As Introduced

129th General Assembly Regular Session 2011-2012

S. B. No. 72

Senator Lehner

Cosponsors: Senators Bacon, Beagle, Cates, Daniels, Faber, Gillmor, Grendell, Hite, Hughes, Jordan, Patton, Schaffer, Seitz, Wagoner, Wilson

ABILL

To amend sections 2305.11, 2307.52, 2919.16, and
4731.22, to enact new sections 2919.17 and
2919.18, to enact section 2919.171, and to repeal
sections 2919.17 and 2919.18 of the Revised Code
to revise the criminal laws governing
post-viability abortions.
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BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

 Section 1. That sections 2305.11, 2307.52, 2919.16, and
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 4731.22 be amended and new sections 2919.17 and 2919.18 and
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 section 2919.171 of the Revised Code be enacted to read as
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 follows:
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Sec. 2305.11. (A) An action for libel, slander, malicious 11 prosecution, or false imprisonment, an action for malpractice 12 other than an action upon a medical, dental, optometric, or 13 chiropractic claim, or an action upon a statute for a penalty or 14 forfeiture shall be commenced within one year after the cause of 15 action accrued, provided that an action by an employee for the 16 payment of unpaid minimum wages, unpaid overtime compensation, or 17 liquidated damages by reason of the nonpayment of minimum wages or 18

overtime compensation shall be commenced within two years after	19
the cause of action accrued.	20
(B) A civil action for unlawful abortion pursuant to section	21
2919.12 of the Revised Code, a civil action authorized by division	22
(H) of section 2317.56 of the Revised Code, a civil action	23
pursuant to division (B)(1) or (2) of section 2307.51 of the	24
Revised Code for performing a dilation and extraction procedure or	25
attempting to perform a dilation and extraction procedure in	26
violation of section 2919.15 of the Revised Code, and a civil	27
action pursuant to division (B) $\frac{(1)}{(1)}$ or $\frac{(2)}{(2)}$ of section 2307.52 of	28
the Revised Code for terminating or attempting to terminate a	29
human pregnancy after viability in violation of division (A) or	30
(B) of section 2919.17 of the Revised Code shall be commenced	31
within one year after the performance or inducement of the	32
abortion, within one year after the attempt to perform or induce	33
the abortion in violation of division (A) or (B) of section	34
2919.17 of the Revised Code, within one year after the performance	35
of the dilation and extraction procedure, or, in the case of a	36
civil action pursuant to division (B)(2) of section 2307.51 of the	37
Revised Code, within one year after the attempt to perform the	38
dilation and extraction procedure.	39
(C) As used in this section, "medical claim," "dental claim,"	40
"optometric claim," and "chiropractic claim" have the same	41
meanings as in section 2305.113 of the Revised Code.	42
Sec. 2307.52. (A) As used in this section:	43
(1) "Frivolous conduct" has the same meaning as in section	44
2323.51 of the Revised Code.	45
(2) "Viable" has the same meaning as in section 2919.16 of	46
the Revised Code.	47
(B) $\frac{1}{1}$ A woman upon whom an abortion is purposely performed	48

or induced or attempted to be performed or induced in violation of	49
division (A) of section 2919.17 of the Revised Code has and may	50
commence a civil action for compensatory damages, punitive or	51
exemplary damages if authorized by section 2315.21 of the Revised	52
Code, and court costs and reasonable attorney's fees against the	53
person who purposely performed or induced or attempted to perform	54
or induce the abortion in violation of division (A) of section	55
2919.17 of the Revised Code.	56
(2) A woman upon whom an abortion is purposely performed or	57
induced or attempted to be performed or induced in violation of	58

- induced or attempted to be performed or induced in violation of

 division (B) of section 2919.17 of the Revised Code has and may

 commence a civil action for compensatory damages, punitive or

 exemplary damages if authorized by section 2315.21 of the Revised

 Code, and court costs and reasonable attorney's fees against the

 person who purposely performed or induced or attempted to perform

 or induce the abortion in violation of division (B) of section

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 2919.17 of the Revised Code.
- (C) If a judgment is rendered in favor of the defendant in a 66 civil action commenced pursuant to division (B) $\frac{(1)}{(1)}$ or $\frac{(2)}{(2)}$ of this 67 section and the court finds, upon the filing of a motion under 68 section 2323.51 of the Revised Code, that the commencement of the 69 civil action constitutes frivolous conduct and that the defendant 70 was adversely affected by the frivolous conduct, the court shall 71 award in accordance with section 2323.51 of the Revised Code 72 reasonable attorney's fees to the defendant. 73
- **Sec. 2919.16.** As used in sections 2919.16 to 2919.18 of the Revised Code:
- (A) "Fertilization" means the fusion of a human spermatozoon 76 with a human ovum.
- (B) "Gestational age" <u>or "gestation"</u> means the age of an 78 unborn <u>human</u> <u>child</u> as calculated from the first day of the last 79

menstrual period of a pregnant woman.	80
(C) "Health care facility" means a hospital, clinic,	81
ambulatory surgical treatment center, other center, medical	82
school, office of a physician, infirmary, dispensary, medical	83
training institution, or other institution or location in or at	84
which medical care, treatment, or diagnosis is provided to a	85
person.	86
(D) "Hospital" has the same meanings as in sections 3701.01,	87
3727.01, and 5122.01 of the Revised Code.	88
(E) "Live birth" has the same meaning as in division (A) of	89
section 3705.01 of the Revised Code.	90
(F) "Medical emergency" means a condition that a pregnant	91
woman's physician determines, in the physician's good faith and in	92
the exercise of reasonable medical judgment, based upon the facts	93
known to the physician at that time, so complicates the woman's	94
pregnancy as to necessitate the immediate performance or	95
inducement of an abortion in order to prevent the death of the	96
pregnant woman or to avoid a serious risk of the substantial and	97
irreversible impairment of a major bodily function of the pregnant	98
woman that delay in the performance or inducement of the abortion	99
would create.	100
(G) "Physician" has the same meaning as in section 2305.113	101
of the Revised Code.	102
(H) "Pregnant" means the human female reproductive condition,	103
that commences with fertilization, of having a developing fetus.	104
(I) "Pregnancy" means the condition of being pregnant.	105
(J) "Premature infant" means a human whose live birth occurs	106
prior to thirty-eight weeks of gestational age.	107
$\frac{(J)(K)}{(K)}$ "Serious risk of the substantial and irreversible	108
impairment of a major bodily function" means any medically	109

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when the unborn child is viable.

(B)(1) It is an affirmative defense to a charge under

division (A) of this section that the abortion was performed or

induced or attempted to be performed or induced by a physician and	140
that the physician determined, in the physician's good faith	141
medical judgment, based on the facts known to the physician at	142
that time, that either of the following applied:	143
(a) The unborn child was not viable.	144
(b) The abortion was necessary to prevent the death of the	145
pregnant woman or a serious risk of the substantial and	146
irreversible impairment of a major bodily function of the pregnant	147
woman.	148
(2) No abortion shall be considered necessary under division	149
(B)(1)(b) of this section on the basis of a claim or diagnosis	150
that the pregnant woman will engage in conduct that would result	151
in the pregnant woman's death or a substantial and irreversible	152
impairment of a major bodily function of the pregnant woman or	153
based on any reason related to the woman's mental health.	154
(C) Except when a medical emergency exists that prevents	155
compliance with section 2919.18 of the Revised Code, the	156
affirmative defense set forth in division (B)(1)(a) of this	157
section does not apply unless the physician who performs or	158
induces or attempts to perform or induce the abortion performs the	159
viability testing required by division (A) of section 2919.18 of	160
the Revised Code and certifies in writing, based on the results of	161
the tests performed, that in the physician's good faith medical	162
judgment the unborn child is not viable.	163
(D) Except when a medical emergency exists that prevents	164
compliance with one or more of the following conditions, the	165
affirmative defense set forth in division (B)(1)(b) of this	166
section does not apply unless the physician who performs or	167
induces or attempts to perform or induce the abortion complies	168
with all of the following conditions:	169
(1) The physician who performs or induces or attempts to	170

perform or induce the abortion certifies in writing that, in the	171
physician's good faith medical judgment, based on the facts known	172
to the physician at that time, the abortion is necessary to	173
prevent the death of the pregnant woman or a serious risk of the	174
substantial and irreversible impairment of a major bodily function	175
of the pregnant woman.	176
(2) Another physician who is not professionally related to	177
the physician who intends to perform or induce the abortion	178
certifies in writing that, in that physician's good faith medical	179
judgment, based on the facts known to that physician at that time,	180
the abortion is necessary to prevent the death of the pregnant	181
woman or a serious risk of the substantial and irreversible	182
impairment of a major bodily function of the pregnant woman.	183
(3) The physician performs or induces or attempts to perform	184
or induce the abortion in a hospital or other health care facility	185
that has appropriate neonatal services for premature infants.	186
(4) The physician who performs or induces or attempts to	187
perform or induce the abortion terminates or attempts to terminate	188
the pregnancy in the manner that provides the best opportunity for	189
the unborn child to survive, unless that physician determines, in	190
the physician's good faith medical judgment, based on the facts	191
known to the physician at that time, that the termination of the	192
pregnancy in that manner poses a greater risk of the death of the	193
pregnant woman or a greater risk of the substantial and	194
irreversible impairment of a major bodily function of the pregnant	195
woman than would other available methods of abortion.	196
(5) The physician certifies in writing the available method	197
or techniques considered and the reasons for choosing the method	198
or technique employed.	199
(6) The physician who performs or induces or attempts to	200

perform or induce the abortion has arranged for the attendance in

the same room in which the abortion is to be performed or induced	202
or attempted to be performed or induced at least one other	203
physician who is to take control of, provide immediate medical	204
care for, and take all reasonable steps necessary to preserve the	205
life and health of the unborn child immediately upon the child's	206
complete expulsion or extraction from the pregnant woman.	207
(E) For purposes of this section, there is a rebuttable	208
presumption that an unborn child of at least twenty-four weeks	209
gestational age is viable.	210
(F) Whoever violates this section is guilty of terminating or	211
attempting to terminate a human pregnancy after viability, a	212
felony of the fourth degree.	213
(G) The state medical board shall revoke a physician's	214
license to practice medicine in this state if the physician	215
violates this section.	216
(H) Any physician who performs or induces an abortion or	217
attempts to perform or induce an abortion with actual knowledge	218
that neither of the affirmative defenses set forth in division	219
(B)(1) of this section applies, or with a heedless indifference as	220
to whether either affirmative defense applies, is liable in a	221
civil action for compensatory and exemplary damages and reasonable	222
attorney's fees to any person, or the representative of the estate	223
of any person, who sustains injury, death, or loss to person or	224
property as the result of the performance or inducement or the	225
attempted performance or inducement of the abortion. In any action	226
under this division, the court also may award any injunctive or	227
other equitable relief that the court considers appropriate.	228
(I) A pregnant woman on whom an abortion is performed or	229
induced or attempted to be performed or induced in violation of	230
division (A) of this section is not quilty of violating division	231
(A) of this section or of attempting to commit, conspiring to	232

commit, or complicity in committing a violation of division (A) of	233
this section.	234
Sec. 2919.171. (A) A physician who performs or induces or	235
attempts to perform or induce an abortion on a pregnant woman	236
shall submit a report to the department of health in accordance	237
with the forms, rules, and regulations adopted by the department	238
that includes all of the information the physician is required to	239
certify in writing or determine under sections 2919.17 and 2919.18	240
of the Revised Code.	241
(B) By September 30 of each year, the department of health	242
shall issue a public report that provides statistics for the	243
previous calendar year compiled from all of the reports covering	244
that calendar year submitted to the department in accordance with	245
this section for each of the items listed in division (A) of this	246
section. The report shall also provide the statistics for each	247
previous calendar year in which a report was filed with the	248
department pursuant to this section, adjusted to reflect any	249
additional information that a physician provides to the department	250
in a late or corrected report. The department shall ensure that	251
none of the information included in the report could reasonably	252
lead to the identification of any pregnant woman upon whom an	253
abortion is performed.	254
(C)(1) The physician shall submit the report described in	255
division (A) of this section to the department of health within	256
fifteen days after the woman is discharged. If the physician fails	257
to submit the report more than thirty days after that fifteen-day	258
deadline, the physician shall be subject to a late fee of five	259
hundred dollars for each additional thirty-day period or portion	260
of a thirty-day period the report is overdue. A physician who is	261
required to submit to the department of health a report under	262
division (A) of this section and who has not submitted a report or	263

has submitted an incomplete report more than one year following	264
the fifteen-day deadline may, in an action brought by the	265
department of health, be directed by a court of competent	266
jurisdiction to submit a complete report to the department of	267
health within a period of time stated in a court order or be	268
subject to contempt of court.	269
(2) If a physician fails to comply with the requirements of	270
this section, other than filing a late report with the department	271
of health, or fails to submit a complete report to the department	272
of health in accordance with a court order, the physician is	273
subject to division (B)(41) of section 4731.22 of the Revised	274
Code.	275
(3) No person shall falsify any report required under this	276
section. Whoever violates this division is guilty of abortion	277
report falsification, a misdemeanor of the first degree.	278
(D) Within ninety days of the effective date of this section,	279
the department of health shall adopt rules pursuant to section	280
111.15 of the Revised Code to assist in compliance with this	281
section.	282
Sec. 2919.18. (A) Except in a medical emergency that prevents	283
compliance with this division, no physician shall perform or	284
induce or attempt to perform or induce an abortion on a pregnant	285
woman after the beginning of the twentieth week of gestation	286
unless, prior to the performance or inducement of the abortion or	287
the attempt to perform or induce the abortion, the physician	288
determines, in the physician's good faith medical judgment, that	289
the unborn child is not viable, and the physician makes that	290
determination after performing a medical examination of the	291
pregnant woman and after performing or causing to be performed	292
those tests for assessing gestational age, weight, lung maturity,	293
or other tests that the physician, in that physician's good faith	294

medical judgment, believes are necessary to determine whether an	295
unborn child is viable.	296
(B) Except in a medical emergency that prevents compliance	297
with this division, no physician shall perform or induce or	298
attempt to perform or induce an abortion on a pregnant woman after	299
the beginning of the twentieth week of gestation without first	300
entering the determination made in division (A) of this section	301
and the associated findings of the medical examination and tests	302
in the medical record of the pregnant woman.	303
(C) Whoever violates this section is quilty of failure to	304
perform viability testing, a misdemeanor of the fourth degree.	305
(D) The state medical board shall suspend a physician's	306
license to practice medicine in this state for a period of not	307
less than six months if the physician violates this section.	308
Sec. 4731.22. (A) The state medical board, by an affirmative	309
vote of not fewer than six of its members, may revoke or may	310
refuse to grant a certificate to a person found by the board to	311
have committed fraud during the administration of the examination	312
for a certificate to practice or to have committed fraud,	313
misrepresentation, or deception in applying for or securing any	314
certificate to practice or certificate of registration issued by	315
the board.	316
(B) The board, by an affirmative vote of not fewer than six	317
members, shall, to the extent permitted by law, limit, revoke, or	318
suspend an individual's certificate to practice, refuse to	319
register an individual, refuse to reinstate a certificate, or	320
reprimand or place on probation the holder of a certificate for	321
one or more of the following reasons:	322
(1) Permitting one's name or one's certificate to practice or	323
certificate of registration to be used by a person, group, or	324

corporation when the individual concerned is not actually	325
directing the treatment given;	326
(2) Failure to maintain minimal standards applicable to the	327
selection or administration of drugs, or failure to employ	328
acceptable scientific methods in the selection of drugs or other	329
modalities for treatment of disease;	330
(3) Selling, giving away, personally furnishing, prescribing,	331
or administering drugs for other than legal and legitimate	332
therapeutic purposes or a plea of guilty to, a judicial finding of	333
guilt of, or a judicial finding of eligibility for intervention in	334
lieu of conviction of, a violation of any federal or state law	335
regulating the possession, distribution, or use of any drug;	336
(4) Willfully betraying a professional confidence.	337
For purposes of this division, "willfully betraying a	338
professional confidence" does not include providing any	339
information, documents, or reports to a child fatality review	340
board under sections 307.621 to 307.629 of the Revised Code and	341
does not include the making of a report of an employee's use of a	342
drug of abuse, or a report of a condition of an employee other	343
than one involving the use of a drug of abuse, to the employer of	344
the employee as described in division (B) of section 2305.33 of	345
the Revised Code. Nothing in this division affects the immunity	346
from civil liability conferred by that section upon a physician	347
who makes either type of report in accordance with division (B) of	348
that section. As used in this division, "employee," "employer,"	349
and "physician" have the same meanings as in section 2305.33 of	350
the Revised Code.	351
(5) Making a false, fraudulent, deceptive, or misleading	352
statement in the solicitation of or advertising for patients; in	353
relation to the practice of medicine and surgery, osteopathic	354

medicine and surgery, podiatric medicine and surgery, or a limited

branch of medicine; or in securing or attempting to secure any	356
certificate to practice or certificate of registration issued by	357
the board.	358
As used in this division, "false, fraudulent, deceptive, or	359
misleading statement" means a statement that includes a	360
misrepresentation of fact, is likely to mislead or deceive because	361
of a failure to disclose material facts, is intended or is likely	362
to create false or unjustified expectations of favorable results,	363
or includes representations or implications that in reasonable	364
probability will cause an ordinarily prudent person to	365
misunderstand or be deceived.	366
(6) A departure from, or the failure to conform to, minimal	367
standards of care of similar practitioners under the same or	368
similar circumstances, whether or not actual injury to a patient	369
is established;	370
(7) Representing, with the purpose of obtaining compensation	371
or other advantage as personal gain or for any other person, that	372
an incurable disease or injury, or other incurable condition, can	373
be permanently cured;	374
(8) The obtaining of, or attempting to obtain, money or	375
anything of value by fraudulent misrepresentations in the course	376
of practice;	377
(9) A plea of guilty to, a judicial finding of guilt of, or a	378
judicial finding of eligibility for intervention in lieu of	379
conviction for, a felony;	380
(10) Commission of an act that constitutes a felony in this	381
state, regardless of the jurisdiction in which the act was	382
committed;	383
(11) A plea of guilty to, a judicial finding of guilt of, or	384
a judicial finding of eligibility for intervention in lieu of	385

conviction for, a misdemeanor committed in the course of practice;

(12) Commission of an act in the course of practice that	387
constitutes a misdemeanor in this state, regardless of the	388
jurisdiction in which the act was committed;	389
(13) A plea of guilty to, a judicial finding of guilt of, or	390
a judicial finding of eligibility for intervention in lieu of	391
conviction for, a misdemeanor involving moral turpitude;	392
(14) Commission of an act involving moral turpitude that	393
constitutes a misdemeanor in this state, regardless of the	394
jurisdiction in which the act was committed;	395
(15) Violation of the conditions of limitation placed by the	396
board upon a certificate to practice;	397
(16) Failure to pay license renewal fees specified in this	398
chapter;	399
(17) Except as authorized in section 4731.31 of the Revised	400
Code, engaging in the division of fees for referral of patients,	401
or the receiving of a thing of value in return for a specific	402
referral of a patient to utilize a particular service or business;	403
(18) Subject to section 4731.226 of the Revised Code,	404
violation of any provision of a code of ethics of the American	405
medical association, the American osteopathic association, the	406
American podiatric medical association, or any other national	407
professional organizations that the board specifies by rule. The	408
state medical board shall obtain and keep on file current copies	409
of the codes of ethics of the various national professional	410
organizations. The individual whose certificate is being suspended	411
or revoked shall not be found to have violated any provision of a	412
code of ethics of an organization not appropriate to the	413
individual's profession.	414
For purposes of this division, a "provision of a code of	415
ethics of a national professional organization" does not include	416

any provision that would preclude the making of a report by a

physician of an employee's use of a drug of abuse, or of a	418
condition of an employee other than one involving the use of a	419
drug of abuse, to the employer of the employee as described in	420
division (B) of section 2305.33 of the Revised Code. Nothing in	421
this division affects the immunity from civil liability conferred	422
by that section upon a physician who makes either type of report	423
in accordance with division (B) of that section. As used in this	424
division, "employee," "employer," and "physician" have the same	425
meanings as in section 2305.33 of the Revised Code.	426

(19) Inability to practice according to acceptable and
prevailing standards of care by reason of mental illness or
physical illness, including, but not limited to, physical
deterioration that adversely affects cognitive, motor, or
perceptive skills.

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In enforcing this division, the board, upon a showing of a 432 possible violation, may compel any individual authorized to 433 practice by this chapter or who has submitted an application 434 pursuant to this chapter to submit to a mental examination, 435 physical examination, including an HIV test, or both a mental and 436 a physical examination. The expense of the examination is the 437 responsibility of the individual compelled to be examined. Failure 438 to submit to a mental or physical examination or consent to an HIV 439 test ordered by the board constitutes an admission of the 440 allegations against the individual unless the failure is due to 441 circumstances beyond the individual's control, and a default and 442 final order may be entered without the taking of testimony or 443 presentation of evidence. If the board finds an individual unable 444 to practice because of the reasons set forth in this division, the 445 board shall require the individual to submit to care, counseling, 446 or treatment by physicians approved or designated by the board, as 447 a condition for initial, continued, reinstated, or renewed 448 authority to practice. An individual affected under this division 449

shall be afforded an opportunity to demonstrate to the board the	450
ability to resume practice in compliance with acceptable and	451
prevailing standards under the provisions of the individual's	452
certificate. For the purpose of this division, any individual who	453
applies for or receives a certificate to practice under this	454
chapter accepts the privilege of practicing in this state and, by	455
so doing, shall be deemed to have given consent to submit to a	456
mental or physical examination when directed to do so in writing	457
by the board, and to have waived all objections to the	458
admissibility of testimony or examination reports that constitute	459
a privileged communication.	460

(20) Except when civil penalties are imposed under section 461 4731.225 or 4731.281 of the Revised Code, and subject to section 462 4731.226 of the Revised Code, violating or attempting to violate, 463 directly or indirectly, or assisting in or abetting the violation 464 of, or conspiring to violate, any provisions of this chapter or 465 any rule promulgated by the board.

This division does not apply to a violation or attempted 467 violation of, assisting in or abetting the violation of, or a 468 conspiracy to violate, any provision of this chapter or any rule 469 adopted by the board that would preclude the making of a report by 470 a physician of an employee's use of a drug of abuse, or of a 471 condition of an employee other than one involving the use of a 472 drug of abuse, to the employer of the employee as described in 473 division (B) of section 2305.33 of the Revised Code. Nothing in 474 this division affects the immunity from civil liability conferred 475 by that section upon a physician who makes either type of report 476 in accordance with division (B) of that section. As used in this 477 division, "employee," "employer," and "physician" have the same 478 meanings as in section 2305.33 of the Revised Code. 479

(21) The violation of section 3701.79 of the Revised Code or 480 of any abortion rule adopted by the public health council pursuant 481

to section 3701.341 of the Revised Code;	482
(22) Any of the following actions taken by the agency	483
responsible for regulating the practice of medicine and surgery,	484
osteopathic medicine and surgery, podiatric medicine and surgery,	485
or the limited branches of medicine in another jurisdiction, for	486
any reason other than the nonpayment of fees: the limitation,	487
revocation, or suspension of an individual's license to practice;	488
acceptance of an individual's license surrender; denial of a	489
license; refusal to renew or reinstate a license; imposition of	490
probation; or issuance of an order of censure or other reprimand;	491
(23) The violation of section 2919.12 of the Revised Code or	492
the performance or inducement of an abortion upon a pregnant woman	493
with actual knowledge that the conditions specified in division	494
(B) of section 2317.56 of the Revised Code have not been satisfied	495
or with a heedless indifference as to whether those conditions	496
have been satisfied, unless an affirmative defense as specified in	497
division $(H)(2)$ of that section would apply in a civil action	498
authorized by division (H)(1) of that section;	499
(24) The revocation, suspension, restriction, reduction, or	500
termination of clinical privileges by the United States department	501
of defense or department of veterans affairs or the termination or	502
suspension of a certificate of registration to prescribe drugs by	503
the drug enforcement administration of the United States	504
department of justice;	505
(25) Termination or suspension from participation in the	506
medicare or medicaid programs by the department of health and	507
human services or other responsible agency for any act or acts	508
that also would constitute a violation of division $(B)(2)$, (3) ,	509
(6), (8), or (19) of this section;	510
(26) Impairment of ability to practice according to	511

acceptable and prevailing standards of care because of habitual or

excessive	e use	or	abuse	of	drugs,	alcohol,	or	other	substances	that	513
impair al	oility	, to	pract	ice	e.						514

For the purposes of this division, any individual authorized 515 to practice by this chapter accepts the privilege of practicing in 516 this state subject to supervision by the board. By filing an 517 application for or holding a certificate to practice under this 518 chapter, an individual shall be deemed to have given consent to 519 submit to a mental or physical examination when ordered to do so 520 by the board in writing, and to have waived all objections to the 521 admissibility of testimony or examination reports that constitute 522 privileged communications. 523

If it has reason to believe that any individual authorized to 524 practice by this chapter or any applicant for certification to 525 practice suffers such impairment, the board may compel the 526 individual to submit to a mental or physical examination, or both. 527 The expense of the examination is the responsibility of the 528 individual compelled to be examined. Any mental or physical 529 examination required under this division shall be undertaken by a 530 treatment provider or physician who is qualified to conduct the 531 examination and who is chosen by the board. 532

Failure to submit to a mental or physical examination ordered 533 by the board constitutes an admission of the allegations against 534 the individual unless the failure is due to circumstances beyond 535 the individual's control, and a default and final order may be 536 entered without the taking of testimony or presentation of 537 evidence. If the board determines that the individual's ability to 538 practice is impaired, the board shall suspend the individual's 539 certificate or deny the individual's application and shall require 540 the individual, as a condition for initial, continued, reinstated, 541 or renewed certification to practice, to submit to treatment. 542

Before being eligible to apply for reinstatement of a 543 certificate suspended under this division, the impaired 544

practitioner shall demonstrate to the board the ability to resume	545
practice in compliance with acceptable and prevailing standards of	546
care under the provisions of the practitioner's certificate. The	547
demonstration shall include, but shall not be limited to, the	548
following:	549
(a) Certification from a treatment provider approved under	550
section 4731.25 of the Revised Code that the individual has	551
successfully completed any required inpatient treatment;	552
(b) Evidence of continuing full compliance with an aftercare	553
contract or consent agreement;	554
(c) Two written reports indicating that the individual's	555
ability to practice has been assessed and that the individual has	556
been found capable of practicing according to acceptable and	557
prevailing standards of care. The reports shall be made by	558
individuals or providers approved by the board for making the	559
assessments and shall describe the basis for their determination.	560
The board may reinstate a certificate suspended under this	561
division after that demonstration and after the individual has	562
entered into a written consent agreement.	563
When the impaired practitioner resumes practice, the board	564
shall require continued monitoring of the individual. The	565
monitoring shall include, but not be limited to, compliance with	566
the written consent agreement entered into before reinstatement or	567
with conditions imposed by board order after a hearing, and, upon	568
termination of the consent agreement, submission to the board for	569
at least two years of annual written progress reports made under	570
penalty of perjury stating whether the individual has maintained	571
sobriety.	572
(27) A second or subsequent violation of section 4731.66 or	573
4731.69 of the Revised Code;	574

(28) Except as provided in division (N) of this section:

606

(a) Waiving the payment of all or any part of a deductible or	576
copayment that a patient, pursuant to a health insurance or health	577
care policy, contract, or plan that covers the individual's	578
services, otherwise would be required to pay if the waiver is used	579
as an enticement to a patient or group of patients to receive	580
health care services from that individual;	581
(b) Advertising that the individual will waive the payment of	582
all or any part of a deductible or copayment that a patient,	583
pursuant to a health insurance or health care policy, contract, or	584
plan that covers the individual's services, otherwise would be	585
required to pay.	586
(29) Failure to use universal blood and body fluid	587
precautions established by rules adopted under section 4731.051 of	588
the Revised Code;	589
(30) Failure to provide notice to, and receive acknowledgment	590
of the notice from, a patient when required by section 4731.143 of	591
the Revised Code prior to providing nonemergency professional	592
services, or failure to maintain that notice in the patient's	593
file;	594
(31) Failure of a physician supervising a physician assistant	595
to maintain supervision in accordance with the requirements of	596
Chapter 4730. of the Revised Code and the rules adopted under that	597
chapter;	598
(32) Failure of a physician or podiatrist to enter into a	599
standard care arrangement with a clinical nurse specialist,	600
certified nurse-midwife, or certified nurse practitioner with whom	601
the physician or podiatrist is in collaboration pursuant to	602
section 4731.27 of the Revised Code or failure to fulfill the	603
responsibilities of collaboration after entering into a standard	604
care arrangement;	605

(33) Failure to comply with the terms of a consult agreement

entered into with a pharmacist pursuant to section 4729.39 of the	607
Revised Code;	608
(34) Failure to cooperate in an investigation conducted by	609
the board under division (F) of this section, including failure to	610
comply with a subpoena or order issued by the board or failure to	611
answer truthfully a question presented by the board at a	612
deposition or in written interrogatories, except that failure to	613
cooperate with an investigation shall not constitute grounds for	614
discipline under this section if a court of competent jurisdiction	615
has issued an order that either quashes a subpoena or permits the	616
individual to withhold the testimony or evidence in issue;	617
(35) Failure to supervise an acupuncturist in accordance with	618
Chapter 4762. of the Revised Code and the board's rules for	619
supervision of an acupuncturist;	620
(36) Failure to supervise an anesthesiologist assistant in	621
accordance with Chapter 4760. of the Revised Code and the board's	622
rules for supervision of an anesthesiologist assistant;	623
(37) Assisting suicide as defined in section 3795.01 of the	624
Revised Code;	625
(38) Failure to comply with the requirements of section	626
2317.561 of the Revised Code;	627
(39) Failure to supervise a radiologist assistant in	628
accordance with Chapter 4774. of the Revised Code and the board's	629
rules for supervision of radiologist assistants;	630
(40) Performing or inducing an abortion at an office or	631
facility with knowledge that the office or facility fails to post	632
the notice required under section 3701.791 of the Revised Code:	633
(41) Failure to comply with the requirements of section	634
2919.171 of the Revised Code or failure to submit to the	635
department of health in accordance with a court order a complete	636

637

report as descri	ibed in secti	on 2919.171	of the	Revised Code.	

(C) Disciplinary actions taken by the board under divisions 638 (A) and (B) of this section shall be taken pursuant to an 639 adjudication under Chapter 119. of the Revised Code, except that 640 in lieu of an adjudication, the board may enter into a consent 641 agreement with an individual to resolve an allegation of a 642 violation of this chapter or any rule adopted under it. A consent 643 agreement, when ratified by an affirmative vote of not fewer than 644 six members of the board, shall constitute the findings and order 645 of the board with respect to the matter addressed in the 646 agreement. If the board refuses to ratify a consent agreement, the 647 admissions and findings contained in the consent agreement shall 648 be of no force or effect. 649

If the board takes disciplinary action against an individual 650 under division (B) of this section for a second or subsequent plea 651 of guilty to, or judicial finding of guilt of, a violation of 652 section 2919.123 of the Revised Code, the disciplinary action 653 shall consist of a suspension of the individual's certificate to 654 practice for a period of at least one year or, if determined 655 appropriate by the board, a more serious sanction involving the 656 individual's certificate to practice. Any consent agreement 657 entered into under this division with an individual that pertains 658 to a second or subsequent plea of guilty to, or judicial finding 659 of guilt of, a violation of that section shall provide for a 660 suspension of the individual's certificate to practice for a 661 period of at least one year or, if determined appropriate by the 662 board, a more serious sanction involving the individual's 663 certificate to practice. 664

(D) For purposes of divisions (B)(10), (12), and (14) of this 665 section, the commission of the act may be established by a finding 666 by the board, pursuant to an adjudication under Chapter 119. of 667 the Revised Code, that the individual committed the act. The board 668

does not have jurisdiction under those divisions if the trial	669
court renders a final judgment in the individual's favor and that	670
judgment is based upon an adjudication on the merits. The board	671
has jurisdiction under those divisions if the trial court issues	672
an order of dismissal upon technical or procedural grounds.	673

- (E) The sealing of conviction records by any court shall have 674 no effect upon a prior board order entered under this section or 675 upon the board's jurisdiction to take action under this section 676 if, based upon a plea of guilty, a judicial finding of guilt, or a 677 judicial finding of eligibility for intervention in lieu of 678 conviction, the board issued a notice of opportunity for a hearing 679 prior to the court's order to seal the records. The board shall 680 not be required to seal, destroy, redact, or otherwise modify its 681 records to reflect the court's sealing of conviction records. 682
- (F)(1) The board shall investigate evidence that appears to 683 show that a person has violated any provision of this chapter or 684 685 any rule adopted under it. Any person may report to the board in a signed writing any information that the person may have that 686 appears to show a violation of any provision of this chapter or 687 any rule adopted under it. In the absence of bad faith, any person 688 who reports information of that nature or who testifies before the 689 board in any adjudication conducted under Chapter 119. of the 690 Revised Code shall not be liable in damages in a civil action as a 691 result of the report or testimony. Each complaint or allegation of 692 a violation received by the board shall be assigned a case number 693 and shall be recorded by the board. 694
- (2) Investigations of alleged violations of this chapter or
 any rule adopted under it shall be supervised by the supervising
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 member elected by the board in accordance with section 4731.02 of
 the Revised Code and by the secretary as provided in section
 698
 4731.39 of the Revised Code. The president may designate another
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 member of the board to supervise the investigation in place of the

supervising member. No member of the board who supervises the	701
investigation of a case shall participate in further adjudication	702
of the case.	703

(3) In investigating a possible violation of this chapter or 704 any rule adopted under this chapter, the board may administer 705 oaths, order the taking of depositions, issue subpoenas, and 706 compel the attendance of witnesses and production of books, 707 accounts, papers, records, documents, and testimony, except that a 708 subpoena for patient record information shall not be issued 709 without consultation with the attorney general's office and 710 approval of the secretary and supervising member of the board. 711 Before issuance of a subpoena for patient record information, the 712 secretary and supervising member shall determine whether there is 713 probable cause to believe that the complaint filed alleges a 714 violation of this chapter or any rule adopted under it and that 715 the records sought are relevant to the alleged violation and 716 material to the investigation. The subpoena may apply only to 717 records that cover a reasonable period of time surrounding the 718 alleged violation. 719

On failure to comply with any subpoena issued by the board 720 and after reasonable notice to the person being subpoenaed, the 721 board may move for an order compelling the production of persons 722 or records pursuant to the Rules of Civil Procedure. 723

A subpoena issued by the board may be served by a sheriff, 724 the sheriff's deputy, or a board employee designated by the board. 725 Service of a subpoena issued by the board may be made by 726 delivering a copy of the subpoena to the person named therein, 727 reading it to the person, or leaving it at the person's usual 728 place of residence. When the person being served is a person whose 729 practice is authorized by this chapter, service of the subpoena 730 may be made by certified mail, restricted delivery, return receipt 731 requested, and the subpoena shall be deemed served on the date 732

delivery	is	made	or	the	date	the	person	refuses	to	accept	733
delivery.											734

A sheriff's deputy who serves a subpoena shall receive the 735 same fees as a sheriff. Each witness who appears before the board 736 in obedience to a subpoena shall receive the fees and mileage 737 provided for under section 119.094 of the Revised Code. 738

- (4) All hearings and investigations of the board shall be 739 considered civil actions for the purposes of section 2305.252 of 740 the Revised Code. 741
- (5) Information received by the board pursuant to an 742 investigation is confidential and not subject to discovery in any 743 civil action. 744

The board shall conduct all investigations and proceedings in 745 a manner that protects the confidentiality of patients and persons 746 who file complaints with the board. The board shall not make 747 public the names or any other identifying information about 748 patients or complainants unless proper consent is given or, in the 749 case of a patient, a waiver of the patient privilege exists under 750 division (B) of section 2317.02 of the Revised Code, except that 751 consent or a waiver of that nature is not required if the board 752 possesses reliable and substantial evidence that no bona fide 753 physician-patient relationship exists. 754

The board may share any information it receives pursuant to 755 an investigation, including patient records and patient record 756 information, with law enforcement agencies, other licensing 757 boards, and other governmental agencies that are prosecuting, 758 adjudicating, or investigating alleged violations of statutes or 759 administrative rules. An agency or board that receives the 760 information shall comply with the same requirements regarding 761 confidentiality as those with which the state medical board must 762 comply, notwithstanding any conflicting provision of the Revised 763

Code or procedure of the agency or board that applies when it is	764
dealing with other information in its possession. In a judicial	765
proceeding, the information may be admitted into evidence only in	766
accordance with the Rules of Evidence, but the court shall require	767
that appropriate measures are taken to ensure that confidentiality	768
is maintained with respect to any part of the information that	769
contains names or other identifying information about patients or	770
complainants whose confidentiality was protected by the state	771
medical board when the information was in the board's possession.	772
Measures to ensure confidentiality that may be taken by the court	773
include sealing its records or deleting specific information from	774
its records.	775
(6) On a quarterly basis, the board shall prepare a report	776
that documents the disposition of all cases during the preceding	777
three months. The report shall contain the following information	778
for each case with which the board has completed its activities:	779
(a) The case number assigned to the complaint or alleged	780
violation;	
VIOIALION,	781
(b) The type of certificate to practice, if any, held by the	782
individual against whom the complaint is directed;	783
(c) A description of the allegations contained in the	784
complaint;	785
(d) The digresition of the gage	706
(d) The disposition of the case.	786
The report shall state how many cases are still pending and	787

(G) If the secretary and supervising member determine that 791 there is clear and convincing evidence that an individual has 792 violated division (B) of this section and that the individual's 793 continued practice presents a danger of immediate and serious harm 794

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shall be prepared in a manner that protects the identity of each

person involved in each case. The report shall be a public record

under section 149.43 of the Revised Code.

to the public, they may recommend that the board suspend the	795
individual's certificate to practice without a prior hearing.	796
Written allegations shall be prepared for consideration by the	797
board.	798

The board, upon review of those allegations and by an 799 affirmative vote of not fewer than six of its members, excluding 800 the secretary and supervising member, may suspend a certificate 801 without a prior hearing. A telephone conference call may be 802 utilized for reviewing the allegations and taking the vote on the 803 summary suspension.

The board shall issue a written order of suspension by 805 certified mail or in person in accordance with section 119.07 of 806 the Revised Code. The order shall not be subject to suspension by 807 the court during pendency of any appeal filed under section 119.12 808 of the Revised Code. If the individual subject to the summary 809 suspension requests an adjudicatory hearing by the board, the date 810 set for the hearing shall be within fifteen days, but not earlier 811 than seven days, after the individual requests the hearing, unless 812 otherwise agreed to by both the board and the individual. 813

Any summary suspension imposed under this division shall 814 remain in effect, unless reversed on appeal, until a final 815 adjudicative order issued by the board pursuant to this section 816 and Chapter 119. of the Revised Code becomes effective. The board 817 shall issue its final adjudicative order within seventy-five days 818 after completion of its hearing. A failure to issue the order 819 within seventy-five days shall result in dissolution of the 820 summary suspension order but shall not invalidate any subsequent, 821 final adjudicative order. 822

(H) If the board takes action under division (B)(9), (11), or 823 (13) of this section and the judicial finding of guilt, guilty 824 plea, or judicial finding of eligibility for intervention in lieu 825 of conviction is overturned on appeal, upon exhaustion of the 826

criminal appeal, a petition for reconsideration of the order may	827
be filed with the board along with appropriate court documents.	828
Upon receipt of a petition of that nature and supporting court	829
documents, the board shall reinstate the individual's certificate	830
to practice. The board may then hold an adjudication under Chapter	831
119. of the Revised Code to determine whether the individual	832
committed the act in question. Notice of an opportunity for a	833
hearing shall be given in accordance with Chapter 119. of the	834
Revised Code. If the board finds, pursuant to an adjudication held	835
under this division, that the individual committed the act or if	836
no hearing is requested, the board may order any of the sanctions	837
identified under division (B) of this section.	838

(I) The certificate to practice issued to an individual under 839 this chapter and the individual's practice in this state are 840 automatically suspended as of the date of the individual's second 841 or subsequent plea of guilty to, or judicial finding of guilt of, 842 a violation of section 2919.123 of the Revised Code, or the date 843 the individual pleads guilty to, is found by a judge or jury to be 844 guilty of, or is subject to a judicial finding of eligibility for 845 intervention in lieu of conviction in this state or treatment or 846 intervention in lieu of conviction in another jurisdiction for any 847 of the following criminal offenses in this state or a 848 substantially equivalent criminal offense in another jurisdiction: 849 aggravated murder, murder, voluntary manslaughter, felonious 850 assault, kidnapping, rape, sexual battery, gross sexual 851 imposition, aggravated arson, aggravated robbery, or aggravated 852 burglary. Continued practice after suspension shall be considered 853 practicing without a certificate. 854

The board shall notify the individual subject to the 855 suspension by certified mail or in person in accordance with 856 section 119.07 of the Revised Code. If an individual whose 857 certificate is automatically suspended under this division fails 858

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to make a timely request for an adjudication under Chapter 119. of	859
the Revised Code, the board shall do whichever of the following is	860
applicable:	861
(1) If the automatic suspension under this division is for a	862
second or subsequent plea of guilty to, or judicial finding of	863
guilt of, a violation of section 2919.123 of the Revised Code, the	864
board shall enter an order suspending the individual's certificate	865
to practice for a period of at least one year or, if determined	866
appropriate by the board, imposing a more serious sanction	867
involving the individual's certificate to practice.	868
(2) In all circumstances in which division (I)(1) of this	869
section does not apply, enter a final order permanently revoking	870
the individual's certificate to practice.	871
(J) If the board is required by Chapter 119. of the Revised	872
Code to give notice of an opportunity for a hearing and if the	873
individual subject to the notice does not timely request a hearing	874
in accordance with section 119.07 of the Revised Code, the board	875
is not required to hold a hearing, but may adopt, by an	876
affirmative vote of not fewer than six of its members, a final	877
order that contains the board's findings. In that final order, the	878
board may order any of the sanctions identified under division (A)	879
or (B) of this section.	880
(K) Any action taken by the board under division (B) of this	881
section resulting in a suspension from practice shall be	882
accompanied by a written statement of the conditions under which	883

(L) When the board refuses to grant a certificate to an

the individual's certificate to practice may be reinstated. The

board shall adopt rules governing conditions to be imposed for

reinstatement. Reinstatement of a certificate suspended pursuant

to division (B) of this section requires an affirmative vote of

not fewer than six members of the board.

applicant, revokes an individual's certificate to practice,	890
refuses to register an applicant, or refuses to reinstate an	891
individual's certificate to practice, the board may specify that	892
its action is permanent. An individual subject to a permanent	893
action taken by the board is forever thereafter ineligible to hold	894
a certificate to practice and the board shall not accept an	895
application for reinstatement of the certificate or for issuance	896
of a new certificate.	897
(M) Notwithstanding any other provision of the Revised Code,	898
all of the following apply:	899
(1) The surrender of a certificate issued under this chapter	900
shall not be effective unless or until accepted by the board.	901
Reinstatement of a certificate surrendered to the board requires	902
an affirmative vote of not fewer than six members of the board.	903
(2) An application for a certificate made under the	904
provisions of this chapter may not be withdrawn without approval	905
of the board.	906
(3) Failure by an individual to renew a certificate of	907
registration in accordance with this chapter shall not remove or	908
limit the board's jurisdiction to take any disciplinary action	909
under this section against the individual.	910
(N) Sanctions shall not be imposed under division (B)(28) of	911
this section against any person who waives deductibles and	912
copayments as follows:	913
(1) In compliance with the health benefit plan that expressly	914
allows such a practice. Waiver of the deductibles or copayments	915
shall be made only with the full knowledge and consent of the plan	916
purchaser, payer, and third-party administrator. Documentation of	917
the consent shall be made available to the board upon request.	918

(2) For professional services rendered to any other person

authorized to practice pursuant to this chapter, to the extent

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allowed by this chapter and rules adopted by the board.	921
(0) Under the board's investigative duties described in this	922
section and subject to division (F) of this section, the board	923
shall develop and implement a quality intervention program	924
designed to improve through remedial education the clinical and	925
communication skills of individuals authorized under this chapter	926
to practice medicine and surgery, osteopathic medicine and	927
surgery, and podiatric medicine and surgery. In developing and	928
implementing the quality intervention program, the board may do	929
all of the following:	930
(1) Offer in appropriate cases as determined by the board an	931
educational and assessment program pursuant to an investigation	932
the board conducts under this section;	933
(2) Select providers of educational and assessment services,	934
including a quality intervention program panel of case reviewers;	935
(3) Make referrals to educational and assessment service	936
providers and approve individual educational programs recommended	937
by those providers. The board shall monitor the progress of each	938
individual undertaking a recommended individual educational	939
program.	940
(4) Determine what constitutes successful completion of an	941
individual educational program and require further monitoring of	942
the individual who completed the program or other action that the	943
board determines to be appropriate;	944
(5) Adopt rules in accordance with Chapter 119. of the	945
Revised Code to further implement the quality intervention	946
program.	947
An individual who participates in an individual educational	948
program pursuant to this division shall pay the financial	949
obligations arising from that educational program.	950

Section 2. That existing sections 2305.11, 2307.52, 2919.16,	951
4731.22 and sections 2919.17 and 2919.18 of the Revised Code are	952
hereby repealed.	953
Section 3. Section 4731.22 of the Revised Code is presented	954
in this act as a composite of the section as amended by Am. Sub.	955
H.B. 280, Sub. H.B. 525, and Sub. S.B. 229 of the 127th General	956
Assembly. The General Assembly, applying the principle stated in	957
division (B) of section 1.52 of the Revised Code that amendments	958
are to be harmonized if reasonably capable of simultaneous	959
operation, finds that the composite is the resulting version of	960
the section in effect prior to the effective date of the section	961
as presented in this act.	962