

As Introduced

**130th General Assembly
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H. B. No. 412

Representative Gonzales

Cosponsors: Representatives Bishoff, Hood, Terhar, Young

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A B I L L

To amend sections 1.64, 2133.211, 2305.113, 4503.44, 1
4729.01, 4730.01, 4730.02, 4730.03, 4730.04, 2
4730.06, 4730.08, 4730.091, 4730.10, 4730.101, 3
4730.11, 4730.12, 4730.13, 4730.14, 4730.16, 4
4730.21, 4730.25, 4730.251, 4730.27, 4730.28, 5
4730.31, 4730.32, 4730.33, 4730.38, 4730.39, 6
4730.41, 4730.42, 4730.43, 4730.49, 4730.51, 7
4730.53, 4765.01, 4765.51, and 5123.47, to amend, 8
for the purpose of adopting a new section number 9
as shown in parentheses, sections 4730.091 10
(4730.201) and 4730.092 (4730.202), to enact new 11
section 4730.20, and to repeal sections 4730.081, 12
4730.09, 4730.15, 4730.17, 4730.18, 4730.19, 13
4730.20, 4730.401, 4730.44, 4730.45, 4730.46, 14
4730.47, 4730.48, 4730.50, and 4730.52 of the 15
Revised Code to revise the law governing the 16
practice of physician assistants. 17

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

Section 1. That sections 1.64, 2133.211, 2305.113, 4503.44, 18
4729.01, 4730.01, 4730.02, 4730.03, 4730.04, 4730.06, 4730.08, 19
4730.091, 4730.10, 4730.101, 4730.11, 4730.12, 4730.13, 4730.14, 20

4730.16, 4730.21, 4730.25, 4730.251, 4730.27, 4730.28, 4730.31, 21
4730.32, 4730.33, 4730.38, 4730.39, 4730.41, 4730.42, 4730.43, 22
4730.49, 4730.51, 4730.53, 4765.01, 4765.51, and 5123.47 be 23
amended, and sections 4730.091 (4730.201) and 4730.092 (4730.202) 24
be amended for the purpose of adopting new section numbers as 25
indicated in parentheses, and new section 4730.20 of the Revised 26
Code be enacted to read as follows: 27

Sec. 1.64. As used in the Revised Code: 28

(A) "Certified nurse-midwife" means a registered nurse who 29
holds a valid certificate of authority issued under Chapter 4723. 30
of the Revised Code that authorizes the practice of nursing as a 31
certified nurse-midwife in accordance with section 4723.43 of the 32
Revised Code and rules adopted by the board of nursing. 33

(B) "Certified nurse practitioner" means a registered nurse 34
who holds a valid certificate of authority issued under Chapter 35
4723. of the Revised Code that authorizes the practice of nursing 36
as a certified nurse practitioner in accordance with section 37
4723.43 of the Revised Code and rules adopted by the board of 38
nursing. 39

(C) "Clinical nurse specialist" means a registered nurse who 40
holds a valid certificate of authority issued under Chapter 4723. 41
of the Revised Code that authorizes the practice of nursing as a 42
clinical nurse specialist in accordance with section 4723.43 of 43
the Revised Code and rules adopted by the board of nursing. 44

(D) "Physician assistant" means an individual who ~~holds a~~ 45
~~valid certificate to practice issued~~ is licensed under Chapter 46
4730. of the Revised Code ~~authorizing the individual~~ to provide 47
services as a physician assistant to patients under the 48
supervision, ~~control, and direction~~ of one or more physicians. 49

Sec. 2133.211. A ~~person who holds a certificate of authority~~ 50
~~to practice as a~~ certified nurse practitioner or clinical nurse 51
~~specialist issued under, as defined in~~ section ~~4723.42~~ 1.64 of the 52
Revised Code, may take any action that may be taken by an 53
attending physician under sections 2133.21 to 2133.26 of the 54
Revised Code and has the immunity provided by section 2133.22 of 55
the Revised Code if the action is taken pursuant to a standard 56
care arrangement with a collaborating physician. 57

A ~~person who holds a certificate to practice as a~~ 58
~~assistant issued under Chapter 4730., as defined in section 1.64~~ 59
of the Revised Code, may take any action that may be taken by an 60
attending physician under sections 2133.21 to 2133.26 of the 61
Revised Code and has the immunity provided by section 2133.22 of 62
the Revised Code if the action is taken pursuant to a ~~physician~~ 63
~~supervisory plan approved pursuant to~~ supervision agreement 64
entered into under section ~~4730.17~~ 4730.16 of the Revised Code or 65
the policies of a health care facility in which the physician 66
assistant is practicing. 67

Sec. 2305.113. (A) Except as otherwise provided in this 68
section, an action upon a medical, dental, optometric, or 69
chiropractic claim shall be commenced within one year after the 70
cause of action accrued. 71

(B)(1) If prior to the expiration of the one-year period 72
specified in division (A) of this section, a claimant who 73
allegedly possesses a medical, dental, optometric, or chiropractic 74
claim gives to the person who is the subject of that claim written 75
notice that the claimant is considering bringing an action upon 76
that claim, that action may be commenced against the person 77
notified at any time within one hundred eighty days after the 78
notice is so given. 79

(2) An insurance company shall not consider the existence or nonexistence of a written notice described in division (B)(1) of this section in setting the liability insurance premium rates that the company may charge the company's insured person who is notified by that written notice.

(C) Except as to persons within the age of minority or of unsound mind as provided by section 2305.16 of the Revised Code, and except as provided in division (D) of this section, both of the following apply:

(1) No action upon a medical, dental, optometric, or chiropractic claim shall be commenced more than four years after the occurrence of the act or omission constituting the alleged basis of the medical, dental, optometric, or chiropractic claim.

(2) If an action upon a medical, dental, optometric, or chiropractic claim is not commenced within four years after the occurrence of the act or omission constituting the alleged basis of the medical, dental, optometric, or chiropractic claim, then, any action upon that claim is barred.

(D)(1) If a person making a medical claim, dental claim, optometric claim, or chiropractic claim, in the exercise of reasonable care and diligence, could not have discovered the injury resulting from the act or omission constituting the alleged basis of the claim within three years after the occurrence of the act or omission, but, in the exercise of reasonable care and diligence, discovers the injury resulting from that act or omission before the expiration of the four-year period specified in division (C)(1) of this section, the person may commence an action upon the claim not later than one year after the person discovers the injury resulting from that act or omission.

(2) If the alleged basis of a medical claim, dental claim, optometric claim, or chiropractic claim is the occurrence of an

act or omission that involves a foreign object that is left in the 111
body of the person making the claim, the person may commence an 112
action upon the claim not later than one year after the person 113
discovered the foreign object or not later than one year after the 114
person, with reasonable care and diligence, should have discovered 115
the foreign object. 116

(3) A person who commences an action upon a medical claim, 117
dental claim, optometric claim, or chiropractic claim under the 118
circumstances described in division (D)(1) or (2) of this section 119
has the affirmative burden of proving, by clear and convincing 120
evidence, that the person, with reasonable care and diligence, 121
could not have discovered the injury resulting from the act or 122
omission constituting the alleged basis of the claim within the 123
three-year period described in division (D)(1) of this section or 124
within the one-year period described in division (D)(2) of this 125
section, whichever is applicable. 126

(E) As used in this section: 127

(1) "Hospital" includes any person, corporation, association, 128
board, or authority that is responsible for the operation of any 129
hospital licensed or registered in the state, including, but not 130
limited to, those that are owned or operated by the state, 131
political subdivisions, any person, any corporation, or any 132
combination of the state, political subdivisions, persons, and 133
corporations. "Hospital" also includes any person, corporation, 134
association, board, entity, or authority that is responsible for 135
the operation of any clinic that employs a full-time staff of 136
physicians practicing in more than one recognized medical 137
specialty and rendering advice, diagnosis, care, and treatment to 138
individuals. "Hospital" does not include any hospital operated by 139
the government of the United States or any of its branches. 140

(2) "Physician" means a person who is licensed to practice 141
medicine and surgery or osteopathic medicine and surgery by the 142

state medical board or a person who otherwise is authorized to 143
practice medicine and surgery or osteopathic medicine and surgery 144
in this state. 145

(3) "Medical claim" means any claim that is asserted in any 146
civil action against a physician, podiatrist, hospital, home, or 147
residential facility, against any employee or agent of a 148
physician, podiatrist, hospital, home, or residential facility, or 149
against a licensed practical nurse, registered nurse, advanced 150
practice registered nurse, physical therapist, physician 151
assistant, emergency medical technician-basic, emergency medical 152
technician-intermediate, or emergency medical 153
technician-paramedic, and that arises out of the medical 154
diagnosis, care, or treatment of any person. "Medical claim" 155
includes the following: 156

(a) Derivative claims for relief that arise from the medical 157
diagnosis, care, or treatment of a person; 158

(b) Claims that arise out of the medical diagnosis, care, or 159
treatment of any person and to which either of the following 160
applies: 161

(i) The claim results from acts or omissions in providing 162
medical care. 163

(ii) The claim results from the hiring, training, 164
supervision, retention, or termination of caregivers providing 165
medical diagnosis, care, or treatment. 166

(c) Claims that arise out of the medical diagnosis, care, or 167
treatment of any person and that are brought under section 3721.17 168
of the Revised Code. 169

(4) "Podiatrist" means any person who is licensed to practice 170
podiatric medicine and surgery by the state medical board. 171

(5) "Dentist" means any person who is licensed to practice 172

dentistry by the state dental board. 173

(6) "Dental claim" means any claim that is asserted in any 174
civil action against a dentist, or against any employee or agent 175
of a dentist, and that arises out of a dental operation or the 176
dental diagnosis, care, or treatment of any person. "Dental claim" 177
includes derivative claims for relief that arise from a dental 178
operation or the dental diagnosis, care, or treatment of a person. 179

(7) "Derivative claims for relief" include, but are not 180
limited to, claims of a parent, guardian, custodian, or spouse of 181
an individual who was the subject of any medical diagnosis, care, 182
or treatment, dental diagnosis, care, or treatment, dental 183
operation, optometric diagnosis, care, or treatment, or 184
chiropractic diagnosis, care, or treatment, that arise from that 185
diagnosis, care, treatment, or operation, and that seek the 186
recovery of damages for any of the following: 187

(a) Loss of society, consortium, companionship, care, 188
assistance, attention, protection, advice, guidance, counsel, 189
instruction, training, or education, or any other intangible loss 190
that was sustained by the parent, guardian, custodian, or spouse; 191

(b) Expenditures of the parent, guardian, custodian, or 192
spouse for medical, dental, optometric, or chiropractic care or 193
treatment, for rehabilitation services, or for other care, 194
treatment, services, products, or accommodations provided to the 195
individual who was the subject of the medical diagnosis, care, or 196
treatment, the dental diagnosis, care, or treatment, the dental 197
operation, the optometric diagnosis, care, or treatment, or the 198
chiropractic diagnosis, care, or treatment. 199

(8) "Registered nurse" means any person who is licensed to 200
practice nursing as a registered nurse by the board of nursing. 201

(9) "Chiropractic claim" means any claim that is asserted in 202
any civil action against a chiropractor, or against any employee 203

or agent of a chiropractor, and that arises out of the	204
chiropractic diagnosis, care, or treatment of any person.	205
"Chiropractic claim" includes derivative claims for relief that	206
arise from the chiropractic diagnosis, care, or treatment of a	207
person.	208
(10) "Chiropractor" means any person who is licensed to	209
practice chiropractic by the state chiropractic board.	210
(11) "Optometric claim" means any claim that is asserted in	211
any civil action against an optometrist, or against any employee	212
or agent of an optometrist, and that arises out of the optometric	213
diagnosis, care, or treatment of any person. "Optometric claim"	214
includes derivative claims for relief that arise from the	215
optometric diagnosis, care, or treatment of a person.	216
(12) "Optometrist" means any person licensed to practice	217
optometry by the state board of optometry.	218
(13) "Physical therapist" means any person who is licensed to	219
practice physical therapy under Chapter 4755. of the Revised Code.	220
(14) "Home" has the same meaning as in section 3721.10 of the	221
Revised Code.	222
(15) "Residential facility" means a facility licensed under	223
section 5123.19 of the Revised Code.	224
(16) "Advanced practice registered nurse" means any certified	225
nurse practitioner, clinical nurse specialist, certified	226
registered nurse anesthetist, or certified nurse-midwife who holds	227
a certificate of authority issued by the board of nursing under	228
Chapter 4723. of the Revised Code.	229
(17) "Licensed practical nurse" means any person who is	230
licensed to practice nursing as a licensed practical nurse by the	231
board of nursing pursuant to Chapter 4723. of the Revised Code.	232
(18) "Physician assistant" means any person who holds a valid	233

~~certificate to practice issued pursuant to Chapter 4730. has the~~ 234
~~same meaning as in section 1.64 of the Revised Code.~~ 235

(19) "Emergency medical technician-basic," "emergency medical 236
technician-intermediate," and "emergency medical 237
technician-paramedic" means any person who is certified under 238
Chapter 4765. of the Revised Code as an emergency medical 239
technician-basic, emergency medical technician-intermediate, or 240
emergency medical technician-paramedic, whichever is applicable. 241

Sec. 4503.44. (A) As used in this section and in section 242
4511.69 of the Revised Code: 243

(1) "Person with a disability that limits or impairs the 244
ability to walk" means any person who, as determined by a health 245
care provider, meets any of the following criteria: 246

(a) Cannot walk two hundred feet without stopping to rest; 247

(b) Cannot walk without the use of, or assistance from, a 248
brace, cane, crutch, another person, prosthetic device, 249
wheelchair, or other assistive device; 250

(c) Is restricted by a lung disease to such an extent that 251
the person's forced (respiratory) expiratory volume for one 252
second, when measured by spirometry, is less than one liter, or 253
the arterial oxygen tension is less than sixty millimeters of 254
mercury on room air at rest; 255

(d) Uses portable oxygen; 256

(e) Has a cardiac condition to the extent that the person's 257
functional limitations are classified in severity as class III or 258
class IV according to standards set by the American heart 259
association; 260

(f) Is severely limited in the ability to walk due to an 261
arthritic, neurological, or orthopedic condition; 262

(g) Is blind.	263
(2) "Organization" means any private organization or corporation, or any governmental board, agency, department, division, or office, that, as part of its business or program, transports persons with disabilities that limit or impair the ability to walk on a regular basis in a motor vehicle that has not been altered for the purpose of providing it with special equipment for use by persons with disabilities. This definition does not apply to division (J) of this section.	264 265 266 267 268 269 270 271
(3) "Health care provider" means a physician, physician assistant, advanced practice registered nurse, or chiropractor as defined in this section.	272 273 274
(4) "Physician" means a person licensed to practice medicine or surgery or osteopathic medicine and surgery under Chapter 4731. of the Revised Code.	275 276 277
(5) "Chiropractor" means a person licensed to practice chiropractic under Chapter 4734. of the Revised Code.	278 279
(6) "Advanced practice registered nurse" means a certified nurse practitioner, clinical nurse specialist, certified registered nurse anesthetist, or certified nurse-midwife who holds a certificate of authority issued by the board of nursing under Chapter 4723. of the Revised Code.	280 281 282 283 284
(7) "Physician assistant" means a person who holds a certificate to practice as a physician assistant issued under Chapter 4730. <u>has the same meaning as in section 1.64</u> of the Revised Code.	285 286 287 288
(B) Any organization or person with a disability that limits or impairs the ability to walk may apply to the registrar of motor vehicles for a removable windshield placard or, if the person owns or leases a motor vehicle, the person may apply for the registration of any motor vehicle the person owns or leases. In	289 290 291 292 293

addition to one or more sets of license plates or one placard, a 294
person with a disability that limits or impairs the ability to 295
walk is entitled to one additional placard, but only if the person 296
applies separately for the additional placard, states the reasons 297
why the additional placard is needed, and the registrar, in the 298
registrar's discretion, determines that good and justifiable cause 299
exists to approve the request for the additional placard. When a 300
motor vehicle has been altered for the purpose of providing it 301
with special equipment for a person with a disability that limits 302
or impairs the ability to walk, but is owned or leased by someone 303
other than such a person, the owner or lessee may apply to the 304
registrar or a deputy registrar for registration under this 305
section. The application for registration of a motor vehicle owned 306
or leased by a person with a disability that limits or impairs the 307
ability to walk shall be accompanied by a signed statement from 308
the applicant's health care provider certifying that the applicant 309
meets at least one of the criteria contained in division (A)(1) of 310
this section and that the disability is expected to continue for 311
more than six consecutive months. The application for a removable 312
windshield placard made by a person with a disability that limits 313
or impairs the ability to walk shall be accompanied by a 314
prescription from the applicant's health care provider prescribing 315
such a placard for the applicant, provided that the applicant 316
meets at least one of the criteria contained in division (A)(1) of 317
this section. The health care provider shall state on the 318
prescription the length of time the health care provider expects 319
the applicant to have the disability that limits or impairs the 320
applicant's ability to walk. The application for a removable 321
windshield placard made by an organization shall be accompanied by 322
such documentary evidence of regular transport of persons with 323
disabilities that limit or impair the ability to walk by the 324
organization as the registrar may require by rule and shall be 325
completed in accordance with procedures that the registrar may 326

require by rule. The application for registration of a motor 327
vehicle that has been altered for the purpose of providing it with 328
special equipment for a person with a disability that limits or 329
impairs the ability to walk but is owned by someone other than 330
such a person shall be accompanied by such documentary evidence of 331
vehicle alterations as the registrar may require by rule. 332

(C) When an organization, a person with a disability that 333
limits or impairs the ability to walk, or a person who does not 334
have a disability that limits or impairs the ability to walk but 335
owns a motor vehicle that has been altered for the purpose of 336
providing it with special equipment for a person with a disability 337
that limits or impairs the ability to walk first submits an 338
application for registration of a motor vehicle under this section 339
and every fifth year thereafter, the organization or person shall 340
submit a signed statement from the applicant's health care 341
provider, a completed application, and any required documentary 342
evidence of vehicle alterations as provided in division (B) of 343
this section, and also a power of attorney from the owner of the 344
motor vehicle if the applicant leases the vehicle. Upon submission 345
of these items, the registrar or deputy registrar shall issue to 346
the applicant appropriate vehicle registration and a set of 347
license plates and validation stickers, or validation stickers 348
alone when required by section 4503.191 of the Revised Code. In 349
addition to the letters and numbers ordinarily inscribed thereon, 350
the license plates shall be imprinted with the international 351
symbol of access. The license plates and validation stickers shall 352
be issued upon payment of the regular license fee as prescribed 353
under section 4503.04 of the Revised Code and any motor vehicle 354
tax levied under Chapter 4504. of the Revised Code, and the 355
payment of a service fee equal to the amount specified in division 356
(D) or (G) of section 4503.10 of the Revised Code. 357

(D)(1) Upon receipt of a completed and signed application for 358

a removable windshield placard, a prescription as described in 359
division (B) of this section, documentary evidence of regular 360
transport of persons with disabilities that limit or impair the 361
ability to walk, if required, and payment of a service fee equal 362
to the amount specified in division (D) or (G) of section 4503.10 363
of the Revised Code, the registrar or deputy registrar shall issue 364
to the applicant a removable windshield placard, which shall bear 365
the date of expiration on both sides of the placard and shall be 366
valid until expired, revoked, or surrendered. Every removable 367
windshield placard expires as described in division (D)(2) of this 368
section, but in no case shall a removable windshield placard be 369
valid for a period of less than sixty days. Removable windshield 370
placards shall be renewable upon application as provided in 371
division (B) of this section, and a service fee equal to the 372
amount specified in division (D) or (G) of section 4503.10 of the 373
Revised Code shall be charged for the renewal of a removable 374
windshield placard. The registrar shall provide the application 375
form and shall determine the information to be included thereon. 376
The registrar also shall determine the form and size of the 377
removable windshield placard, the material of which it is to be 378
made, and any other information to be included thereon, and shall 379
adopt rules relating to the issuance, expiration, revocation, 380
surrender, and proper display of such placards. Any placard issued 381
after October 14, 1999, shall be manufactured in a manner that 382
allows the expiration date of the placard to be indicated on it 383
through the punching, drilling, boring, or creation by any other 384
means of holes in the placard. 385

(2) At the time a removable windshield placard is issued to a 386
person with a disability that limits or impairs the ability to 387
walk, the registrar or deputy registrar shall enter into the 388
records of the bureau of motor vehicles the last date on which the 389
person will have that disability, as indicated on the accompanying 390
prescription. Not less than thirty days prior to that date and all 391

removable windshield placard renewal dates, the bureau shall send 392
a renewal notice to that person at the person's last known address 393
as shown in the records of the bureau, informing the person that 394
the person's removable windshield placard will expire on the 395
indicated date not to exceed five years from the date of issuance, 396
and that the person is required to renew the placard by submitting 397
to the registrar or a deputy registrar another prescription, as 398
described in division (B) of this section, and by complying with 399
the renewal provisions prescribed in division (D)(1) of this 400
section. If such a prescription is not received by the registrar 401
or a deputy registrar by that date, the placard issued to that 402
person expires and no longer is valid, and this fact shall be 403
recorded in the records of the bureau. 404

(3) At least once every year, on a date determined by the 405
registrar, the bureau shall examine the records of the office of 406
vital statistics, located within the department of health, that 407
pertain to deceased persons, and also the bureau's records of all 408
persons who have been issued removable windshield placards and 409
temporary removable windshield placards. If the records of the 410
office of vital statistics indicate that a person to whom a 411
removable windshield placard or temporary removable windshield 412
placard has been issued is deceased, the bureau shall cancel that 413
placard, and note the cancellation in its records. 414

The office of vital statistics shall make available to the 415
bureau all information necessary to enable the bureau to comply 416
with division (D)(3) of this section. 417

(4) Nothing in this section shall be construed to require a 418
person or organization to apply for a removable windshield placard 419
or special license plates if the parking card or special license 420
plates issued to the person or organization under prior law have 421
not expired or been surrendered or revoked. 422

(E)(1)(a) Any person with a disability that limits or impairs 423

the ability to walk may apply to the registrar or a deputy 424
registrar for a temporary removable windshield placard. The 425
application for a temporary removable windshield placard shall be 426
accompanied by a prescription from the applicant's health care 427
provider prescribing such a placard for the applicant, provided 428
that the applicant meets at least one of the criteria contained in 429
division (A)(1) of this section and that the disability is 430
expected to continue for six consecutive months or less. The 431
health care provider shall state on the prescription the length of 432
time the health care provider expects the applicant to have the 433
disability that limits or impairs the applicant's ability to walk, 434
which cannot exceed six months from the date of the prescription. 435
Upon receipt of an application for a temporary removable 436
windshield placard, presentation of the prescription from the 437
applicant's health care provider, and payment of a service fee 438
equal to the amount specified in division (D) or (G) of section 439
4503.10 of the Revised Code, the registrar or deputy registrar 440
shall issue to the applicant a temporary removable windshield 441
placard. 442

(b) Any active-duty member of the armed forces of the United 443
States, including the reserve components of the armed forces and 444
the national guard, who has an illness or injury that limits or 445
impairs the ability to walk may apply to the registrar or a deputy 446
registrar for a temporary removable windshield placard. With the 447
application, the person shall present evidence of the person's 448
active-duty status and the illness or injury. Evidence of the 449
illness or injury may include a current department of defense 450
convalescent leave statement, any department of defense document 451
indicating that the person currently has an ill or injured 452
casualty status or has limited duties, or a prescription from any 453
health care provider prescribing the placard for the applicant. 454
Upon receipt of the application and the necessary evidence, the 455
registrar or deputy registrar shall issue the applicant the 456

temporary removable windshield placard without the payment of any 457
service fee. 458

(2) The temporary removable windshield placard shall be of 459
the same size and form as the removable windshield placard, shall 460
be printed in white on a red-colored background, and shall bear 461
the word "temporary" in letters of such size as the registrar 462
shall prescribe. A temporary removable windshield placard also 463
shall bear the date of expiration on the front and back of the 464
placard, and shall be valid until expired, surrendered, or 465
revoked, but in no case shall such a placard be valid for a period 466
of less than sixty days. The registrar shall provide the 467
application form and shall determine the information to be 468
included on it, provided that the registrar shall not require a 469
health care provider's prescription or certification for a person 470
applying under division (E)(1)(b) of this section. The registrar 471
also shall determine the material of which the temporary removable 472
windshield placard is to be made and any other information to be 473
included on the placard and shall adopt rules relating to the 474
issuance, expiration, surrender, revocation, and proper display of 475
those placards. Any temporary removable windshield placard issued 476
after October 14, 1999, shall be manufactured in a manner that 477
allows for the expiration date of the placard to be indicated on 478
it through the punching, drilling, boring, or creation by any 479
other means of holes in the placard. 480

(F) If an applicant for a removable windshield placard is a 481
veteran of the armed forces of the United States whose disability, 482
as defined in division (A)(1) of this section, is 483
service-connected, the registrar or deputy registrar, upon receipt 484
of the application, presentation of a signed statement from the 485
applicant's health care provider certifying the applicant's 486
disability, and presentation of such documentary evidence from the 487
department of veterans affairs that the disability of the 488

applicant meets at least one of the criteria identified in 489
division (A)(1) of this section and is service-connected as the 490
registrar may require by rule, but without the payment of any 491
service fee, shall issue the applicant a removable windshield 492
placard that is valid until expired, surrendered, or revoked. 493

(G) Upon a conviction of a violation of division (I), (J), or 494
(K) of this section, the court shall report the conviction, and 495
send the placard or parking card, if available, to the registrar, 496
who thereupon shall revoke the privilege of using the placard or 497
parking card and send notice in writing to the placardholder or 498
cardholder at that holder's last known address as shown in the 499
records of the bureau, and the placardholder or cardholder shall 500
return the placard or card if not previously surrendered to the 501
court, to the registrar within ten days following mailing of the 502
notice. 503

Whenever a person to whom a removable windshield placard or 504
parking card has been issued moves to another state, the person 505
shall surrender the placard or card to the registrar; and whenever 506
an organization to which a placard or card has been issued changes 507
its place of operation to another state, the organization shall 508
surrender the placard or card to the registrar. 509

(H) Subject to division (F) of section 4511.69 of the Revised 510
Code, the operator of a motor vehicle displaying a removable 511
windshield placard, temporary removable windshield placard, 512
parking card, or the special license plates authorized by this 513
section is entitled to park the motor vehicle in any special 514
parking location reserved for persons with disabilities that limit 515
or impair the ability to walk, also known as handicapped parking 516
spaces or disability parking spaces. 517

(I) No person or organization that is not eligible under 518
division (B) or (E) of this section shall willfully and falsely 519
represent that the person or organization is so eligible. 520

No person or organization shall display license plates issued 521
under this section unless the license plates have been issued for 522
the vehicle on which they are displayed and are valid. 523

(J) No person or organization to which a removable windshield 524
placard or temporary removable windshield placard is issued shall 525
do either of the following: 526

(1) Display or permit the display of the placard on any motor 527
vehicle when having reasonable cause to believe the motor vehicle 528
is being used in connection with an activity that does not include 529
providing transportation for persons with disabilities that limit 530
or impair the ability to walk; 531

(2) Refuse to return or surrender the placard, when required. 532

(K)(1) No person or organization to which a parking card is 533
issued shall do either of the following: 534

(a) Display or permit the display of the parking card on any 535
motor vehicle when having reasonable cause to believe the motor 536
vehicle is being used in connection with an activity that does not 537
include providing transportation for a person with a disability; 538

(b) Refuse to return or surrender the parking card, when 539
required. 540

(2) As used in division (K) of this section: 541

(a) "Person with a disability" means any person who has lost 542
the use of one or both legs or one or both arms, who is blind, 543
deaf, or so severely disabled as to be unable to move about 544
without the aid of crutches or a wheelchair, or whose mobility is 545
restricted by a permanent cardiovascular, pulmonary, or other 546
disabling condition. 547

(b) "Organization" means any private organization or 548
corporation, or any governmental board, agency, department, 549
division, or office, that, as part of its business or program, 550

transports persons with disabilities on a regular basis in a motor 551
vehicle that has not been altered for the purposes of providing it 552
with special equipment for use by persons with disabilities. 553

(L) If a removable windshield placard, temporary removable 554
windshield placard, or parking card is lost, destroyed, or 555
mutilated, the placardholder or cardholder may obtain a duplicate 556
by doing both of the following: 557

(1) Furnishing suitable proof of the loss, destruction, or 558
mutilation to the registrar; 559

(2) Paying a service fee equal to the amount specified in 560
division (D) or (G) of section 4503.10 of the Revised Code. 561

Any placardholder or cardholder who loses a placard or card 562
and, after obtaining a duplicate, finds the original, immediately 563
shall surrender the original placard or card to the registrar. 564

(M) The registrar shall pay all fees received under this 565
section for the issuance of removable windshield placards or 566
temporary removable windshield placards or duplicate removable 567
windshield placards or cards into the state treasury to the credit 568
of the state bureau of motor vehicles fund created in section 569
4501.25 of the Revised Code. 570

(N) In addition to the fees collected under this section, the 571
registrar or deputy registrar shall ask each person applying for a 572
removable windshield placard or temporary removable windshield 573
placard or duplicate removable windshield placard or license plate 574
issued under this section, whether the person wishes to make a 575
two-dollar voluntary contribution to support rehabilitation 576
employment services. The registrar shall transmit the 577
contributions received under this division to the treasurer of 578
state for deposit into the rehabilitation employment fund, which 579
is hereby created in the state treasury. A deputy registrar shall 580
transmit the contributions received under this division to the 581

registrar in the time and manner prescribed by the registrar. The 582
contributions in the fund shall be used by the opportunities for 583
Ohioans with disabilities agency to purchase services related to 584
vocational evaluation, work adjustment, personal adjustment, job 585
placement, job coaching, and community-based assessment from 586
accredited community rehabilitation program facilities. 587

(O) For purposes of enforcing this section, every peace 588
officer is deemed to be an agent of the registrar. Any peace 589
officer or any authorized employee of the bureau of motor vehicles 590
who, in the performance of duties authorized by law, becomes aware 591
of a person whose placard or parking card has been revoked 592
pursuant to this section, may confiscate that placard or parking 593
card and return it to the registrar. The registrar shall prescribe 594
any forms used by law enforcement agencies in administering this 595
section. 596

No peace officer, law enforcement agency employing a peace 597
officer, or political subdivision or governmental agency employing 598
a peace officer, and no employee of the bureau is liable in a 599
civil action for damages or loss to persons arising out of the 600
performance of any duty required or authorized by this section. As 601
used in this division, "peace officer" has the same meaning as in 602
division (B) of section 2935.01 of the Revised Code. 603

(P) All applications for registration of motor vehicles, 604
removable windshield placards, and temporary removable windshield 605
placards issued under this section, all renewal notices for such 606
items, and all other publications issued by the bureau that relate 607
to this section shall set forth the criminal penalties that may be 608
imposed upon a person who violates any provision relating to 609
special license plates issued under this section, the parking of 610
vehicles displaying such license plates, and the issuance, 611
procurement, use, and display of removable windshield placards and 612
temporary removable windshield placards issued under this section. 613

(Q) Whoever violates this section is guilty of a misdemeanor 614
of the fourth degree. 615

Sec. 4729.01. As used in this chapter: 616

(A) "Pharmacy," except when used in a context that refers to 617
the practice of pharmacy, means any area, room, rooms, place of 618
business, department, or portion of any of the foregoing where the 619
practice of pharmacy is conducted. 620

(B) "Practice of pharmacy" means providing pharmacist care 621
requiring specialized knowledge, judgment, and skill derived from 622
the principles of biological, chemical, behavioral, social, 623
pharmaceutical, and clinical sciences. As used in this division, 624
"pharmacist care" includes the following: 625

(1) Interpreting prescriptions; 626

(2) Dispensing drugs and drug therapy related devices; 627

(3) Compounding drugs; 628

(4) Counseling individuals with regard to their drug therapy, 629
recommending drug therapy related devices, and assisting in the 630
selection of drugs and appliances for treatment of common diseases 631
and injuries and providing instruction in the proper use of the 632
drugs and appliances; 633

(5) Performing drug regimen reviews with individuals by 634
discussing all of the drugs that the individual is taking and 635
explaining the interactions of the drugs; 636

(6) Performing drug utilization reviews with licensed health 637
professionals authorized to prescribe drugs when the pharmacist 638
determines that an individual with a prescription has a drug 639
regimen that warrants additional discussion with the prescriber; 640

(7) Advising an individual and the health care professionals 641
treating an individual with regard to the individual's drug 642

therapy; 643

(8) Acting pursuant to a consult agreement with a physician 644
authorized under Chapter 4731. of the Revised Code to practice 645
medicine and surgery or osteopathic medicine and surgery, if an 646
agreement has been established with the physician; 647

(9) Engaging in the administration of immunizations to the 648
extent authorized by section 4729.41 of the Revised Code. 649

(C) "Compounding" means the preparation, mixing, assembling, 650
packaging, and labeling of one or more drugs in any of the 651
following circumstances: 652

(1) Pursuant to a prescription issued by a licensed health 653
professional authorized to prescribe drugs; 654

(2) Pursuant to the modification of a prescription made in 655
accordance with a consult agreement; 656

(3) As an incident to research, teaching activities, or 657
chemical analysis; 658

(4) In anticipation of orders for drugs pursuant to 659
prescriptions, based on routine, regularly observed dispensing 660
patterns; 661

(5) Pursuant to a request made by a licensed health 662
professional authorized to prescribe drugs for a drug that is to 663
be used by the professional for the purpose of direct 664
administration to patients in the course of the professional's 665
practice, if all of the following apply: 666

(a) At the time the request is made, the drug is not 667
commercially available regardless of the reason that the drug is 668
not available, including the absence of a manufacturer for the 669
drug or the lack of a readily available supply of the drug from a 670
manufacturer. 671

(b) A limited quantity of the drug is compounded and provided 672

to the professional. 673

(c) The drug is compounded and provided to the professional 674
as an occasional exception to the normal practice of dispensing 675
drugs pursuant to patient-specific prescriptions. 676

(D) "Consult agreement" means an agreement to manage an 677
individual's drug therapy that has been entered into by a 678
pharmacist and a physician authorized under Chapter 4731. of the 679
Revised Code to practice medicine and surgery or osteopathic 680
medicine and surgery. 681

(E) "Drug" means: 682

(1) Any article recognized in the United States pharmacopoeia 683
and national formulary, or any supplement to them, intended for 684
use in the diagnosis, cure, mitigation, treatment, or prevention 685
of disease in humans or animals; 686

(2) Any other article intended for use in the diagnosis, 687
cure, mitigation, treatment, or prevention of disease in humans or 688
animals; 689

(3) Any article, other than food, intended to affect the 690
structure or any function of the body of humans or animals; 691

(4) Any article intended for use as a component of any 692
article specified in division (E)(1), (2), or (3) of this section; 693
but does not include devices or their components, parts, or 694
accessories. 695

(F) "Dangerous drug" means any of the following: 696

(1) Any drug to which either of the following applies: 697

(a) Under the "Federal Food, Drug, and Cosmetic Act," 52 698
Stat. 1040 (1938), 21 U.S.C.A. 301, as amended, the drug is 699
required to bear a label containing the legend "Caution: Federal 700
law prohibits dispensing without prescription" or "Caution: 701
Federal law restricts this drug to use by or on the order of a 702

licensed veterinarian" or any similar restrictive statement, or 703
the drug may be dispensed only upon a prescription; 704

(b) Under Chapter 3715. or 3719. of the Revised Code, the 705
drug may be dispensed only upon a prescription. 706

(2) Any drug that contains a schedule V controlled substance 707
and that is exempt from Chapter 3719. of the Revised Code or to 708
which that chapter does not apply; 709

(3) Any drug intended for administration by injection into 710
the human body other than through a natural orifice of the human 711
body. 712

(G) "Federal drug abuse control laws" has the same meaning as 713
in section 3719.01 of the Revised Code. 714

(H) "Prescription" means a written, electronic, or oral order 715
for drugs or combinations or mixtures of drugs to be used by a 716
particular individual or for treating a particular animal, issued 717
by a licensed health professional authorized to prescribe drugs. 718

(I) "Licensed health professional authorized to prescribe 719
drugs" or "prescriber" means an individual who is authorized by 720
law to prescribe drugs or dangerous drugs or drug therapy related 721
devices in the course of the individual's professional practice, 722
including only the following: 723

(1) A dentist licensed under Chapter 4715. of the Revised 724
Code; 725

(2) A clinical nurse specialist, certified nurse-midwife, or 726
certified nurse practitioner who holds a certificate to prescribe 727
issued under section 4723.48 of the Revised Code; 728

(3) An optometrist licensed under Chapter 4725. of the 729
Revised Code to practice optometry under a therapeutic 730
pharmaceutical agents certificate; 731

(4) A physician authorized under Chapter 4731. of the Revised 732

Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery;	733
	734
(5) A physician assistant who holds a certificate to <u>prescribe valid prescriber number</u> issued under Chapter 4730. of <u>the Revised Code by the state medical board;</u>	735
	736
	737
(6) A veterinarian licensed under Chapter 4741. of the Revised Code.	738
	739
(J) "Sale" and "sell" include delivery, transfer, barter, exchange, or gift, or offer therefor, and each such transaction made by any person, whether as principal proprietor, agent, or employee.	740
	741
	742
	743
(K) "Wholesale sale" and "sale at wholesale" mean any sale in which the purpose of the purchaser is to resell the article purchased or received by the purchaser.	744
	745
	746
(L) "Retail sale" and "sale at retail" mean any sale other than a wholesale sale or sale at wholesale.	747
	748
(M) "Retail seller" means any person that sells any dangerous drug to consumers without assuming control over and responsibility for its administration. Mere advice or instructions regarding administration do not constitute control or establish responsibility.	749
	750
	751
	752
	753
(N) "Price information" means the price charged for a prescription for a particular drug product and, in an easily understandable manner, all of the following:	754
	755
	756
(1) The proprietary name of the drug product;	757
(2) The established (generic) name of the drug product;	758
(3) The strength of the drug product if the product contains a single active ingredient or if the drug product contains more than one active ingredient and a relevant strength can be associated with the product without indicating each active	759
	760
	761
	762

ingredient. The established name and quantity of each active 763
ingredient are required if such a relevant strength cannot be so 764
associated with a drug product containing more than one 765
ingredient. 766

(4) The dosage form; 767

(5) The price charged for a specific quantity of the drug 768
product. The stated price shall include all charges to the 769
consumer, including, but not limited to, the cost of the drug 770
product, professional fees, handling fees, if any, and a statement 771
identifying professional services routinely furnished by the 772
pharmacy. Any mailing fees and delivery fees may be stated 773
separately without repetition. The information shall not be false 774
or misleading. 775

(O) "Wholesale distributor of dangerous drugs" means a person 776
engaged in the sale of dangerous drugs at wholesale and includes 777
any agent or employee of such a person authorized by the person to 778
engage in the sale of dangerous drugs at wholesale. 779

(P) "Manufacturer of dangerous drugs" means a person, other 780
than a pharmacist, who manufactures dangerous drugs and who is 781
engaged in the sale of those dangerous drugs within this state. 782

(Q) "Terminal distributor of dangerous drugs" means a person 783
who is engaged in the sale of dangerous drugs at retail, or any 784
person, other than a wholesale distributor or a pharmacist, who 785
has possession, custody, or control of dangerous drugs for any 786
purpose other than for that person's own use and consumption, and 787
includes pharmacies, hospitals, nursing homes, and laboratories 788
and all other persons who procure dangerous drugs for sale or 789
other distribution by or under the supervision of a pharmacist or 790
licensed health professional authorized to prescribe drugs. 791

(R) "Promote to the public" means disseminating a 792
representation to the public in any manner or by any means, other 793

than by labeling, for the purpose of inducing, or that is likely 794
to induce, directly or indirectly, the purchase of a dangerous 795
drug at retail. 796

(S) "Person" includes any individual, partnership, 797
association, limited liability company, or corporation, the state, 798
any political subdivision of the state, and any district, 799
department, or agency of the state or its political subdivisions. 800

(T) "Finished dosage form" has the same meaning as in section 801
3715.01 of the Revised Code. 802

(U) "Generically equivalent drug" has the same meaning as in 803
section 3715.01 of the Revised Code. 804

(V) "Animal shelter" means a facility operated by a humane 805
society or any society organized under Chapter 1717. of the 806
Revised Code or a dog pound operated pursuant to Chapter 955. of 807
the Revised Code. 808

(W) "Food" has the same meaning as in section 3715.01 of the 809
Revised Code. 810

(X) "Pain management clinic" has the same meaning as in 811
section 4731.054 of the Revised Code. 812

Sec. 4730.01. As used in this chapter: 813

(A) ~~"Physician assistant" means a skilled person qualified by 814
academic and clinical training to provide services to patients as 815
a physician assistant under the supervision, control, and 816
direction of one or more physicians who are responsible for the 817
physician assistant's performance~~ "Critical care unit" means a 818
hospital unit, other than an emergency department, that is devoted 819
to providing "critical care services," as defined by the American 820
medical association in its current procedural terminology code set 821
or a successor document. 822

(B) "Physician" means an individual who is authorized under 823

Chapter 4731. of the Revised Code to practice medicine and 824
surgery, osteopathic medicine and surgery, or podiatric medicine 825
and surgery. 826

(C) "Health care facility" means any of the following: 827

(1) A hospital registered with the department of health under 828
section 3701.07 of the Revised Code; 829

(2) A health care facility licensed by the department of 830
health under section 3702.30 of the Revised Code; 831

(3) Any other facility designated by the state medical board 832
in rules adopted pursuant to division (B)(2) of section 4730.08 of 833
the Revised Code. 834

(D) ~~"Special services" means the health care services that a 835
physician assistant may be authorized to provide under the special 836
services portion of a physician supervisory plan approved under 837
section 4730.17 of the Revised Code~~ "Service" means a medical 838
activity that requires training in the diagnosis, treatment, or 839
prevention of disease. 840

Sec. 4730.02. (A) No person shall hold that person out as 841
being able to function as a physician assistant, or use any words 842
or letters indicating or implying that the person is a physician 843
assistant, without a current, valid ~~certificate~~ license to 844
practice as a physician assistant issued pursuant to this chapter. 845

(B) No person shall practice as a physician assistant without 846
the supervision, ~~control, and direction~~ of a physician. 847

(C) ~~No person shall act as the supervising physician of a 848
physician assistant without having received the state medical 849
board's approval of a supervision agreement entered into with the 850
physician assistant.~~ 851

~~(D)~~ No person shall practice as a physician assistant without 852
having entered into a supervision agreement ~~that has been approved~~ 853

~~by the state medical board with a supervising physician under~~ 854
~~section 4730.16 of the Revised Code.~~ 855

~~(E)~~(D) No person acting as the supervising physician of a 856
physician assistant shall authorize the physician assistant to 857
perform services if either of the following is the case: 858

(1) The services are not within the physician's normal course 859
of practice and expertise; 860

(2) The services are inconsistent with the ~~physician~~ 861
~~supervisory plan approved by the state medical board for the~~ 862
~~supervising physician supervision agreement entered into under~~ 863
~~section 4730.16 of the Revised Code~~ or the policies of the health 864
care facility in which the physician and physician assistant are 865
practicing. 866

~~(F)~~(E) No person shall practice as a physician assistant in a 867
manner that is inconsistent with the ~~physician supervisory plan~~ 868
~~approved for the physician who is responsible for supervising the~~ 869
~~physician assistant supervision agreement entered into under~~ 870
~~section 4730.16 of the Revised Code~~ or the policies of the health 871
care facility in which the physician assistant is practicing. 872

~~(G)~~(F) No person practicing as a physician assistant shall 873
prescribe any drug or device to perform or induce an abortion, or 874
otherwise perform or induce an abortion. 875

~~(H)~~(G) No person shall advertise to provide services as a 876
physician assistant, except for the purpose of seeking employment. 877

~~(I)~~(H) No person practicing as a physician assistant shall 878
fail to wear at all times when on duty a placard, plate, or other 879
device identifying that person as a "physician assistant." 880

Sec. 4730.03. Nothing in this chapter shall: 881

(A) Be construed to affect or interfere with the performance 882
of duties of any medical personnel who are either of the 883

following: 884

(1) In active service in the army, navy, coast guard, marine 885
corps, air force, public health service, or marine hospital 886
service of the United States while so serving; 887

(2) Employed by the veterans administration of the United 888
States while so employed; 889

(B) Prevent any person from performing any of the services a 890
physician assistant may be authorized to perform, if the person's 891
professional scope of practice established under any other chapter 892
of the Revised Code authorizes the person to perform the services; 893

(C) Prohibit a physician from delegating responsibilities to 894
any nurse or other qualified person who does not hold a 895
~~certificate~~ license to practice as a physician assistant, provided 896
that the individual does not hold the individual out to be a 897
physician assistant; 898

~~(D) Be construed as authorizing a physician assistant 899
independently to order or direct the execution of procedures or 900
techniques by a registered nurse or licensed practical nurse in 901
the care and treatment of a person in any setting, except to the 902
extent that the physician assistant is authorized to do so by the 903
physician supervisory plan approved under section 4730.17 of the 904
Revised Code for the physician who is responsible for supervising 905
the physician assistant or the policies of the health care 906
facility in which the physician assistant is practicing; 907~~

~~(E)~~ Authorize a physician assistant to engage in the practice 908
of optometry, except to the extent that the physician assistant is 909
authorized by a supervising physician acting in accordance with 910
this chapter to perform routine visual screening, provide medical 911
care prior to or following eye surgery, or assist in the care of 912
diseases of the eye; 913

~~(F)~~(E) Be construed as authorizing a physician assistant to 914

prescribe any drug or device to perform or induce an abortion, or 915
as otherwise authorizing a physician assistant to perform or 916
induce an abortion. 917

Sec. 4730.04. (A) As used in this section: 918

(1) "Disaster" means any imminent threat or actual occurrence 919
of widespread or severe damage to or loss of property, personal 920
hardship or injury, or loss of life that results from any natural 921
phenomenon or act of a human. 922

(2) "Emergency" means an occurrence or event that poses an 923
imminent threat to the health or life of a human. 924

(B) Nothing in this chapter prohibits any of the following 925
individuals from providing medical care, to the extent the 926
individual is able, in response to a need for medical care 927
precipitated by a disaster or emergency: 928

(1) An individual who holds a ~~certificate~~ license to practice 929
as a physician assistant issued under this chapter; 930

(2) An individual licensed or authorized to practice as a 931
physician assistant in another state; 932

(3) An individual credentialed or employed as a physician 933
assistant by an agency, office, or other instrumentality of the 934
federal government. 935

(C) For purposes of the medical care provided by a physician 936
assistant pursuant to division (B)(1) of this section, both of the 937
following apply notwithstanding any supervision requirement of 938
this chapter to the contrary: 939

(1) The physician who supervises the physician assistant 940
pursuant to a ~~physician supervisory plan approved by the state~~ 941
~~medical board under section 4730.17 of the Revised Code~~ 942
supervision agreement entered into under section 4730.16 of the 943
Revised Code is not required to meet the supervision requirements 944

established under this chapter. 945

(2) The physician designated as the medical director of the 946
disaster or emergency may supervise the medical care provided by 947
the physician assistant. 948

Sec. 4730.06. (A) The physician assistant policy committee of 949
the state medical board shall review, and shall submit to the 950
board recommendations concerning, all of the following: 951

(1) Requirements for ~~issuance of certificates~~ issuing a 952
license to practice as a physician assistant, including the 953
educational requirements that must be met to receive a ~~certificate~~ 954
license to practice; 955

(2) Existing and proposed rules pertaining to the practice of 956
physician assistants, the supervisory relationship between 957
physician assistants and supervising physicians, and the 958
administration and enforcement of this chapter; 959

(3) In accordance with section 4730.38 of the Revised Code, 960
physician-delegated prescriptive authority for physician 961
assistants and proposed changes to the physician assistant 962
formulary the board adopts pursuant to division (A)(1) of section 963
4730.39 of the Revised Code; 964

(4) Application procedures and forms for ~~certificates a~~ 965
license to practice as a physician assistant, ~~physician~~ 966
~~supervisory plans, and supervision agreements;~~ 967

(5) Fees required by this chapter for issuance and renewal of 968
~~certificates a~~ license to practice as a physician assistant; 969

(6) ~~Criteria to be included in applications submitted to the~~ 970
~~board for approval of physician supervisory plans, including~~ 971
~~criteria to be included in applications for approval to delegate~~ 972
~~to physician assistants the performance of special services;~~ 973

~~(7) Criteria to be included in supervision agreements~~ 974

~~submitted to the board for approval and renewal of the board's approval;~~ 975
976

~~(8) Any issue the board asks the committee to consider.~~ 977

(B) In addition to the matters that are required to be 978
reviewed under division (A) of this section, the committee may 979
review, and may submit to the board recommendations concerning~~7~~ 980
~~either or both of the following:~~ 981

~~(1) Quality quality assurance activities to be performed by a~~ 982
supervising physician and physician assistant under a quality 983
assurance system established pursuant to division (F) of section 984
4730.21 of the Revised Code~~7~~ 985

~~(2) The development and approval of one or more model~~ 986
~~physician supervisory plans and one or more models for a special~~ 987
~~services portion of the one or more model physician supervisory~~ 988
~~plans. The committee may submit recommendations for model plans~~ 989
~~that reflect various medical specialties.~~ 990

(C) The board shall take into consideration all 991
recommendations submitted by the committee. Not later than ninety 992
days after receiving a recommendation from the committee, the 993
board shall approve or disapprove the recommendation and notify 994
the committee of its decision. If a recommendation is disapproved, 995
the board shall inform the committee of its reasons for making 996
that decision. The committee may resubmit the recommendation after 997
addressing the concerns expressed by the board and modifying the 998
disapproved recommendation accordingly. Not later than ninety days 999
after receiving a resubmitted recommendation, the board shall 1000
approve or disapprove the recommendation. There is no limit on the 1001
number of times the committee may resubmit a recommendation for 1002
consideration by the board. 1003

(D)(1) Except as provided in division (D)(2) of this section, 1004
the board may not take action regarding a matter that is subject 1005

to the committee's review under division (A) or (B) of this 1006
section unless the committee has made a recommendation to the 1007
board concerning the matter. 1008

(2) If the board submits to the committee a request for a 1009
recommendation regarding a matter that is subject to the 1010
committee's review under division (A) or (B) of this section, and 1011
the committee does not provide a recommendation before the 1012
sixty-first day after the request is submitted, the board may take 1013
action regarding the matter without a recommendation. 1014

Sec. 4730.08. (A) A ~~certificate~~ license to practice as a 1015
physician assistant issued under this chapter authorizes the 1016
holder to practice as a physician assistant, subject to ~~all~~ both 1017
of the following: 1018

(1) The physician assistant shall practice only ~~under~~ with 1019
the supervision, ~~control, and direction~~ of a physician with whom 1020
the physician assistant has entered into a supervision agreement 1021
~~approved by the state medical board~~ under section ~~4730.17~~ 4730.16 1022
of the Revised Code. 1023

(2) ~~When the physician assistant practices outside a health~~ 1024
~~care facility, the physician assistant shall practice in~~ 1025
~~accordance with the physician supervisory plan approved under~~ 1026
~~section 4730.17 of the Revised Code for the physician who is~~ 1027
~~responsible for supervising the physician assistant.~~ 1028

~~(3)~~ When the physician assistant practices within a health 1029
care facility, the physician assistant shall practice in 1030
accordance with the policies of the health care facility. 1031

(B) For purposes of division (A) of this section and all 1032
other provisions of this chapter pertaining to the practice of a 1033
physician assistant under the policies of a health care facility, 1034
both of the following apply: 1035

(1) A physician who is supervising a physician assistant 1036
within a health care facility may impose limitations on the 1037
physician assistant's practice that are in addition to any 1038
limitations applicable under the policies of the facility. 1039

(2) The state medical board may, subject to division (D) of 1040
section 4730.06 of the Revised Code, adopt rules designating 1041
facilities to be included as health care facilities that are in 1042
addition to the facilities specified in divisions (C)(1) and (2) 1043
of section 4730.01 of the Revised Code. The rules adopted shall be 1044
adopted in accordance with Chapter 119. of the Revised Code. 1045

Sec. 4730.10. (A) An individual seeking a ~~certificate~~ license 1046
to practice as a physician assistant shall file with the state 1047
medical board a written application on a form prescribed and 1048
supplied by the board. The application shall include all of the 1049
following: 1050

(1) The applicant's name, residential address, business 1051
address, if any, and social security number; 1052

(2) Satisfactory proof that the applicant meets the age and 1053
moral character requirements specified in divisions (A)(1) and (2) 1054
of section 4730.11 of the Revised Code; 1055

(3) Satisfactory proof that the applicant meets either the 1056
educational requirements specified in division (B)(1) or (2) of 1057
section 4730.11 of the Revised Code or the educational or other 1058
applicable requirements specified in division (C)(1), (2), or (3) 1059
of that section; 1060

(4) Any other information the board requires. 1061

(B) At the time of making application for a ~~certificate~~ 1062
license to practice, the applicant shall pay the board a fee of 1063
two hundred dollars, no part of which shall be returned. The fees 1064
shall be deposited in accordance with section 4731.24 of the 1065

Revised Code. 1066

Sec. 4730.101. In addition to any other eligibility 1067
requirement set forth in this chapter, each applicant for a 1068
~~certificate~~ license to practice as a physician assistant shall 1069
comply with sections 4776.01 to 4776.04 of the Revised Code. The 1070
state medical board shall not grant to an applicant a ~~certificate~~ 1071
license to practice as a physician assistant unless the board, in 1072
its discretion, decides that the results of the criminal records 1073
check do not make the applicant ineligible for a ~~certificate~~ 1074
license issued pursuant to section 4730.12 of the Revised Code. 1075

Sec. 4730.11. (A) To be eligible to receive a ~~certificate~~ 1076
license to practice as a physician assistant, all of the following 1077
apply to an applicant: 1078

(1) The applicant shall be at least eighteen years of age. 1079

(2) The applicant shall be of good moral character. 1080

(3) The applicant shall hold current certification by the 1081
national commission on certification of physician assistants or a 1082
successor organization that is recognized by the state medical 1083
board. 1084

(4) The applicant shall meet either of the following 1085
requirements: 1086

(a) The educational requirements specified in division (B)(1) 1087
or (2) of this section; 1088

(b) The educational or other applicable requirements 1089
specified in division (C)(1), (2), or (3) of this section. 1090

(B) Effective January 1, 2008, for purposes of division 1091
(A)(4)(a) of this section, an applicant shall meet either of the 1092
following educational requirements: 1093

(1) The applicant shall hold a master's or higher degree 1094

obtained from a program accredited by the accreditation review 1095
commission on education for the physician assistant or a 1096
predecessor or successor organization recognized by the board. 1097

(2) The applicant shall hold both of the following degrees: 1098

(a) A degree other than a master's or higher degree obtained 1099
from a program accredited by the accreditation review commission 1100
on education for the physician assistant or a predecessor or 1101
successor organization recognized by the board; 1102

(b) A master's or higher degree in a course of study with 1103
clinical relevance to the practice of physician assistants and 1104
obtained from a program accredited by a regional or specialized 1105
and professional accrediting agency recognized by the council for 1106
higher education accreditation. 1107

(C) For purposes of division (A)(4)(b) of this section, an 1108
applicant shall present evidence satisfactory to the board of 1109
meeting one of the following requirements in lieu of meeting the 1110
educational requirements specified in division (B)(1) or (2) of 1111
this section: 1112

(1) The applicant shall hold a current, valid license or 1113
other form of authority to practice as a physician assistant 1114
issued by another jurisdiction ~~prior to January 1, 2008~~ and have 1115
been in active practice in that jurisdiction throughout the 1116
immediately preceding three-year period. 1117

(2) The applicant shall hold a degree obtained as a result of 1118
being enrolled on January 1, 2008, in a program in this state that 1119
was accredited by the accreditation review commission on education 1120
for the physician assistant but did not grant a master's or higher 1121
degree to individuals enrolled in the program on that date, and 1122
completing the program on or before December 31, 2009. 1123

(3) The applicant shall meet both of the following 1124
educational and military experience requirements: 1125

(a) Hold a degree obtained from a program accredited by the accreditation review commission on education for the physician assistant;

(b) Have experience practicing as a physician assistant for at least three consecutive years while on active duty, with evidence of service under honorable conditions, in any of the armed forces of the United States or the national guard of any state, including any experience attained while practicing as a physician assistant at a health care facility or clinic operated by the United States department of veterans affairs.

(c) Have experience practicing as a physician assistant for at least three consecutive years while on active duty in the United States public health service commissioned corps.

(D) Unless the applicant had prescriptive authority while practicing as a physician assistant in another jurisdiction or in the military, the license issued to an applicant who does not hold a master's or higher degree described in division (B) of this section does not authorize the holder to exercise physician-delegated prescriptive authority and the state medical board shall not issue a prescriber number.

(E) This section does not require an individual to obtain a master's or higher degree as a condition of retaining or renewing a ~~certificate~~ license to practice as a physician assistant if the individual received the ~~certificate~~ license without holding a master's or higher degree as provided in either of the following, but the license will not include the authority to exercise physician-delegated prescriptive authority:

(1) Before the educational requirements specified in division (B)(1) or (2) of this section became effective January 1, 2008;

(2) By meeting the educational or other applicable requirements specified in division (C)(1), (2), or (3) of this

section. 1157

Sec. 4730.12. (A) The state medical board shall review ~~all~~ 1158
~~applications~~ each application received under section 4730.10 of 1159
the Revised Code for ~~certificates~~ a license to practice as a 1160
physician assistant. Not later than sixty days after receiving a 1161
complete application, the board shall determine whether an 1162
applicant meets the requirements to receive a ~~certificate~~ license 1163
to practice, as specified in section 4730.11 of the Revised Code. 1164
An affirmative vote of not fewer than six members of the board is 1165
required to determine that an applicant meets the requirements to 1166
receive a ~~certificate~~ license to practice as a physician 1167
assistant. 1168

(B) If the board determines that an applicant meets the 1169
requirements to receive the ~~certificate~~ license, the secretary of 1170
the board shall register the applicant as a physician assistant 1171
and issue to the applicant a ~~certificate~~ license to practice as a 1172
physician assistant. 1173

(C) A physician assistant's first five hundred hours of 1174
physician-delegated prescriptive authority shall be under the 1175
supervision of the supervising physician, but a physician 1176
assistant shall be excused from this requirement if prior to 1177
application the physician assistant held a prescriber number, or 1178
the equivalent, from another state. 1179

A record of the hours required by this division or issuance 1180
of a prescriber number or equivalent by another state shall be 1181
kept on file at each site at which the physician assistant 1182
routinely practices and be available for inspection by the board. 1183

Sec. 4730.13. Upon application by the holder of a ~~certificate~~ 1184
license to practice as a physician assistant, the state medical 1185
board shall issue a duplicate ~~certificate~~ license to replace one 1186

that is missing or damaged, to reflect a name change, or for any 1187
other reasonable cause. The fee for a duplicate ~~certificate~~ 1188
license shall be thirty-five dollars. All fees collected under 1189
this section shall be deposited in accordance with section 4731.24 1190
of the Revised Code. 1191

Sec. 4730.14. (A) A ~~certificate~~ license to practice as a 1192
physician assistant shall expire biennially and may be renewed in 1193
accordance with this section. A person seeking to renew a 1194
~~certificate~~ license to practice as a physician assistant shall, on 1195
or before the thirty-first day of January of each even-numbered 1196
year, apply for renewal of the certificate. The state medical 1197
board shall send renewal notices at least one month prior to the 1198
expiration date. 1199

Applications shall be submitted to the board on forms the 1200
board shall prescribe and furnish. Each application shall be 1201
accompanied by a biennial renewal fee of one hundred dollars. The 1202
board shall deposit the fees in accordance with section 4731.24 of 1203
the Revised Code. 1204

The applicant shall report any criminal offense that 1205
constitutes grounds for refusing to issue a ~~certificate~~ license to 1206
practice under section 4730.25 of the Revised Code to which the 1207
applicant has pleaded guilty, of which the applicant has been 1208
found guilty, or for which the applicant has been found eligible 1209
for intervention in lieu of conviction, since last signing an 1210
application for a ~~certificate~~ license to practice as a physician 1211
assistant. 1212

(B) To be eligible for renewal, a physician assistant shall 1213
certify to the board both of the following: 1214

(1) That the physician assistant has maintained certification 1215
by the national commission on certification of physician 1216
assistants or a successor organization that is recognized by the 1217

board by meeting the standards to hold current certification from 1218
the commission or its successor, including completion of 1219
continuing medical education requirements and passing periodic 1220
recertification examinations; 1221

(2) Except as provided in division (F) of this section and 1222
section 5903.12 of the Revised Code, that the physician assistant 1223
has completed during the current certification period not less 1224
than one hundred hours of continuing medical education acceptable 1225
to the board. 1226

(C) The board shall adopt rules in accordance with Chapter 1227
119. of the Revised Code specifying the types of continuing 1228
medical education that must be completed to fulfill the board's 1229
requirements under division (B)(2) of this section. Except when 1230
additional continuing medical education is required to renew a 1231
certificate to prescribe, as specified in section 4730.49 of the 1232
Revised Code, the board shall not adopt rules that require a 1233
physician assistant to complete in any certification period more 1234
than one hundred hours of continuing medical education acceptable 1235
to the board. In fulfilling the board's requirements, a physician 1236
assistant may use continuing medical education courses or programs 1237
completed to maintain certification by the national commission on 1238
certification of physician assistants or a successor organization 1239
that is recognized by the board if the standards for acceptable 1240
courses and programs of the commission or its successor are at 1241
least equivalent to the standards established by the board. 1242

(D) If an applicant submits a complete renewal application 1243
and qualifies for renewal pursuant to division (B) of this 1244
section, the board shall issue to the applicant a renewed 1245
~~certificate~~ license to practice as a physician assistant. 1246

(E) The board may require a random sample of physician 1247
assistants to submit materials documenting certification by the 1248
national commission on certification of physician assistants or a 1249

successor organization that is recognized by the board and 1250
completion of the required number of hours of continuing medical 1251
education. 1252

(F) The board shall provide for pro rata reductions by month 1253
of the number of hours of continuing education that must be 1254
completed for individuals who are in their first certification 1255
period, who have been disabled due to illness or accident, or who 1256
have been absent from the country. The board shall adopt rules, in 1257
accordance with Chapter 119. of the Revised Code, as necessary to 1258
implement this division. 1259

(G)(1) A ~~certificate~~ license to practice that is not renewed 1260
on or before its expiration date is automatically suspended on its 1261
expiration date. Continued practice after suspension of the 1262
certificate shall be considered as practicing in violation of 1263
division (A) of section 4730.02 of the Revised Code. 1264

(2) If a ~~certificate~~ license has been suspended pursuant to 1265
division (G)(1) of this section for two years or less, it may be 1266
reinstated. The board shall reinstate a ~~certificate~~ license 1267
suspended for failure to renew upon an applicant's submission of a 1268
renewal application, the biennial renewal fee, and any applicable 1269
monetary penalty. 1270

If a ~~certificate~~ license has been suspended pursuant to 1271
division (G)(1) of this ~~division~~ section for more than two years, 1272
it may be restored. In accordance with section 4730.28 of the 1273
Revised Code, the board may restore a ~~certificate~~ license 1274
suspended for failure to renew upon an applicant's submission of a 1275
restoration application, the biennial renewal fee, and any 1276
applicable monetary penalty and compliance with sections 4776.01 1277
to 4776.04 of the Revised Code. The board shall not restore to an 1278
applicant a ~~certificate~~ license to practice as a physician 1279
assistant unless the board, in its discretion, decides that the 1280
results of the criminal records check do not make the applicant 1281

ineligible for a ~~certificate~~ license issued pursuant to section 1282
4730.12 of the Revised Code. 1283

The penalty for reinstatement shall be fifty dollars and the 1284
penalty for restoration shall be one hundred dollars. The board 1285
shall deposit penalties in accordance with section 4731.24 of the 1286
Revised Code. 1287

(H) If an individual certifies that the individual has 1288
completed the number of hours and type of continuing medical 1289
education required for renewal or reinstatement of a ~~certificate~~ 1290
license to practice as a physician assistant, and the board finds 1291
through a random sample conducted under division (E) of this 1292
section or through any other means that the individual did not 1293
complete the requisite continuing medical education, the board may 1294
impose a civil penalty of not more than five thousand dollars. The 1295
board's finding shall be made pursuant to an adjudication under 1296
Chapter 119. of the Revised Code and by an affirmative vote of not 1297
fewer than six members. 1298

A civil penalty imposed under this division may be in 1299
addition to or in lieu of any other action the board may take 1300
under section 4730.25 of the Revised Code. The board shall deposit 1301
civil penalties in accordance with section 4731.24 of the Revised 1302
Code. 1303

~~Sec. 4730.16. To be eligible for approval by the state 1304
medical board under section 4730.17 of the Revised Code, a 1305
physician supervisory plan shall meet the requirements of any 1306
applicable rules adopted by the board (A) A supervision agreement 1307
shall be in writing, be signed by the physician assistant and the 1308
supervising physician, and shall specify ~~all~~ both of the 1309
following: 1310~~

~~(A)(1) The responsibilities to be fulfilled by the physician 1311
supervising a physician assistant under the ~~plan~~ agreement; 1312~~

~~(B)(2) The responsibilities to be fulfilled by a physician assistant when performing services under the plan;~~ 1313
1314

~~(C) Circumstances under which a physician assistant is required to refer a patient to the supervising physician;~~ 1315
1316

~~(D) Procedures to be followed by a physician assistant when writing medical orders, including prescriptions written in the exercise of the physician delegated prescriptive authority granted to the physician assistant;~~ 1317
1318
1319
1320

~~(E) Any special services that the physician may delegate to a physician assistant agreement.~~ 1321
1322

(B) A supervision agreement shall clearly state that the supervising physician is professionally and legally responsible for services provided by the physician assistant. 1323
1324
1325

(C) A supervision agreement expires two years after it is executed or, if earlier, on execution of a new supervision agreement by the supervising physician and physician assistant. 1326
1327
1328

(D) A supervision agreement shall be kept on file at each location at which the physician assistant regularly practices and made available to the state medical board on request. 1329
1330
1331

(E) The board shall adopt rules, in accordance with Chapter 119. of the Revised Code, as necessary to implement this section. 1332
1333

Sec. 4730.20. (A) A physician assistant licensed under this chapter may perform any of the following services authorized by the supervising physician that are part of the supervising physician's normal course of practice and expertise: 1334
1335
1336
1337

(1) Ordering diagnostic, therapeutic, and other medical services; 1338
1339

(2) Prescribing physical therapy or referring a patient to a physical therapist for physical therapy; 1340
1341

<u>(3) Ordering occupational therapy or referring a patient to</u>	1342
<u>an occupational therapist for occupational therapy;</u>	1343
<u>(4) Taking any action that may be taken by an attending</u>	1344
<u>physician under sections 2133.21 to 2133.26 of the Revised Code,</u>	1345
<u>as specified in section 2133.211 of the Revised Code;</u>	1346
<u>(5) Determining and pronouncing death in accordance with</u>	1347
<u>section 4730.092 of the Revised Code;</u>	1348
<u>(6) Assisting in surgery;</u>	1349
<u>(7) If the physician assistant holds a valid prescriber</u>	1350
<u>number issued by the state medical board, ordering, prescribing,</u>	1351
<u>personally furnishing, and administering drugs and medical</u>	1352
<u>devices;</u>	1353
<u>(8) Any other services that are part of the supervising</u>	1354
<u>physician's normal course of practice and expertise.</u>	1355
<u>(B) When performing authorized services, a physician</u>	1356
<u>assistant acts as the agent of the supervising physician. The</u>	1357
<u>supervising physician is professionally responsible for the</u>	1358
<u>services performed by the physician assistant.</u>	1359
<u>(C) A physician assistant who is authorized to perform</u>	1360
<u>services may delegate a task the physician assistant is authorized</u>	1361
<u>to perform that implements the plan of care for a patient to a</u>	1362
<u>medical assistant, a nurse aide who has successfully completed a</u>	1363
<u>training and competency evaluation program approved by the</u>	1364
<u>director of health under section 3721.31 of the Revised Code, or</u>	1365
<u>other personnel.</u>	1366
<u>(D) The services a physician assistant may provide under the</u>	1367
<u>policies of a health care facility are limited to the services the</u>	1368
<u>facility authorizes the physician assistant to provide for the</u>	1369
<u>facility. A facility may not authorize a physician assistant to</u>	1370
<u>perform a service that is not authorized under this chapter.</u>	1371

Sec. ~~4730.091~~ 4730.201. (A) As used in this section, ~~"local:~~ 1372

(1) "Local anesthesia" means the injection of a drug or 1373
combination of drugs to stop or prevent a painful sensation in a 1374
circumscribed area of the body where a painful procedure is to be 1375
performed. "Local anesthesia" includes only local infiltration 1376
anesthesia, digital blocks, and pudendal blocks. 1377

(2) "Conscious sedation" means a minimally depressed level of 1378
consciousness induced by the administration of pharmacologic 1379
agents in which a patient retains the ability to independently and 1380
continuously maintain an open airway and a regular breathing 1381
pattern, and to respond appropriately to physical stimulation and 1382
verbal commands. Conscious sedation may be induced by parenteral 1383
or oral medications or a combination thereof. 1384

(B) A physician assistant may administer, monitor, or 1385
maintain local anesthesia as a component of a procedure the 1386
physician assistant is performing or as a separate service when 1387
the procedure requiring local anesthesia is to be performed by the 1388
physician assistant's supervising physician or another person. A 1389
physician assistant may administer, monitor, and maintain 1390
conscious sedation within a facility's critical care unit or, with 1391
the supervision of a physician as described in division (D)(2) of 1392
section 4730.21 of the Revised Code a facility's emergency 1393
department. A physician assistant shall not administer, monitor, 1394
or maintain any other form of anesthesia, ~~including regional~~ 1395
~~anesthesia or any systemic sedation, regardless of whether the~~ 1396
~~physician assistant is practicing under a physician supervisory~~ 1397
~~plan or the policies of a health care facility.~~ 1398

Sec. ~~4730.092~~ 4730.202. (A) A physician assistant may 1399
determine and pronounce an individual's death, but only if the 1400
individual's respiratory and circulatory functions are not being 1401

artificially sustained and, at the time the determination and 1402
pronouncement of death is made, either or both of the following 1403
apply: 1404

(1) The individual was receiving care in one of the 1405
following: 1406

(a) A nursing home licensed under section 3721.02 of the 1407
Revised Code or by a political subdivision under section 3721.09 1408
of the Revised Code; 1409

(b) A residential care facility or home for the aging 1410
licensed under Chapter 3721. of the Revised Code; 1411

(c) A county home or district home operated pursuant to 1412
Chapter 5155. of the Revised Code; 1413

(d) A residential facility licensed under section 5123.19 of 1414
the Revised Code. 1415

(2) The physician assistant is providing or supervising the 1416
individual's care through a hospice care program licensed under 1417
Chapter 3712. of the Revised Code or any other entity that 1418
provides palliative care. 1419

(B) If a physician assistant determines and pronounces an 1420
individual's death, the physician assistant shall comply with both 1421
of the following: 1422

(1) The physician assistant shall not complete any portion of 1423
the individual's death certificate. 1424

(2) The physician assistant shall notify the individual's 1425
attending physician of the determination and pronouncement of 1426
death in order for the physician to fulfill the physician's duties 1427
under section 3705.16 of the Revised Code. The physician assistant 1428
shall provide the notification within a period of time that is 1429
reasonable but not later than twenty-four hours following the 1430
determination and pronouncement of the individual's death. 1431

Sec. 4730.21. (A) The supervising physician of a physician 1432
assistant exercises supervision, ~~control, and direction~~ of the 1433
physician assistant. In supervising a physician assistant, all of 1434
the following apply: 1435

(1) ~~Except when the on site supervision requirements~~ 1436
~~specified in section 4730.45 of the Revised Code are applicable,~~ 1437
~~the~~ The supervising physician shall be continuously available for 1438
direct communication with the physician assistant by either of the 1439
following means: 1440

(a) Being physically present at the location where the 1441
physician assistant is practicing; 1442

(b) Being readily available to the physician assistant 1443
through some means of telecommunication and being in a location 1444
that ~~under normal conditions is not more than sixty minutes travel~~ 1445
~~time away~~ a distance from the location where the physician 1446
assistant is practicing that reasonably allows the physician to 1447
assure proper care of patients. 1448

(2) The supervising physician shall personally and actively 1449
review the physician assistant's professional activities. 1450

(3) ~~The supervising physician shall regularly review the~~ 1451
~~condition of the patients treated by the physician assistant.~~ 1452

~~(4)~~ The supervising physician shall ensure that the quality 1453
assurance system established pursuant to division (F) of this 1454
section is implemented and maintained. 1455

~~(5)~~(4) The supervising physician shall regularly perform any 1456
other reviews of the physician assistant that the supervising 1457
physician considers necessary. 1458

(B) A physician may enter into supervision agreements with 1459
any number of physician assistants, but the physician may not 1460
supervise more than ~~two~~ five physician assistants at any one time. 1461

~~A physician assistant may enter into supervision agreements with any number of supervising physicians, but when practicing under the supervision of a particular physician, the physician assistant's scope of practice is subject to the limitations of the physician supervisory plan that has been approved under section 4730.17 of the Revised Code for that physician or the policies of the health care facility in which the physician and physician assistant are practicing.~~

(C) ~~A supervising physician may authorize a physician assistant to perform a service only if the service is authorized under the physician supervisory plan approved for that physician or the policies of the health care facility in which the physician and physician assistant are practicing.~~ A supervising physician may authorize a physician assistant to perform a service only if the physician is satisfied that the physician assistant is capable of competently performing the service. A supervising physician shall not authorize a physician assistant to perform any service that is beyond the physician's or the physician assistant's normal course of practice and expertise.

(D)(1) ~~A supervising physician may authorize a physician assistant to~~ may practice in any setting ~~within which authorized by the supervising physician routinely practices.~~

(2) In the case of a health care facility with an emergency department, if the supervising physician routinely practices in the facility's emergency department, the supervising physician shall provide on-site supervision of the physician assistant when the physician assistant practices in the emergency department. If the supervising physician does not routinely practice in the facility's emergency department, the supervising physician may, on occasion, send the physician assistant to the facility's emergency department to assess and manage a patient. In supervising the physician assistant's assessment and management of the patient,

the supervising physician shall determine the appropriate level of supervision in compliance with the requirements of divisions (A) to (C) of this section, except that the supervising physician must be available to go to the emergency department to personally evaluate the patient and, at the request of an emergency department physician, the supervising physician shall go to the emergency department to personally evaluate the patient.

(E) Each time a physician assistant writes a medical order, including prescriptions written in the exercise of physician-delegated prescriptive authority, the physician assistant shall sign the form on which the order is written and record on the form the time and date that the order is written. ~~When writing a medical order, the physician assistant shall clearly identify the physician under whose supervision the physician assistant is authorized to write the order.~~

(F)(1) The supervising physician of a physician assistant shall establish a quality assurance system to be used in supervising the physician assistant. All or part of the system may be applied to other physician assistants who are supervised by the supervising physician. The system shall be developed in consultation with each physician assistant to be supervised by the physician.

(2) In establishing the quality assurance system, the supervising physician shall describe a process to be used for all of the following:

(a) Routine review by the physician of selected patient record entries made by the physician assistant and selected medical orders issued by the physician assistant;

(b) Discussion of complex cases;

(c) Discussion of new medical developments relevant to the practice of the physician and physician assistant;

(d) Performance of any quality assurance activities required 1525
in rules adopted by state medical board pursuant to any 1526
recommendations made by the physician assistant policy committee 1527
under section 4730.06 of the Revised Code; 1528

(e) Performance of any other quality assurance activities 1529
that the supervising physician considers to be appropriate. 1530

(3) The supervising physician and physician assistant shall 1531
keep records of their quality assurance activities. On request, 1532
the records shall be made available to the board ~~and any health~~ 1533
~~care professional working with the supervising physician and~~ 1534
~~physician assistant.~~ 1535

Sec. 4730.25. (A) The state medical board, by an affirmative 1536
vote of not fewer than six members, may revoke or may refuse to 1537
grant a ~~certificate~~ license to practice as a physician assistant 1538
~~or a certificate to prescribe~~ to a person found by the board to 1539
have committed fraud, misrepresentation, or deception in applying 1540
for or securing the ~~certificate~~ license. 1541

(B) The board, by an affirmative vote of not fewer than six 1542
members, shall, to the extent permitted by law, limit, revoke, or 1543
suspend an individual's ~~certificate~~ license to practice as a 1544
physician assistant ~~or certificate to prescribe~~, refuse to issue a 1545
~~certificate~~ license to an applicant, refuse to reinstate a 1546
~~certificate~~ license, or reprimand or place on probation the holder 1547
of a ~~certificate~~ license for any of the following reasons: 1548

(1) Failure to practice in accordance with the ~~conditions~~ 1549
~~under which the supervising physician's supervision agreement with~~ 1550
the physician assistant ~~was approved, including the requirement~~ 1551
~~that when practicing under a particular supervising physician, the~~ 1552
~~physician assistant must practice only according to the physician~~ 1553
~~supervisory plan the board approved for that physician or the~~ 1554
policies of the health care facility in which the supervising 1555

physician and physician assistant are practicing;	1556
(2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board;	1557 1558 1559
(3) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this chapter, Chapter 4731. of the Revised Code, or the rules adopted by the board;	1560 1561 1562 1563
(4) Inability to practice according to acceptable and prevailing standards of care by reason of mental illness or physical illness, including physical deterioration that adversely affects cognitive, motor, or perceptive skills;	1564 1565 1566 1567
(5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice;	1568 1569 1570 1571
(6) Administering drugs for purposes other than those authorized under this chapter;	1572 1573
(7) Willfully betraying a professional confidence;	1574
(8) Making a false, fraudulent, deceptive, or misleading statement in soliciting or advertising for employment as a physician assistant; in connection with any solicitation or advertisement for patients; in relation to the practice of medicine as it pertains to physician assistants; or in securing or attempting to secure a <u>certificate license</u> to practice as a physician assistant, a certificate to prescribe, or approval of a supervision agreement.	1575 1576 1577 1578 1579 1580 1581 1582
As used in this division, "false, fraudulent, deceptive, or misleading statement" means a statement that includes a misrepresentation of fact, is likely to mislead or deceive because	1583 1584 1585

of a failure to disclose material facts, is intended or is likely 1586
to create false or unjustified expectations of favorable results, 1587
or includes representations or implications that in reasonable 1588
probability will cause an ordinarily prudent person to 1589
misunderstand or be deceived. 1590

(9) Representing, with the purpose of obtaining compensation 1591
or other advantage personally or for any other person, that an 1592
incurable disease or injury, or other incurable condition, can be 1593
permanently cured; 1594

(10) The obtaining of, or attempting to obtain, money or 1595
anything of value by fraudulent misrepresentations in the course 1596
of practice; 1597

(11) A plea of guilty to, a judicial finding of guilt of, or 1598
a judicial finding of eligibility for intervention in lieu of 1599
conviction for, a felony; 1600

(12) Commission of an act that constitutes a felony in this 1601
state, regardless of the jurisdiction in which the act was 1602
committed; 1603

(13) A plea of guilty to, a judicial finding of guilt of, or 1604
a judicial finding of eligibility for intervention in lieu of 1605
conviction for, a misdemeanor committed in the course of practice; 1606

(14) A plea of guilty to, a judicial finding of guilt of, or 1607
a judicial finding of eligibility for intervention in lieu of 1608
conviction for, a misdemeanor involving moral turpitude; 1609

(15) Commission of an act in the course of practice that 1610
constitutes a misdemeanor in this state, regardless of the 1611
jurisdiction in which the act was committed; 1612

(16) Commission of an act involving moral turpitude that 1613
constitutes a misdemeanor in this state, regardless of the 1614
jurisdiction in which the act was committed; 1615

(17) A plea of guilty to, a judicial finding of guilt of, or 1616
a judicial finding of eligibility for intervention in lieu of 1617
conviction for violating any state or federal law regulating the 1618
possession, distribution, or use of any drug, including 1619
trafficking in drugs; 1620

(18) Any of the following actions taken by the state agency 1621
responsible for regulating the practice of physician assistants in 1622
another state, for any reason other than the nonpayment of fees: 1623
the limitation, revocation, or suspension of an individual's 1624
license to practice; acceptance of an individual's license 1625
surrender; denial of a license; refusal to renew or reinstate a 1626
license; imposition of probation; or issuance of an order of 1627
censure or other reprimand; 1628

(19) A departure from, or failure to conform to, minimal 1629
standards of care of similar physician assistants under the same 1630
or similar circumstances, regardless of whether actual injury to a 1631
patient is established; 1632

(20) Violation of the conditions placed by the board on a 1633
~~certificate~~ license to practice as a physician assistant, ~~a~~ 1634
~~certificate to prescribe, a physician supervisory plan,~~ or 1635
supervision agreement; 1636

(21) Failure to use universal blood and body fluid 1637
precautions established by rules adopted under section 4731.051 of 1638
the Revised Code; 1639

(22) Failure to cooperate in an investigation conducted by 1640
the board under section 4730.26 of the Revised Code, including 1641
failure to comply with a subpoena or order issued by the board or 1642
failure to answer truthfully a question presented by the board at 1643
a deposition or in written interrogatories, except that failure to 1644
cooperate with an investigation shall not constitute grounds for 1645
discipline under this section if a court of competent jurisdiction 1646

has issued an order that either quashes a subpoena or permits the individual to withhold the testimony or evidence in issue;

(23) Assisting suicide as defined in section 3795.01 of the Revised Code;

(24) Prescribing any drug or device to perform or induce an abortion, or otherwise performing or inducing an abortion.

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

(D) For purposes of divisions (B)(12), (15), and (16) of this section, the commission of the act may be established by a finding by the board, pursuant to an adjudication under Chapter 119. of the Revised Code, that the applicant or ~~certificate~~ license holder committed the act in question. The board shall have no jurisdiction under these divisions in cases where the trial court renders a final judgment in the ~~certificate~~ license holder's favor and that judgment is based upon an adjudication on the merits. The board shall have jurisdiction under these divisions in cases where the trial court issues an order of dismissal upon technical or procedural grounds.

(E) The sealing of conviction records by any court shall have no effect upon a prior board order entered under the provisions of

this section or upon the board's jurisdiction to take action under 1678
the provisions of this section if, based upon a plea of guilty, a 1679
judicial finding of guilt, or a judicial finding of eligibility 1680
for intervention in lieu of conviction, the board issued a notice 1681
of opportunity for a hearing prior to the court's order to seal 1682
the records. The board shall not be required to seal, destroy, 1683
redact, or otherwise modify its records to reflect the court's 1684
sealing of conviction records. 1685

(F) For purposes of this division, any individual who holds a 1686
~~certificate~~ license issued under this chapter, or applies for a 1687
~~certificate~~ license issued under this chapter, shall be deemed to 1688
have given consent to submit to a mental or physical examination 1689
when directed to do so in writing by the board and to have waived 1690
all objections to the admissibility of testimony or examination 1691
reports that constitute a privileged communication. 1692

(1) In enforcing division (B)(4) of this section, the board, 1693
upon a showing of a possible violation, may compel any individual 1694
who holds a ~~certificate~~ license issued under this chapter or who 1695
has applied for a ~~certificate~~ license pursuant to this chapter to 1696
submit to a mental examination, physical examination, including an 1697
HIV test, or both a mental and physical examination. The expense 1698
of the examination is the responsibility of the individual 1699
compelled to be examined. Failure to submit to a mental or 1700
physical examination or consent to an HIV test ordered by the 1701
board constitutes an admission of the allegations against the 1702
individual unless the failure is due to circumstances beyond the 1703
individual's control, and a default and final order may be entered 1704
without the taking of testimony or presentation of evidence. If 1705
the board finds a physician assistant unable to practice because 1706
of the reasons set forth in division (B)(4) of this section, the 1707
board shall require the physician assistant to submit to care, 1708
counseling, or treatment by physicians approved or designated by 1709

the board, as a condition for an initial, continued, reinstated, 1710
or renewed ~~certificate~~ license. An individual affected under this 1711
division shall be afforded an opportunity to demonstrate to the 1712
board the ability to resume practicing in compliance with 1713
acceptable and prevailing standards of care. 1714

(2) For purposes of division (B)(5) of this section, if the 1715
board has reason to believe that any individual who holds a 1716
~~certificate~~ license issued under this chapter or any applicant for 1717
a ~~certificate~~ license suffers such impairment, the board may 1718
compel the individual to submit to a mental or physical 1719
examination, or both. The expense of the examination is the 1720
responsibility of the individual compelled to be examined. Any 1721
mental or physical examination required under this division shall 1722
be undertaken by a treatment provider or physician qualified to 1723
conduct such examination and chosen by the board. 1724

Failure to submit to a mental or physical examination ordered 1725
by the board constitutes an admission of the allegations against 1726
the individual unless the failure is due to circumstances beyond 1727
the individual's control, and a default and final order may be 1728
entered without the taking of testimony or presentation of 1729
evidence. If the board determines that the individual's ability to 1730
practice is impaired, the board shall suspend the individual's 1731
~~certificate~~ license or deny the individual's application and shall 1732
require the individual, as a condition for initial, continued, 1733
reinstated, or renewed ~~certification~~ licensure to practice or 1734
prescribe, to submit to treatment. 1735

Before being eligible to apply for reinstatement of a 1736
~~certificate~~ license suspended under this division, the physician 1737
assistant shall demonstrate to the board the ability to resume 1738
practice or prescribing in compliance with acceptable and 1739
prevailing standards of care. The demonstration shall include the 1740
following: 1741

(a) Certification from a treatment provider approved under 1742
section 4731.25 of the Revised Code that the individual has 1743
successfully completed any required inpatient treatment; 1744

(b) Evidence of continuing full compliance with an aftercare 1745
contract or consent agreement; 1746

(c) Two written reports indicating that the individual's 1747
ability to practice has been assessed and that the individual has 1748
been found capable of practicing according to acceptable and 1749
prevailing standards of care. The reports shall be made by 1750
individuals or providers approved by the board for making such 1751
assessments and shall describe the basis for their determination. 1752

The board may reinstate a ~~certificate~~ license suspended under 1753
this division after such demonstration and after the individual 1754
has entered into a written consent agreement. 1755

When the impaired physician assistant resumes practice or 1756
prescribing, the board shall require continued monitoring of the 1757
physician assistant. The monitoring shall include compliance with 1758
the written consent agreement entered into before reinstatement or 1759
with conditions imposed by board order after a hearing, and, upon 1760
termination of the consent agreement, submission to the board for 1761
at least two years of annual written progress reports made under 1762
penalty of falsification stating whether the physician assistant 1763
has maintained sobriety. 1764

(G) If the secretary and supervising member determine that 1765
there is clear and convincing evidence that a physician assistant 1766
has violated division (B) of this section and that the 1767
individual's continued practice or prescribing presents a danger 1768
of immediate and serious harm to the public, they may recommend 1769
that the board suspend the individual's ~~certificate~~ license to 1770
practice or authority to prescribe without a prior hearing. 1771
Written allegations shall be prepared for consideration by the 1772

board. 1773

The board, upon review of those allegations and by an 1774
affirmative vote of not fewer than six of its members, excluding 1775
the secretary and supervising member, may suspend a ~~certificate~~ 1776
license without a prior hearing. A telephone conference call may 1777
be utilized for reviewing the allegations and taking the vote on 1778
the summary suspension. 1779

The board shall issue a written order of suspension by 1780
certified mail or in person in accordance with section 119.07 of 1781
the Revised Code. The order shall not be subject to suspension by 1782
the court during pendency of any appeal filed under section 119.12 1783
of the Revised Code. If the physician assistant requests an 1784
adjudicatory hearing by the board, the date set for the hearing 1785
shall be within fifteen days, but not earlier than seven days, 1786
after the physician assistant requests the hearing, unless 1787
otherwise agreed to by both the board and the ~~certificate~~ license 1788
holder. 1789

A summary suspension imposed under this division shall remain 1790
in effect, unless reversed on appeal, until a final adjudicative 1791
order issued by the board pursuant to this section and Chapter 1792
119. of the Revised Code becomes effective. The board shall issue 1793
its final adjudicative order within sixty days after completion of 1794
its hearing. Failure to issue the order within sixty days shall 1795
result in dissolution of the summary suspension order, but shall 1796
not invalidate any subsequent, final adjudicative order. 1797

(H) If the board takes action under division (B)(11), (13), 1798
or (14) of this section, and the judicial finding of guilt, guilty 1799
plea, or judicial finding of eligibility for intervention in lieu 1800
of conviction is overturned on appeal, upon exhaustion of the 1801
criminal appeal, a petition for reconsideration of the order may 1802
be filed with the board along with appropriate court documents. 1803
Upon receipt of a petition and supporting court documents, the 1804

board shall reinstate the ~~certificate~~ license to practice ~~or~~ 1805
~~prescribe~~. The board may then hold an adjudication under Chapter 1806
119. of the Revised Code to determine whether the individual 1807
committed the act in question. Notice of opportunity for hearing 1808
shall be given in accordance with Chapter 119. of the Revised 1809
Code. If the board finds, pursuant to an adjudication held under 1810
this division, that the individual committed the act, or if no 1811
hearing is requested, it may order any of the sanctions identified 1812
under division (B) of this section. 1813

(I) The ~~certificate~~ license to practice issued to a physician 1814
assistant and the physician assistant's practice in this state are 1815
automatically suspended as of the date the physician assistant 1816
pleads guilty to, is found by a judge or jury to be guilty of, or 1817
is subject to a judicial finding of eligibility for intervention 1818
in lieu of conviction in this state or treatment or intervention 1819
in lieu of conviction in another state for any of the following 1820
criminal offenses in this state or a substantially equivalent 1821
criminal offense in another jurisdiction: aggravated murder, 1822
murder, voluntary manslaughter, felonious assault, kidnapping, 1823
rape, sexual battery, gross sexual imposition, aggravated arson, 1824
aggravated robbery, or aggravated burglary. Continued practice 1825
after the suspension shall be considered practicing without a 1826
~~certificate~~ license. 1827

The board shall notify the individual subject to the 1828
suspension by certified mail or in person in accordance with 1829
section 119.07 of the Revised Code. If an individual whose 1830
~~certificate~~ license is suspended under this division fails to make 1831
a timely request for an adjudication under Chapter 119. of the 1832
Revised Code, the board shall enter a final order permanently 1833
revoking the individual's ~~certificate~~ license to practice. 1834

(J) In any instance in which the board is required by Chapter 1835
119. of the Revised Code to give notice of opportunity for hearing 1836

and the individual subject to the notice does not timely request a 1837
hearing in accordance with section 119.07 of the Revised Code, the 1838
board is not required to hold a hearing, but may adopt, by an 1839
affirmative vote of not fewer than six of its members, a final 1840
order that contains the board's findings. In that final order, the 1841
board may order any of the sanctions identified under division (A) 1842
or (B) of this section. 1843

(K) Any action taken by the board under division (B) of this 1844
section resulting in a suspension shall be accompanied by a 1845
written statement of the conditions under which the physician 1846
assistant's ~~certificate~~ license may be reinstated. The board shall 1847
adopt rules in accordance with Chapter 119. of the Revised Code 1848
governing conditions to be imposed for reinstatement. 1849
Reinstatement of a ~~certificate~~ license suspended pursuant to 1850
division (B) of this section requires an affirmative vote of not 1851
fewer than six members of the board. 1852

(L) When the board refuses to grant to an applicant a 1853
~~certificate~~ license to practice as a physician assistant ~~or a~~ 1854
~~certificate to prescribe~~, revokes an individual's ~~certificate~~ 1855
license, refuses to issue a ~~certificate~~ license, or refuses to 1856
reinstatement an individual's ~~certificate~~ license, the board may 1857
specify that its action is permanent. An individual subject to a 1858
permanent action taken by the board is forever thereafter 1859
ineligible to hold the ~~certificate~~ license and the board shall not 1860
accept an application for reinstatement of the ~~certificate~~ license 1861
or for issuance of a new ~~certificate~~ license. 1862

(M) Notwithstanding any other provision of the Revised Code, 1863
all of the following apply: 1864

(1) The surrender of a ~~certificate~~ license issued under this 1865
chapter is not effective unless or until accepted by the board. 1866
Reinstatement of a ~~certificate~~ license surrendered to the board 1867
requires an affirmative vote of not fewer than six members of the 1868

board. 1869

(2) An application made under this chapter for a ~~certificate,~~ 1870
~~approval of a physician supervisory plan, or approval of a~~ 1871
~~supervision agreement~~ license may not be withdrawn without 1872
approval of the board. 1873

(3) Failure by an individual to renew a ~~certificate~~ license 1874
in accordance with section 4730.14 or section 4730.48 of the 1875
Revised Code shall not remove or limit the board's jurisdiction to 1876
take disciplinary action under this section against the 1877
individual. 1878

Sec. 4730.251. On receipt of a notice pursuant to section 1879
3123.43 of the Revised Code, the state medical board shall comply 1880
with sections 3123.41 to 3123.50 of the Revised Code and any 1881
applicable rules adopted under section 3123.63 of the Revised Code 1882
with respect to a ~~certificate~~ license issued pursuant to this 1883
chapter. 1884

Sec. 4730.27. If the state medical board has reason to 1885
believe that any person who has been granted a ~~certificate~~ license 1886
under this chapter is mentally ill or mentally incompetent, it may 1887
file in the probate court of the county in which such person has a 1888
legal residence an affidavit in the form prescribed in section 1889
5122.11 of the Revised Code and signed by the board secretary or a 1890
member of the secretary's staff, whereupon the same proceedings 1891
shall be had as provided in Chapter 5122. of the Revised Code. The 1892
attorney general may represent the board in any proceeding 1893
commenced under this section. 1894

If a physician assistant is adjudged by a probate court to be 1895
mentally ill or mentally incompetent, the individual's ~~certificate~~ 1896
license shall be automatically suspended until the individual has 1897
filed with the board a certified copy of an adjudication by a 1898

probate court of being restored to competency or has submitted to 1899
the board proof, satisfactory to the board, of having been 1900
discharged as being restored to competency in the manner and form 1901
provided in section 5122.38 of the Revised Code. The judge of the 1902
court shall immediately notify the board of an adjudication of 1903
incompetence and note any suspension of a ~~certificate~~ license in 1904
the margin of the court's record of the ~~certificate~~ license. 1905

Sec. 4730.28. (A) An individual whose ~~certificate~~ license to 1906
practice as a physician assistant has been suspended or is in an 1907
inactive state for any cause for more than two years may apply to 1908
the state medical board to have the ~~certificate~~ license restored. 1909

(B)(1) The board shall not restore a ~~certificate~~ license 1910
under this section unless the applicant complies with sections 1911
4776.01 to 4776.04 of the Revised Code. The board shall determine 1912
the applicant's present fitness to resume practice. The board 1913
shall consider the moral background and the activities of the 1914
applicant during the period of suspension or inactivity. 1915

(2) When restoring a ~~certificate~~ license, the board may 1916
impose terms and conditions, including the following: 1917

(a) Requiring the applicant to obtain additional training and 1918
pass an examination upon completion of the training; 1919

(b) Restricting or limiting the extent, scope, or type of 1920
practice as a physician assistant that the individual may resume. 1921

Sec. 4730.31. (A) As used in this section, "prosecutor" has 1922
the same meaning as in section 2935.01 of the Revised Code. 1923

(B) Whenever any person holding a valid ~~certificate~~ license 1924
issued pursuant to this chapter pleads guilty to, is subject to a 1925
judicial finding of guilt of, or is subject to a judicial finding 1926
of eligibility for intervention in lieu of conviction for a 1927
violation of Chapter 2907., 2925., or 3719. of the Revised Code or 1928

of any substantively comparable ordinance of a municipal 1929
corporation in connection with practicing as a physician 1930
assistant, the prosecutor in the case shall, on forms prescribed 1931
and provided by the state medical board, promptly notify the board 1932
of the conviction. Within thirty days of receipt of such 1933
information, the board shall initiate action in accordance with 1934
Chapter 119. of the Revised Code to determine whether to suspend 1935
or revoke the ~~certificate~~ license under section 4730.25 of the 1936
Revised Code. 1937

(C) The prosecutor in any case against any person holding a 1938
valid ~~certificate~~ license issued pursuant to this chapter shall, 1939
on forms prescribed and provided by the state medical board, 1940
notify the board of any of the following: 1941

(1) A plea of guilty to, a judicial finding of guilt of, or 1942
judicial finding of eligibility for intervention in lieu of 1943
conviction for a felony, or a case where the trial court issues an 1944
order of dismissal upon technical or procedural grounds of a 1945
felony charge; 1946

(2) A plea of guilty to, a judicial finding of guilt of, or 1947
judicial finding or eligibility for intervention in lieu of 1948
conviction for a misdemeanor committed in the course of practice, 1949
or a case where the trial court issues an order of dismissal upon 1950
technical or procedural grounds of a charge of a misdemeanor, if 1951
the alleged act was committed in the course of practice; 1952

(3) A plea of guilty to, a judicial finding of guilt of, or 1953
judicial finding of eligibility for intervention in lieu of 1954
conviction for a misdemeanor involving moral turpitude, or a case 1955
where the trial court issues an order of dismissal upon technical 1956
or procedural grounds of a charge of a misdemeanor involving moral 1957
turpitude. 1958

The report shall include the name and address of the 1959

~~certificate~~ license holder, the nature of the offense for which 1960
the action was taken, and the certified court documents recording 1961
the action. 1962

Sec. 4730.32. (A) Within sixty days after the imposition of 1963
any formal disciplinary action taken by a health care facility 1964
against any individual holding a valid ~~certificate~~ license to 1965
practice as a physician assistant, the chief administrator or 1966
executive officer of the facility shall report to the state 1967
medical board the name of the individual, the action taken by the 1968
facility, and a summary of the underlying facts leading to the 1969
action taken. Upon request, the board shall be provided certified 1970
copies of the patient records that were the basis for the 1971
facility's action. Prior to release to the board, the summary 1972
shall be approved by the peer review committee that reviewed the 1973
case or by the governing board of the facility. 1974

The filing of a report with the board or decision not to file 1975
a report, investigation by the board, or any disciplinary action 1976
taken by the board, does not preclude a health care facility from 1977
taking disciplinary action against a physician assistant. 1978

In the absence of fraud or bad faith, no individual or entity 1979
that provides patient records to the board shall be liable in 1980
damages to any person as a result of providing the records. 1981

(B) A physician assistant, professional association or 1982
society of physician assistants, physician, or professional 1983
association or society of physicians that believes a violation of 1984
any provision of this chapter, Chapter 4731. of the Revised Code, 1985
or rule of the board has occurred shall report to the board the 1986
information upon which the belief is based. This division does not 1987
require any treatment provider approved by the board under section 1988
4731.25 of the Revised Code or any employee, agent, or 1989
representative of such a provider to make reports with respect to 1990

a physician assistant participating in treatment or aftercare for substance abuse as long as the physician assistant maintains participation in accordance with the requirements of section 4731.25 of the Revised Code and the treatment provider or employee, agent, or representative of the provider has no reason to believe that the physician assistant has violated any provision of this chapter or rule adopted under it, other than being impaired by alcohol, drugs, or other substances. This division does not require reporting by any member of an impaired practitioner committee established by a health care facility or by any representative or agent of a committee or program sponsored by a professional association or society of physician assistants to provide peer assistance to physician assistants with substance abuse problems with respect to a physician assistant who has been referred for examination to a treatment program approved by the board under section 4731.25 of the Revised Code if the physician assistant cooperates with the referral for examination and with any determination that the physician assistant should enter treatment and as long as the committee member, representative, or agent has no reason to believe that the physician assistant has ceased to participate in the treatment program in accordance with section 4731.25 of the Revised Code or has violated any provision of this chapter or rule adopted under it, other than being impaired by alcohol, drugs, or other substances.

(C) Any professional association or society composed primarily of physician assistants that suspends or revokes an individual's membership for violations of professional ethics, or for reasons of professional incompetence or professional malpractice, within sixty days after a final decision, shall report to the board, on forms prescribed and provided by the board, the name of the individual, the action taken by the professional organization, and a summary of the underlying facts leading to the action taken.

The filing or nonfiling of a report with the board, 2024
investigation by the board, or any disciplinary action taken by 2025
the board, shall not preclude a professional organization from 2026
taking disciplinary action against a physician assistant. 2027

(D) Any insurer providing professional liability insurance to 2028
any person holding a valid ~~certificate~~ license to practice as a 2029
physician assistant or any other entity that seeks to indemnify 2030
the professional liability of a physician assistant shall notify 2031
the board within thirty days after the final disposition of any 2032
written claim for damages where such disposition results in a 2033
payment exceeding twenty-five thousand dollars. The notice shall 2034
contain the following information: 2035

(1) The name and address of the person submitting the 2036
notification; 2037

(2) The name and address of the insured who is the subject of 2038
the claim; 2039

(3) The name of the person filing the written claim; 2040

(4) The date of final disposition; 2041

(5) If applicable, the identity of the court in which the 2042
final disposition of the claim took place. 2043

(E) The board may investigate possible violations of this 2044
chapter or the rules adopted under it that are brought to its 2045
attention as a result of the reporting requirements of this 2046
section, except that the board shall conduct an investigation if a 2047
possible violation involves repeated malpractice. As used in this 2048
division, "repeated malpractice" means three or more claims for 2049
malpractice within the previous five-year period, each resulting 2050
in a judgment or settlement in excess of twenty-five thousand 2051
dollars in favor of the claimant, and each involving negligent 2052
conduct by the physician assistant. 2053

(F) All summaries, reports, and records received and 2054
maintained by the board pursuant to this section shall be held in 2055
confidence and shall not be subject to discovery or introduction 2056
in evidence in any federal or state civil action involving a 2057
physician assistant, supervising physician, or health care 2058
facility arising out of matters that are the subject of the 2059
reporting required by this section. The board may use the 2060
information obtained only as the basis for an investigation, as 2061
evidence in a disciplinary hearing against a physician assistant 2062
or supervising physician, or in any subsequent trial or appeal of 2063
a board action or order. 2064

The board may disclose the summaries and reports it receives 2065
under this section only to health care facility committees within 2066
or outside this state that are involved in credentialing or 2067
recredentialing a physician assistant or supervising physician or 2068
reviewing their privilege to practice within a particular 2069
facility. The board shall indicate whether or not the information 2070
has been verified. Information transmitted by the board shall be 2071
subject to the same confidentiality provisions as when maintained 2072
by the board. 2073

(G) Except for reports filed by an individual pursuant to 2074
division (B) of this section, the board shall send a copy of any 2075
reports or summaries it receives pursuant to this section to the 2076
physician assistant. The physician assistant shall have the right 2077
to file a statement with the board concerning the correctness or 2078
relevance of the information. The statement shall at all times 2079
accompany that part of the record in contention. 2080

(H) An individual or entity that reports to the board or 2081
refers an impaired physician assistant to a treatment provider 2082
approved by the board under section 4731.25 of the Revised Code 2083
shall not be subject to suit for civil damages as a result of the 2084
report, referral, or provision of the information. 2085

(I) In the absence of fraud or bad faith, a professional association or society of physician assistants that sponsors a committee or program to provide peer assistance to a physician assistant with substance abuse problems, a representative or agent of such a committee or program, and a member of the state medical board shall not be held liable in damages to any person by reason of actions taken to refer a physician assistant to a treatment provider approved under section 4731.25 of the Revised Code for examination or treatment.

Sec. 4730.33. The secretary of the state medical board shall enforce the laws relating to the practice of physician assistants. If the secretary has knowledge or notice of a violation of this chapter or the rules adopted under it, the secretary shall investigate the matter, and, upon probable cause appearing, file a complaint and prosecute the offender. When requested by the secretary, the prosecuting attorney of the proper county shall take charge of and conduct such prosecution.

In the prosecution of any person for violation of division (A) of section 4730.02 of the Revised Code it shall not be necessary to allege or prove want of a valid ~~certificate~~ license to practice as a physician assistant, but such matters shall be a matter of defense to be established by the accused.

Sec. 4730.38. (A) Except as provided in division (B) of this section, the physician assistant policy committee of the state medical board shall, at such times the committee determines to be necessary, submit to the board recommendations regarding physician-delegated prescriptive authority for physician assistants. The committee's recommendations shall address both of the following:

(1) Policy and procedures regarding physician-delegated

prescriptive authority, ~~including the issuance of certificates to~~ 2116
~~prescribe under this chapter;~~ 2117

(2) Any issue the committee considers necessary to assist the 2118
board in fulfilling its duty to adopt rules governing 2119
physician-delegated prescriptive authority, ~~including the issuance~~ 2120
~~of certificates to prescribe.~~ 2121

(B) Not less than every six months beginning on the first day 2122
of June following ~~the effective date of this amendment~~ March 22, 2123
2013, the committee shall review the physician assistant formulary 2124
the board adopts pursuant to division (A)(1) of section 4730.39 of 2125
the Revised Code and, to the extent it determines to be necessary, 2126
submit recommendations proposing changes to the formulary. 2127

(C) Recommendations submitted under this section are subject 2128
to the procedures and time frames specified in division (C) of 2129
section 4730.06 of the Revised Code. 2130

Sec. 4730.39. (A) The state medical board shall do both of 2131
the following: 2132

(1) Adopt a formulary listing the drugs and therapeutic 2133
devices by class and specific generic nomenclature that a 2134
physician may include in the physician-delegated prescriptive 2135
authority granted to a physician assistant who holds a ~~certificate~~ 2136
~~to prescribe under this chapter~~ valid prescriber number issued by 2137
the state medical board; 2138

(2) Adopt rules governing physician-delegated prescriptive 2139
authority for physician assistants, ~~including the issuance of~~ 2140
~~certificates to prescribe under this chapter.~~ 2141

(B) The board's rules governing physician-delegated 2142
prescriptive authority adopted pursuant to division (A)(2) of this 2143
section shall be adopted in accordance with Chapter 119. of the 2144
Revised Code and shall establish all of the following: 2145

(1) Requirements regarding the pharmacology courses that a physician assistant is required to complete to receive a certificate to prescribe;	2146 2147 2148
(2) Standards and procedures for the issuance and renewal of certificates to prescribe to physician assistants;	2149 2150
(3) Standards and procedures for the appropriate conduct of the provisional period that a physician assistant is required to complete pursuant to section 4730.45 of the Revised Code and for determining whether a physician assistant has successfully completed the provisional period;	2151 2152 2153 2154 2155
(4) A specific prohibition against prescribing any drug or device to perform or induce an abortion;	2156 2157
(5) (3) Standards and procedures to be followed by a physician assistant in personally furnishing samples of drugs or complete or partial supplies of drugs to patients under section 4730.43 of the Revised Code;	2158 2159 2160 2161
(6) (4) Any other requirements the board considers necessary to implement the provisions of this chapter regarding physician-delegated prescriptive authority and the issuance of certificates to prescribe.	2162 2163 2164 2165
(C)(1) After considering recommendations submitted by the physician assistant policy committee pursuant to sections 4730.06 and 4730.38 of the Revised Code, the board shall review either or both of the following, as appropriate according to the submitted recommendations:	2166 2167 2168 2169 2170
(a) The formulary the board adopts under division (A)(1) of this section;	2171 2172
(b) The rules the board adopts under division (A)(2) of this section regarding physician-delegated prescriptive authority.	2173 2174
(2) Based on its review, the board shall make any necessary	2175

modifications to the formulary or rules. 2176

Sec. 4730.41. (A) ~~A certificate to prescribe issued under~~ 2177
~~this chapter authorizes a~~ physician assistant who holds a valid 2178
prescriber number issued by the state medical board is authorized 2179
to prescribe and personally furnish drugs and therapeutic devices 2180
in the exercise of physician-delegated prescriptive authority. 2181

(B) In exercising physician-delegated prescriptive authority, 2182
a physician assistant is subject to all of the following: 2183

(1) The physician assistant shall exercise 2184
physician-delegated prescriptive authority only to the extent that 2185
the physician supervising the physician assistant has granted that 2186
authority. 2187

(2) The physician assistant shall comply with all conditions 2188
placed on the physician-delegated prescriptive authority, as 2189
specified by the supervising physician who is supervising the 2190
physician assistant in the exercise of physician-delegated 2191
prescriptive authority. 2192

(3) If the physician assistant possesses physician-delegated 2193
prescriptive authority for controlled substances, the physician 2194
assistant shall register with the federal drug enforcement 2195
administration. 2196

(4) If the physician assistant possesses physician-delegated 2197
prescriptive authority for schedule II controlled substances, the 2198
physician assistant shall comply with section 4730.411 of the 2199
Revised Code. 2200

Sec. 4730.42. (A) In granting physician-delegated 2201
prescriptive authority to a particular physician assistant who 2202
holds a ~~certificate to prescribe~~ valid prescriber number issued 2203
~~under this chapter by the state medical board,~~ the supervising 2204
physician is subject to all of the following: 2205

(1) The supervising physician shall not grant 2206
physician-delegated prescriptive authority for any drug or 2207
therapeutic device that is not listed on the physician assistant 2208
formulary adopted under section 4730.39 of the Revised Code as a 2209
drug or therapeutic device that may be included in the 2210
physician-delegated prescriptive authority granted to a physician 2211
assistant. 2212

(2) The supervising physician shall not grant 2213
physician-delegated prescriptive authority for any drug or device 2214
that may be used to perform or induce an abortion. 2215

(3) The supervising physician shall not grant 2216
physician-delegated prescriptive authority in a manner that 2217
exceeds the supervising physician's prescriptive authority, 2218
including the physician's authority to treat chronic pain with 2219
controlled substances and products containing tramadol as 2220
described in section 4731.052 of the Revised Code. 2221

(4) The supervising physician shall supervise the physician 2222
assistant in accordance with all of the following: 2223

(a) The supervision requirements specified in section 4730.21 2224
of the Revised Code and, ~~in the case of supervision provided~~ 2225
~~during a provisional period of physician-delegated prescriptive~~ 2226
~~authority, the supervision requirements specified in section~~ 2227
~~4730.45 of the Revised Code;~~ 2228

(b) ~~The physician supervisory plan approved for the~~ 2229
~~supervising physician or the policies of the health care facility~~ 2230
in which the physician and physician assistant are practicing+ 2231

~~(c) The supervision agreement approved under section 4730.19~~ 2232
~~of the Revised Code that applies to the supervising physician and~~ 2233
~~the physician assistant.~~ 2234

(B)(1) The supervising physician of a physician assistant may 2235
place conditions on the physician-delegated prescriptive authority 2236

granted to the physician assistant. If conditions are placed on 2237
that authority, the supervising physician shall maintain a written 2238
record of the conditions and make the record available to the 2239
state medical board on request. 2240

(2) The conditions that a supervising physician may place on 2241
the physician-delegated prescriptive authority granted to a 2242
physician assistant include the following: 2243

(a) Identification by class and specific generic nomenclature 2244
of drugs and therapeutic devices that the physician chooses not to 2245
permit the physician assistant to prescribe; 2246

(b) Limitations on the dosage units or refills that the 2247
physician assistant is authorized to prescribe; 2248

(c) Specification of circumstances under which the physician 2249
assistant is required to refer patients to the supervising 2250
physician or another physician when exercising physician-delegated 2251
prescriptive authority; 2252

~~(d) Responsibilities to be fulfilled by the physician in 2253
supervising the physician assistant that are not otherwise 2254
specified in the physician supervisory plan or otherwise required 2255
by this chapter. 2256~~

Sec. 4730.43. (A) A physician assistant who holds a 2257
~~certificate to prescribe valid prescriber number issued under this 2258
chapter by the state medical board~~ and has been granted 2259
physician-delegated prescriptive authority by a supervising 2260
physician may personally furnish to a patient samples of drugs and 2261
therapeutic devices that are included in the physician assistant's 2262
physician-delegated prescriptive authority, subject to all of the 2263
following: 2264

(1) The amount of the sample furnished shall not exceed a 2265
seventy-two-hour supply, except when the minimum available 2266

quantity of the sample is packaged in an amount that is greater 2267
than a seventy-two-hour supply, in which case the physician 2268
assistant may furnish the sample in the package amount. 2269

(2) No charge may be imposed for the sample or for furnishing 2270
it. 2271

(3) Samples of controlled substances may not be personally 2272
furnished. 2273

(B) A physician assistant who holds a ~~certificate to~~ 2274
~~prescribe~~ valid prescriber number issued ~~under this chapter~~ by the 2275
board and has been granted physician-delegated prescriptive 2276
authority by a supervising physician may personally furnish to a 2277
patient a complete or partial supply of the drugs and therapeutic 2278
devices that are included in the physician assistant's 2279
physician-delegated prescriptive authority, subject to all of the 2280
following: 2281

(1) The physician assistant shall personally furnish only 2282
antibiotics, antifungals, scabicides, contraceptives, prenatal 2283
vitamins, antihypertensives, drugs and devices used in the 2284
treatment of diabetes, drugs and devices used in the treatment of 2285
asthma, and drugs used in the treatment of dyslipidemia. 2286

(2) The physician assistant shall not furnish the drugs and 2287
devices in locations other than a health department operated by 2288
the board of health of a city or general health district or the 2289
authority having the duties of a board of health under section 2290
3709.05 of the Revised Code, a federally funded comprehensive 2291
primary care clinic, or a nonprofit health care clinic or program. 2292

(3) The physician assistant shall comply with all standards 2293
and procedures for personally furnishing supplies of drugs and 2294
devices, as established in rules adopted under section 4730.39 of 2295
the Revised Code. 2296

Sec. 4730.49. (A) To be eligible for renewal of a ~~certificate~~ 2297
~~to prescribe~~ license, an applicant shall complete every two years 2298
at least twelve hours of continuing education in pharmacology from 2299
an accredited institution recognized by the state medical board. 2300
Except as provided in division (B) of this section and in section 2301
5903.12 of the Revised Code, the continuing education shall be 2302
completed not later than the thirty-first day of January of each 2303
even-numbered year. 2304

(B) The state medical board shall provide for pro rata 2305
reductions by month of the number of hours of continuing education 2306
in pharmacology that is required to be completed for physician 2307
assistants who are in their first ~~certification~~ licensure period 2308
after completing the ~~provisional~~ period of supervision required 2309
under section ~~4730.45~~ 4730.12 of the Revised Code, who have been 2310
disabled due to illness or accident, or who have been absent from 2311
the country. The board shall adopt rules, in accordance with 2312
Chapter 119. of the Revised Code, as necessary to implement this 2313
division. 2314

~~(C) The continuing education required by this section is in~~ 2315
~~addition to the continuing education required under section~~ 2316
~~4730.14 of the Revised Code.~~ 2317

Sec. 4730.51. In the information the board maintains on the 2318
internet, the state medical board shall include the following: 2319

(A) The name of each physician assistant who holds a 2320
~~certificate to prescribe~~ license under this chapter; 2321

(B) For each physician assistant who holds a ~~certificate to~~ 2322
~~prescribe~~ valid prescriber number issued by the state medical 2323
board, the name of each supervising physician who has authority to 2324
grant physician-delegated prescriptive authority to the physician 2325
assistant. 2326

Sec. 4730.53. (A) As used in this section, "drug database"	2327
means the database established and maintained by the state board	2328
of pharmacy pursuant to section 4729.75 of the Revised Code.	2329
(B) The medical board shall adopt rules in accordance with	2330
Chapter 119. of the Revised Code that establish standards and	2331
procedures to be followed by a physician assistant who holds a	2332
certificate to prescribe issued <u>licensed</u> under this chapter	2333
regarding the review of patient information available through the	2334
drug database under division (A)(5) of section 4729.80 of the	2335
Revised Code.	2336
(C) This section and the rules adopted under it do not apply	2337
if the state board of pharmacy no longer maintains the drug	2338
database.	2339
Sec. 4765.01. As used in this chapter:	2340
(A) "First responder" means an individual who holds a	2341
current, valid certificate issued under section 4765.30 of the	2342
Revised Code to practice as a first responder.	2343
(B) "Emergency medical technician-basic" or "EMT-basic" means	2344
an individual who holds a current, valid certificate issued under	2345
section 4765.30 of the Revised Code to practice as an emergency	2346
medical technician-basic.	2347
(C) "Emergency medical technician-intermediate" or "EMT-I"	2348
means an individual who holds a current, valid certificate issued	2349
under section 4765.30 of the Revised Code to practice as an	2350
emergency medical technician-intermediate.	2351
(D) "Emergency medical technician-paramedic" or "paramedic"	2352
means an individual who holds a current, valid certificate issued	2353
under section 4765.30 of the Revised Code to practice as an	2354
emergency medical technician-paramedic.	2355

(E) "Ambulance" means any motor vehicle that is used, or is intended to be used, for the purpose of responding to emergency medical situations, transporting emergency patients, and administering emergency medical service to patients before, during, or after transportation.

(F) "Cardiac monitoring" means a procedure used for the purpose of observing and documenting the rate and rhythm of a patient's heart by attaching electrical leads from an electrocardiograph monitor to certain points on the patient's body surface.

(G) "Emergency medical service" means any of the services described in sections 4765.35, 4765.37, 4765.38, and 4765.39 of the Revised Code that are performed by first responders, emergency medical technicians-basic, emergency medical technicians-intermediate, and paramedics. "Emergency medical service" includes such services performed before or during any transport of a patient, including transports between hospitals and transports to and from helicopters.

(H) "Emergency medical service organization" means a public or private organization using first responders, EMTs-basic, EMTs-I, or paramedics, or a combination of first responders, EMTs-basic, EMTs-I, and paramedics, to provide emergency medical services.

(I) "Physician" means an individual who holds a current, valid certificate issued under Chapter 4731. of the Revised Code authorizing the practice of medicine and surgery or osteopathic medicine and surgery.

(J) "Registered nurse" means an individual who holds a current, valid license issued under Chapter 4723. of the Revised Code authorizing the practice of nursing as a registered nurse.

(K) "Volunteer" means a person who provides services either

for no compensation or for compensation that does not exceed the 2387
actual expenses incurred in providing the services or in training 2388
to provide the services. 2389

(L) "Emergency medical service personnel" means first 2390
responders, emergency medical service technicians-basic, emergency 2391
medical service technicians-intermediate, emergency medical 2392
service technicians-paramedic, and persons who provide medical 2393
direction to such persons. 2394

(M) "Hospital" has the same meaning as in section 3727.01 of 2395
the Revised Code. 2396

(N) "Trauma" or "traumatic injury" means severe damage to or 2397
destruction of tissue that satisfies both of the following 2398
conditions: 2399

(1) It creates a significant risk of any of the following: 2400

(a) Loss of life; 2401

(b) Loss of a limb; 2402

(c) Significant, permanent disfigurement; 2403

(d) Significant, permanent disability. 2404

(2) It is caused by any of the following: 2405

(a) Blunt or penetrating injury; 2406

(b) Exposure to electromagnetic, chemical, or radioactive 2407
energy; 2408

(c) Drowning, suffocation, or strangulation; 2409

(d) A deficit or excess of heat. 2410

(O) "Trauma victim" or "trauma patient" means a person who 2411
has sustained a traumatic injury. 2412

(P) "Trauma care" means the assessment, diagnosis, 2413
transportation, treatment, or rehabilitation of a trauma victim by 2414

emergency medical service personnel or by a physician, nurse, 2415
physician assistant, respiratory therapist, physical therapist, 2416
chiropractor, occupational therapist, speech-language pathologist, 2417
audiologist, or psychologist licensed to practice as such in this 2418
state or another jurisdiction. 2419

(Q) "Trauma center" means all of the following: 2420

(1) Any hospital that is verified by the American college of 2421
surgeons as an adult or pediatric trauma center; 2422

(2) Any hospital that is operating as an adult or pediatric 2423
trauma center under provisional status pursuant to section 2424
3727.101 of the Revised Code; 2425

(3) Until December 31, 2004, any hospital in this state that 2426
is designated by the director of health as a level II pediatric 2427
trauma center under section 3727.081 of the Revised Code; 2428

(4) Any hospital in another state that is licensed or 2429
designated under the laws of that state as capable of providing 2430
specialized trauma care appropriate to the medical needs of the 2431
trauma patient. 2432

(R) "Pediatric" means involving a patient who is less than 2433
sixteen years of age. 2434

(S) "Adult" means involving a patient who is not a pediatric 2435
patient. 2436

(T) "Geriatric" means involving a patient who is at least 2437
seventy years old or exhibits significant anatomical or 2438
physiological characteristics associated with advanced aging. 2439

(U) "Air medical organization" means an organization that 2440
provides emergency medical services, or transports emergency 2441
victims, by means of fixed or rotary wing aircraft. 2442

(V) "Emergency care" and "emergency facility" have the same 2443
meanings as in section 3727.01 of the Revised Code. 2444

(W) "Stabilize," except as it is used in division (B) of section 4765.35 of the Revised Code with respect to the manual stabilization of fractures, has the same meaning as in section 1753.28 of the Revised Code.

(X) "Transfer" has the same meaning as in section 1753.28 of the Revised Code.

(Y) "Firefighter" means any member of a fire department as defined in section 742.01 of the Revised Code.

(Z) "Volunteer firefighter" has the same meaning as in section 146.01 of the Revised Code.

(AA) "Part-time paid firefighter" means a person who provides firefighting services on less than a full-time basis, is routinely scheduled to be present on site at a fire station or other designated location for purposes of responding to a fire or other emergency, and receives more than nominal compensation for the provision of firefighting services.

(BB) "Physician assistant" ~~means an individual who holds a valid certificate to practice as a physician assistant issued under Chapter 4730.~~ has the same meaning as in section 1.64 of the Revised Code.

Sec. 4765.51. Nothing in this chapter prevents or restricts the practice, services, or activities of any registered nurse practicing within the scope of the registered nurse's practice.

Nothing in this chapter prevents or restricts the practice, services, or activities of any physician assistant practicing in accordance with a ~~physician supervisory plan approved~~ supervision agreement entered into under section ~~4730.17~~ 4730.16 of the Revised Code or the policies of the health care facility in which the physician assistant is practicing.

Sec. 5123.47. (A) As used in this section: 2474

(1) "In-home care" means the supportive services provided 2475
within the home of an individual with mental retardation or a 2476
developmental disability who receives funding for the services 2477
through a county board of developmental disabilities, including 2478
any recipient of residential services funded as home and 2479
community-based services, family support services provided under 2480
section 5126.11 of the Revised Code, or supported living provided 2481
in accordance with sections 5126.41 to 5126.47 of the Revised 2482
Code. "In-home care" includes care that is provided outside an 2483
individual's home in places incidental to the home, and while 2484
traveling to places incidental to the home, except that "in-home 2485
care" does not include care provided in the facilities of a county 2486
board of developmental disabilities or care provided in schools. 2487

(2) "Parent" means either parent of a child, including an 2488
adoptive parent but not a foster parent. 2489

(3) "Unlicensed in-home care worker" means an individual who 2490
provides in-home care but is not a health care professional. 2491

(4) "Family member" means a parent, sibling, spouse, son, 2492
daughter, grandparent, aunt, uncle, cousin, or guardian of the 2493
individual with mental retardation or a developmental disability 2494
if the individual with mental retardation or developmental 2495
disabilities lives with the person and is dependent on the person 2496
to the extent that, if the supports were withdrawn, another living 2497
arrangement would have to be found. 2498

(5) "Health care professional" means any of the following: 2499

(a) A dentist who holds a valid license issued under Chapter 2500
4715. of the Revised Code; 2501

(b) A registered or licensed practical nurse who holds a 2502
valid license issued under Chapter 4723. of the Revised Code; 2503

(c) An optometrist who holds a valid license issued under Chapter 4725. of the Revised Code;	2504 2505
(d) A pharmacist who holds a valid license issued under Chapter 4729. of the Revised Code;	2506 2507
(e) A person who holds a valid certificate issued under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, podiatric medicine and surgery, or a limited brand of medicine;	2508 2509 2510 2511
(f) A physician assistant who holds a valid certificate <u>license</u> issued under Chapter 4730. of the Revised Code;	2512 2513
(g) An occupational therapist or occupational therapy assistant or a physical therapist or physical therapist assistant who holds a valid license issued under Chapter 4755. of the Revised Code;	2514 2515 2516 2517
(h) A respiratory care professional who holds a valid license issued under Chapter 4761. of the Revised Code.	2518 2519
(6) "Health care task" means a task that is prescribed, ordered, delegated, or otherwise directed by a health care professional acting within the scope of the professional's practice.	2520 2521 2522 2523
(B) Except as provided in division (E) of this section, a family member of an individual with mental retardation or a developmental disability may authorize an unlicensed in-home care worker to administer oral and topical prescribed medications or perform other health care tasks as part of the in-home care the worker provides to the individual, if all of the following apply:	2524 2525 2526 2527 2528 2529
(1) The family member is the primary supervisor of the care.	2530
(2) The unlicensed in-home care worker has been selected by the family member or the individual receiving care and is under the direct supervision of the family member.	2531 2532 2533

(3) The unlicensed in-home care worker is providing the care 2534
through an employment or other arrangement entered into directly 2535
with the family member and is not otherwise employed by or under 2536
contract with a person or government entity to provide services to 2537
individuals with mental retardation and developmental 2538
disabilities. 2539

(C) A family member shall obtain a prescription, if 2540
applicable, and written instructions from a health care 2541
professional for the care to be provided to the individual. The 2542
family member shall authorize the unlicensed in-home care worker 2543
to provide the care by preparing a written document granting the 2544
authority. The family member shall provide the unlicensed in-home 2545
care worker with appropriate training and written instructions in 2546
accordance with the instructions obtained from the health care 2547
professional. 2548

(D) A family member who authorizes an unlicensed in-home care 2549
worker to administer oral and topical prescribed medications or 2550
perform other health care tasks retains full responsibility for 2551
the health and safety of the individual receiving the care and for 2552
ensuring that the worker provides the care appropriately and 2553
safely. No entity that funds or monitors the provision of in-home 2554
care may be held liable for the results of the care provided under 2555
this section by an unlicensed in-home care worker, including such 2556
entities as the county board of developmental disabilities and the 2557
department of developmental disabilities. 2558

An unlicensed in-home care worker who is authorized under 2559
this section by a family member to provide care to an individual 2560
may not be held liable for any injury caused in providing the 2561
care, unless the worker provides the care in a manner that is not 2562
in accordance with the training and instructions received or the 2563
worker acts in a manner that constitutes wanton or reckless 2564
misconduct. 2565

(E) A county board of developmental disabilities may evaluate 2566
the authority granted by a family member under this section to an 2567
unlicensed in-home care worker at any time it considers necessary 2568
and shall evaluate the authority on receipt of a complaint. If the 2569
board determines that a family member has acted in a manner that 2570
is inappropriate for the health and safety of the individual 2571
receiving the care, the authorization granted by the family member 2572
to an unlicensed in-home care worker is void, and the family 2573
member may not authorize other unlicensed in-home care workers to 2574
provide the care. In making such a determination, the board shall 2575
use appropriately licensed health care professionals and shall 2576
provide the family member an opportunity to file a complaint under 2577
section 5126.06 of the Revised Code. 2578

Section 2. That existing sections 1.64, 2133.211, 2305.113, 2579
4503.44, 4729.01, 4730.01, 4730.02, 4730.03, 4730.04, 4730.06, 2580
4730.08, 4730.091, 4730.092, 4730.10, 4730.101, 4730.11, 4730.12, 2581
4730.13, 4730.14, 4730.16, 4730.21, 4730.25, 4730.251, 4730.27, 2582
4730.28, 4730.31, 4730.32, 4730.33, 4730.38, 4730.39, 4730.41, 2583
4730.42, 4730.43, 4730.49, 4730.51, 4730.53, 4765.01, 4765.51, and 2584
5123.47 and sections 4730.081, 4730.09, 4730.15, 4730.17, 4730.18, 2585
4730.19, 4730.20, 4730.401, 4730.44, 4730.45, 4730.46, 4730.47, 2586
4730.48, 4730.50, and 4730.52 of the Revised Code are hereby 2587
repealed. 2588

Section 3. (A) The State Medical Board may continue to issue 2589
certificates to practice and certificates to prescribe pursuant to 2590
Chapter 4730. of the Revised Code for not longer than ninety days 2591
after the effective date of this section. Thereafter, the Board 2592
shall issue licenses in compliance with this act. 2593

(B) Existing certificates to practice and certificates to 2594
prescribe issued pursuant to Chapter 4730. of the Revised Code 2595
shall satisfy the requirements for licenses as created by this act 2596

until the thirty-first day of January of the first even-numbered	2597
year following the effective date of this section.	2598