any defendant for punitive or exemplary damages
and the amount of those damages. 183
184
185

(2) In a tort action, the burden of proof shall be upon a
plaintiff in question, by clear and convincing evidence, to
establish that the plaintiff is entitled to recover punitive or
exemplary damages. 186
187
188
189

(D) This section does not apply to tort actions against the
state in the court of claims or to the extent that another section
of the Revised Code expressly provides any of the following: 190
191
192

(1) Punitive or exemplary damages are recoverable from a
defendant in question in a tort action on a basis other than that
the actions or omissions of that defendant demonstrate malice,
aggravated or egregious fraud, oppression, or insult, or on a
basis other than that the defendant in question as principal or 193
194
195
196
197

master authorized, participated in, or ratified actions or omissions of an agent or servant that so demonstrate.

(2) Punitive or exemplary damages are recoverable from a defendant in question in a tort action irrespective of whether the plaintiff in question has adduced proof of actual damages.

(3) The burden of proof upon a plaintiff in question to recover punitive or exemplary damages from a defendant in question in a tort action is one other than clear and convincing evidence.

(4) Punitive or exemplary damages are not recoverable from a defendant in question in a tort action.

(E) When determining the amount of an award of punitive or exemplary damages against either a home or a residential facility licensed under section 5123.19 of the Revised Code, the trier of fact shall consider all of the following:

(1) The ability of the home or residential facility to pay the award of punitive or exemplary damages based on the home's or residential facility's assets, income, and net worth;

(2) Whether the amount of punitive or exemplary damages is sufficient to deter future tortious conduct;

(3) The financial ability of the home or residential facility, both currently and in the future, to provide accommodations, personal care services, and skilled nursing care.

Sec. 3721.02. (A) The director of health shall license homes and establish procedures to be followed in inspecting and licensing homes. The director may inspect a home at any time. Each home shall be inspected by the director at least once prior to the issuance of a license and at least once every fifteen months thereafter. The state fire marshal or a township, municipal, or other legally constituted fire department approved by the marshal shall also inspect a home prior to issuance of a license, at least

once every fifteen months thereafter, and at any other time 228
requested by the director. A home does not have to be inspected 229
prior to issuance of a license by the director, state fire 230
marshal, or a fire department if ownership of the home is assigned 231
or transferred to a different person and the home was licensed 232
under this chapter immediately prior to the assignment or 233
transfer. The director may enter at any time, for the purposes of 234
investigation, any institution, residence, facility, or other 235
structure ~~which~~ that has been reported to the director or that the 236
director has reasonable cause to believe is operating as a nursing 237
home, residential care facility, or home for the aging without a 238
valid license required by section 3721.05 of the Revised Code or, 239
in the case of a county home or district home, is operating 240
despite the revocation of its residential care facility license. 241
The director may delegate the director's authority and duties 242
under this chapter to any division, bureau, agency, or official of 243
the department of health. 244

(B) A single facility may be licensed both as a nursing home 245
pursuant to this chapter and as an adult care facility pursuant to 246
Chapter 3722. of the Revised Code if the director determines that 247
the part or unit to be licensed as a nursing home can be 248
maintained separate and discrete from the part or unit to be 249
licensed as an adult care facility. 250

(C) In determining the number of residents in a home for the 251
purpose of licensing, the director shall consider all the 252
individuals for whom the home provides accommodations as one group 253
unless one of the following is the case: 254

~~(A)~~(1) The home is a home for the aging, in which case all 255
the individuals in the part or unit licensed as a nursing home 256
shall be considered as one group, and all the individuals in the 257
part or unit licensed as a rest home shall be considered as 258
another group. 259

~~(B)~~(2) The home is both a nursing home and an adult care facility. In that case, all the individuals in the part or unit licensed as a nursing home shall be considered as one group, and all the individuals in the part or unit licensed as an adult care facility shall be considered as another group.

~~(C)~~(3) The home maintains, in addition to a nursing home or residential care facility, a separate and discrete part or unit that provides accommodations to individuals who do not require or receive skilled nursing care and do not receive personal care services from the home, in which case the individuals in the separate and discrete part or unit shall not be considered in determining the number of residents in the home if the separate and discrete part or unit is in compliance with the Ohio basic building code established by the board of building standards under Chapters 3781. and 3791. of the Revised Code and the home permits the director, on request, to inspect the separate and discrete part or unit and speak with the individuals residing there, if they consent, to determine whether the separate and discrete part or unit meets the requirements of this division.

(D) The director of health shall charge an application fee and an annual renewal licensing and inspection fee of one hundred dollars for each fifty persons or part thereof of a home's licensed capacity. All fees collected by the director for the issuance or renewal of licenses shall be deposited into the state treasury to the credit of the general operations fund created in section 3701.83 of the Revised Code for use only in administering and enforcing this chapter and rules adopted under it.

(E) (1) Except as otherwise provided in this section, the results of an inspection or investigation of a home that is conducted under this section, including any statement of deficiencies and all findings and deficiencies cited in the statement on the basis of the inspection or investigation, shall

be used solely to determine the home's compliance with this 292
chapter or another chapter of the Revised Code in any action or 293
proceeding other than an action commenced under division (I) of 294
section 3721.17 of the Revised Code. Those results of an 295
inspection or investigation, that statement of deficiencies, and 296
the findings and deficiencies cited in that statement shall not be 297
used in any court or in any action or proceeding that is pending 298
in any court and are not admissible in evidence in any action or 299
proceeding unless that action or proceeding is an appeal of an 300
action by the department of health under this chapter or is an 301
action by any department or agency of the state to enforce this 302
chapter or another chapter of the Revised Code. 303

(2) Nothing in division (E)(1) of this section prohibits the 304
results of an inspection or investigation conducted under this 305
section from being used in a criminal investigation or 306
prosecution. 307

Sec. 3721.17. (A) Any resident who believes that the 308
resident's rights under sections 3721.10 to 3721.17 of the Revised 309
Code have been violated may file a grievance under procedures 310
adopted pursuant to division (A)(2) of section 3721.12 of the 311
Revised Code. 312

When the grievance committee determines a violation of 313
sections 3721.10 to 3721.17 of the Revised Code has occurred, it 314
shall notify the administrator of the home. If the violation 315
cannot be corrected within ten days, or if ten days have elapsed 316
without correction of the violation, the grievance committee shall 317
refer the matter to the department of health. 318

(B) Any person who believes that a resident's rights under 319
sections 3721.10 to 3721.17 of the Revised Code have been violated 320
may report or cause reports to be made of the information directly 321

to the department of health. No person who files a report is 322
liable for civil damages resulting from the report. 323

(C)(1) Within thirty days of receiving a complaint under this 324
section, the department of health shall investigate any complaint 325
referred to it by a home's grievance committee and any complaint 326
from any source that alleges that the home provided substantially 327
less than adequate care or treatment, or substantially unsafe 328
conditions, or, within seven days of receiving a complaint, refer 329
it to the attorney general, if the attorney general agrees to 330
investigate within thirty days. 331

(2) Within thirty days of receiving a complaint under this 332
section, the department of health may investigate any alleged 333
violation of sections 3721.10 to 3721.17 of the Revised Code, or 334
of rules, policies, or procedures adopted pursuant to those 335
sections, not covered by division (C)(1) of this section, or it 336
may, within seven days of receiving a complaint, refer the 337
complaint to the grievance committee at the home where the alleged 338
violation occurred, or to the attorney general if the attorney 339
general agrees to investigate within thirty days. 340

(D) If, after an investigation, the department of health 341
finds probable cause to believe that a violation of sections 342
3721.10 to 3721.17 of the Revised Code, or of rules, policies, or 343
procedures adopted pursuant to those sections, has occurred at a 344
home that is certified under the medicare or medicaid program, it 345
shall cite one or more findings or deficiencies under sections 346
5111.35 to 5111.62 of the Revised Code. If the home is not so 347
certified, the department shall hold an adjudicative hearing 348
within thirty days under Chapter 119. of the Revised Code. 349

(E) Upon a finding at an adjudicative hearing under division 350
(D) of this section that a violation of sections 3721.10 to 351
3721.17 of the Revised Code, or of rules, policies, or procedures 352
adopted pursuant thereto, has occurred, the department of health 353

shall make an order for compliance, set a reasonable time for
compliance, and assess a fine pursuant to division (F) of this
section. The fine shall be paid to the general revenue fund only
if compliance with the order is not shown to have been made within
the reasonable time set in the order. The department of health may
issue an order prohibiting the continuation of any violation of
sections 3721.10 to 3721.17 of the Revised Code.

Findings at the hearings conducted under this section may be
appealed pursuant to Chapter 119. of the Revised Code, except that
an appeal may be made to the court of common pleas of the county
in which the home is located.

The department of health shall initiate proceedings in court
to collect any fine assessed under this section ~~which~~ that is
unpaid thirty days after the violator's final appeal is exhausted.

(F) Any home found, pursuant to an adjudication hearing under
division (D) of this section, to have violated sections 3721.10 to
3721.17 of the Revised Code, or rules, policies, or procedures
adopted pursuant to those sections may be fined not less than one
hundred nor more than five hundred dollars for a first offense.
For each subsequent offense, the home may be fined not less than
two hundred nor more than one thousand dollars.

A violation of sections 3721.10 to 3721.17 of the Revised
Code is a separate offense for each day of the violation and for
each resident who claims the violation.

(G) No home or employee of a home shall retaliate against any
person who:

(1) Exercises any right set forth in sections 3721.10 to
3721.17 of the Revised Code, including, but not limited to, filing
a complaint with the home's grievance committee or reporting an
alleged violation to the department of health;

(2) Appears as a witness in any hearing conducted under this

section or section 3721.162 of the Revised Code; 385

(3) Files a civil action alleging a violation of sections 386
3721.10 to 3721.17 of the Revised Code, or notifies a county 387
prosecuting attorney or the attorney general of a possible 388
violation of sections 3721.10 to 3721.17 of the Revised Code. 389

If, under the procedures outlined in this section, a home or 390
its employee is found to have retaliated, the violator may be 391
fined up to one thousand dollars. 392

(H) When legal action is indicated, any evidence of criminal 393
activity found in an investigation under division (C) of this 394
section shall be given to the prosecuting attorney in the county 395
in which the home is located for investigation. 396

(I)(1)(a) Any resident whose rights under sections 3721.10 to 397
3721.17 of the Revised Code are violated has a cause of action 398
against any person or home committing the violation. ~~The action~~ 399
~~may be commenced by the resident or by the resident's sponsor on~~ 400
~~behalf of the resident.~~ 401

(b) An action under division (I)(1)(a) of this section may be 402
commenced by the resident or by the resident's legal guardian or 403
other legally authorized representative on behalf of the resident 404
or the resident's estate. If the resident or the resident's legal 405
guardian or other legally authorized representative is unable to 406
commence an action under that division on behalf of the resident, 407
the following persons in the following order of priority have the 408
right to and may commence an action under that division on behalf 409
of the resident or the resident's estate: 410

(i) The resident's spouse; 411
412

(ii) The resident's parent or adult child; 413

(iii) The resident's guardian if the resident is a minor 414

child; 415

(iv) The resident's brother or sister; 416

(v) The resident's niece, nephew, aunt, or uncle. 417

(c) Notwithstanding any law as to priority of persons 418
entitled to commence an action, if more than one eligible person 419
within the same level of priority seeks to commence an action on 420
behalf of a resident or the resident's estate, the court shall 421
determine, in the best interest of the resident or the resident's 422
estate, the individual to commence the action. A court's 423
determination under this division as to the person to commence an 424
action on behalf of a resident or the resident's estate shall bar 425
another person from commencing the action on behalf of the 426
resident or the resident's estate. 427

(d) The result of an action commenced pursuant to division 428
(I)(1)(a) of this section by a person authorized under division 429
(I)(1)(b) of this section shall bind the resident or the 430
resident's estate that is the subject of the action. 431

(e) A cause of action under division (I)(1)(a) of this 432
section shall accrue, and the statute of limitations applicable to 433
that cause of action shall begin to run, based upon the violation 434
of a resident's rights under sections 3721.10 to 3721.17 of the 435
Revised Code, regardless of the party commencing the action on 436
behalf of the resident or the resident's estate as authorized 437
under divisions (I)(1)(b) and (c) of this section. 438

(2)(a) The plaintiff in an action filed under division (I)(1) 439
of this section may obtain injunctive relief against the violation 440
of the resident's rights. The plaintiff also may recover 441
compensatory damages based upon a showing, by a preponderance of 442
the evidence, that the violation of the resident's rights resulted 443
from a negligent act or omission of the person or home and that 444
the violation was the proximate cause of the resident's injury, 445

death, or loss to person or property. 446

(b) If compensatory damages are awarded for a violation of 447
the resident's rights, section 2315.21 of the Revised Code, ~~except~~ 448
~~divisions (E)(1) and (2) of that section,~~ shall apply to an award 449
of punitive or exemplary damages for the violation. 450

~~(b)~~ (c) The court, in a case in which only injunctive relief 451
is granted, may award to the prevailing party reasonable 452
attorney's fees limited to the work reasonably performed. 453

(3) Division (I)(2)~~(a)~~ (b) of this section shall be 454
considered to be purely remedial in operation and shall be applied 455
in a remedial manner in any civil action in which this section is 456
relevant, whether the action is pending in court or commenced on 457
or after July 9, 1998. 458

(4) Within thirty days after the filing of a complaint in an 459
action for damages brought against a home under division (I)(1)(a) 460
of this section by or on behalf of a resident or former resident 461
of the home, the plaintiff or plaintiff's counsel shall send 462
written notice of the filing of the complaint to the department of 463
job and family services if the department has a right of recovery 464
under section 5101.58 of the Revised Code against the liability of 465
the home for the cost of medical services and care arising out of 466
injury, disease, or disability of the resident or former resident. 467

Sec. 5111.411. The results of a survey of a nursing facility 468
that is conducted under section 5111.39 of the Revised Code, 469
including any statement of deficiencies and all findings and 470
deficiencies cited in the statement on the basis of the survey, 471
shall be used solely to determine the nursing facility's 472
compliance with certification requirements or with this chapter or 473
another chapter of the Revised Code. Those results of a survey, 474
that statement of deficiencies, and the findings and deficiencies 475
cited in that statement shall not be used in any court or in any 476

action or proceeding that is pending in any court and are not 477
admissible in evidence in any action or proceeding unless that 478
action or proceeding is an appeal of an administrative action by 479
the department of job and family services or contracting agency 480
under this chapter or is an action by any department or agency of 481
the state to enforce this chapter or another chapter of the 482
Revised Code. 483

Nothing in this section prohibits the results of a survey, a 484
statement of deficiencies, or the findings and deficiencies cited 485
in that statement on the basis of the survey under this section 486
from being used in a criminal investigation or prosecution. 487

Section 2. That existing sections 2305.11, 2315.21, 3721.02, 488
and 3721.17 of the Revised Code are hereby repealed. 489

Section 3. Nothing in this act applies to proceedings or 490
appeals involving workers' compensation claims under Chapter 4121. 491
or 4123. of the Revised Code. 492

Section 4. If any provision of section 2305.11, 2315.21, 493
3721.02, or 3721.17 of the Revised Code, as amended by this act, 494
any provision of section 5111.411 of the Revised Code, as enacted 495
by this act, or the application of any provision of those sections 496
to any person or circumstance is held invalid, the invalidity does 497
not affect other provisions or applications of the particular 498
section or related sections that can be given effect without the 499
invalid provision or application, and to this end the provisions 500
of the particular section are severable. 501