

**As Reported by the House Health and Aging Committee**

**130th General Assembly**

**Regular Session**

**2013-2014**

**Sub. H. B. No. 412**

**Representative Gonzales**

**Cosponsors: Representatives Bishoff, Hood, Terhar, Young, Wachtmann,  
Schuring, Brown**

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**A B I L L**

To amend sections 1.64, 2133.211, 2151.3515, 1  
2305.113, 3701.92, 4503.44, 4729.01, 4730.01, 2  
4730.02, 4730.03, 4730.04, 4730.06, 4730.08, 3  
4730.091, 4730.10, 4730.101, 4730.11, 4730.12, 4  
4730.13, 4730.14, 4730.19, 4730.21, 4730.22, 5  
4730.25, 4730.251, 4730.27, 4730.28, 4730.31, 6  
4730.32, 4730.33, 4730.38, 4730.39, 4730.41, 7  
4730.42, 4730.43, 4730.49, 4730.51, 4730.53, 8  
4731.07, 4765.01, 4765.51, and 5123.47; to amend, 9  
for the purpose of adopting new section numbers as 10  
shown in parentheses, section 4730.091 (4730.201) 11  
and 4730.092 (4730.202); to enact new section 12  
4730.20 and sections 4730.111 and 4730.203; and to 13  
repeal sections 4730.081, 4730.09, 4730.15, 14  
4730.16, 4730.17, 4730.18, 4730.20, 4730.44, 15  
4730.45, 4730.46, 4730.47, 4730.48, 4730.50, and 16  
4730.52 of the Revised Code to revise the law 17  
governing the practice of physician assistants. 18

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

**Section 1.** That sections 1.64, 2133.211, 2151.3515, 2305.113, 19

3701.92, 4503.44, 4729.01, 4730.01, 4730.02, 4730.03, 4730.04, 20  
4730.06, 4730.08, 4730.091, 4730.10, 4730.101, 4730.11, 4730.12, 21  
4730.13, 4730.14, 4730.19, 4730.21, 4730.22, 4730.25, 4730.251, 22  
4730.27, 4730.28, 4730.31, 4730.32, 4730.33, 4730.38, 4730.39, 23  
4730.41, 4730.42, 4730.43, 4730.49, 4730.51, 4730.53, 4731.07, 24  
4765.01, 4765.51, and 5123.47 be amended, sections 4730.091 25  
(4730.201) and 4730.092 (4730.202) be amended for the purpose of 26  
adopting new section numbers as indicated in parentheses, and new 27  
section 4730.20 and sections 4730.111 and 4730.203 of the Revised 28  
Code be enacted to read as follows: 29

**Sec. 1.64.** As used in the Revised Code: 30

(A) "Certified nurse-midwife" means a registered nurse who 31  
holds a valid certificate of authority issued under Chapter 4723. 32  
of the Revised Code that authorizes the practice of nursing as a 33  
certified nurse-midwife in accordance with section 4723.43 of the 34  
Revised Code and rules adopted by the board of nursing. 35

(B) "Certified nurse practitioner" means a registered nurse 36  
who holds a valid certificate of authority issued under Chapter 37  
4723. of the Revised Code that authorizes the practice of nursing 38  
as a certified nurse practitioner in accordance with section 39  
4723.43 of the Revised Code and rules adopted by the board of 40  
nursing. 41

(C) "Clinical nurse specialist" means a registered nurse who 42  
holds a valid certificate of authority issued under Chapter 4723. 43  
of the Revised Code that authorizes the practice of nursing as a 44  
clinical nurse specialist in accordance with section 4723.43 of 45  
the Revised Code and rules adopted by the board of nursing. 46

(D) "Physician assistant" means an individual who ~~holds a~~ 47  
~~valid certificate to practice issued~~ is licensed under Chapter 48  
4730. of the Revised Code ~~authorizing the individual~~ to provide 49

services as a physician assistant to patients under the supervision, control, and direction of one or more physicians.

**Sec. 2133.211.** A person who holds a certificate of authority to practice as a certified nurse practitioner or clinical nurse specialist issued under ~~section 4723.42~~ Chapter 4723. of the Revised Code may take any action that may be taken by an attending physician under sections 2133.21 to 2133.26 of the Revised Code and has the immunity provided by section 2133.22 of the Revised Code if the action is taken pursuant to a standard care arrangement with a collaborating physician.

A person who holds a ~~certificate~~ license to practice as a physician assistant issued under Chapter 4730. of the Revised Code may take any action that may be taken by an attending physician under sections 2133.21 to 2133.26 of the Revised Code and has the immunity provided by section 2133.22 of the Revised Code if the action is taken pursuant to a ~~physician supervisory plan approved pursuant to~~ supervision agreement entered into under section ~~4730.17~~ 4730.19 of the Revised Code ~~or, including, if applicable~~ the policies of a health care facility in which the physician assistant is practicing.

**Sec. 2151.3515.** As used in sections 2151.3515 to 2151.3530 of the Revised Code:

(A) "Deserted child" means a child whose parent has voluntarily delivered the child to an emergency medical service worker, peace officer, or hospital employee without expressing an intent to return for the child.

(B) "Emergency medical service organization," "emergency medical technician-basic," "emergency medical technician-intermediate," "first responder," and "paramedic" have the same meanings as in section 4765.01 of the Revised Code.

(C) "Emergency medical service worker" means a first responder, emergency medical technician-basic, emergency medical technician-intermediate, or paramedic.

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

(E) "Hospital employee" means any of the following persons:

(1) A physician who has been granted privileges to practice at the hospital;

(2) A nurse, physician assistant, or nursing assistant employed by the hospital;

(3) An authorized person employed by the hospital who is acting under the direction of a physician described in division (E)(1) of this section.

(F) "Law enforcement agency" means an organization or entity made up of peace officers.

(G) "Nurse" means a person who is licensed under Chapter 4723. of the Revised Code to practice as a registered nurse or licensed practical nurse.

(H) "Nursing assistant" means a person designated by a hospital as a nurse aide or nursing assistant whose job is to aid nurses, physicians, and physician assistants in the performance of their duties.

(I) "Peace officer" means a sheriff, deputy sheriff, constable, police officer of a township or joint police district, marshal, deputy marshal, municipal police officer, or a state highway patrol trooper.

(J) "~~Physician" and "physician assistant" have the same meanings as in section 4730.01~~ means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine

and surgery. 110

(K) "Physician assistant" means an individual who holds a 111  
current, valid license to practice as a physician assistant issued 112  
under Chapter 4730. of the Revised Code. 113

**Sec. 2305.113.** (A) Except as otherwise provided in this 114  
section, an action upon a medical, dental, optometric, or 115  
chiropractic claim shall be commenced within one year after the 116  
cause of action accrued. 117

(B)(1) If prior to the expiration of the one-year period 118  
specified in division (A) of this section, a claimant who 119  
allegedly possesses a medical, dental, optometric, or chiropractic 120  
claim gives to the person who is the subject of that claim written 121  
notice that the claimant is considering bringing an action upon 122  
that claim, that action may be commenced against the person 123  
notified at any time within one hundred eighty days after the 124  
notice is so given. 125

(2) An insurance company shall not consider the existence or 126  
nonexistence of a written notice described in division (B)(1) of 127  
this section in setting the liability insurance premium rates that 128  
the company may charge the company's insured person who is 129  
notified by that written notice. 130

(C) Except as to persons within the age of minority or of 131  
unsound mind as provided by section 2305.16 of the Revised Code, 132  
and except as provided in division (D) of this section, both of 133  
the following apply: 134

(1) No action upon a medical, dental, optometric, or 135  
chiropractic claim shall be commenced more than four years after 136  
the occurrence of the act or omission constituting the alleged 137  
basis of the medical, dental, optometric, or chiropractic claim. 138

(2) If an action upon a medical, dental, optometric, or 139

chiropractic claim is not commenced within four years after the 140  
occurrence of the act or omission constituting the alleged basis 141  
of the medical, dental, optometric, or chiropractic claim, then, 142  
any action upon that claim is barred. 143

(D)(1) If a person making a medical claim, dental claim, 144  
optometric claim, or chiropractic claim, in the exercise of 145  
reasonable care and diligence, could not have discovered the 146  
injury resulting from the act or omission constituting the alleged 147  
basis of the claim within three years after the occurrence of the 148  
act or omission, but, in the exercise of reasonable care and 149  
diligence, discovers the injury resulting from that act or 150  
omission before the expiration of the four-year period specified 151  
in division (C)(1) of this section, the person may commence an 152  
action upon the claim not later than one year after the person 153  
discovers the injury resulting from that act or omission. 154

(2) If the alleged basis of a medical claim, dental claim, 155  
optometric claim, or chiropractic claim is the occurrence of an 156  
act or omission that involves a foreign object that is left in the 157  
body of the person making the claim, the person may commence an 158  
action upon the claim not later than one year after the person 159  
discovered the foreign object or not later than one year after the 160  
person, with reasonable care and diligence, should have discovered 161  
the foreign object. 162

(3) A person who commences an action upon a medical claim, 163  
dental claim, optometric claim, or chiropractic claim under the 164  
circumstances described in division (D)(1) or (2) of this section 165  
has the affirmative burden of proving, by clear and convincing 166  
evidence, that the person, with reasonable care and diligence, 167  
could not have discovered the injury resulting from the act or 168  
omission constituting the alleged basis of the claim within the 169  
three-year period described in division (D)(1) of this section or 170  
within the one-year period described in division (D)(2) of this 171

section, whichever is applicable.	172
(E) As used in this section:	173
(1) "Hospital" includes any person, corporation, association, board, or authority that is responsible for the operation of any hospital licensed or registered in the state, including, but not limited to, those that are owned or operated by the state, political subdivisions, any person, any corporation, or any combination of the state, political subdivisions, persons, and corporations. "Hospital" also includes any person, corporation, association, board, entity, or authority that is responsible for the operation of any clinic that employs a full-time staff of physicians practicing in more than one recognized medical specialty and rendering advice, diagnosis, care, and treatment to individuals. "Hospital" does not include any hospital operated by the government of the United States or any of its branches.	174 175 176 177 178 179 180 181 182 183 184 185 186
(2) "Physician" means a person who is licensed to practice medicine and surgery or osteopathic medicine and surgery by the state medical board or a person who otherwise is authorized to practice medicine and surgery or osteopathic medicine and surgery in this state.	187 188 189 190 191
(3) "Medical claim" means any claim that is asserted in any civil action against a physician, podiatrist, hospital, home, or residential facility, against any employee or agent of a physician, podiatrist, hospital, home, or residential facility, or against a licensed practical nurse, registered nurse, advanced practice registered nurse, physical therapist, physician assistant, emergency medical technician-basic, emergency medical technician-intermediate, or emergency medical technician-paramedic, and that arises out of the medical diagnosis, care, or treatment of any person. "Medical claim" includes the following:	192 193 194 195 196 197 198 199 200 201 202

(a) Derivative claims for relief that arise from the medical diagnosis, care, or treatment of a person;	203 204
(b) Claims that arise out of the medical diagnosis, care, or treatment of any person and to which either of the following applies:	205 206 207
(i) The claim results from acts or omissions in providing medical care.	208 209
(ii) The claim results from the hiring, training, supervision, retention, or termination of caregivers providing medical diagnosis, care, or treatment.	210 211 212
(c) Claims that arise out of the medical diagnosis, care, or treatment of any person and that are brought under section 3721.17 of the Revised Code.	213 214 215
(4) "Podiatrist" means any person who is licensed to practice podiatric medicine and surgery by the state medical board.	216 217
(5) "Dentist" means any person who is licensed to practice dentistry by the state dental board.	218 219
(6) "Dental claim" means any claim that is asserted in any civil action against a dentist, or against any employee or agent of a dentist, and that arises out of a dental operation or the dental diagnosis, care, or treatment of any person. "Dental claim" includes derivative claims for relief that arise from a dental operation or the dental diagnosis, care, or treatment of a person.	220 221 222 223 224 225
(7) "Derivative claims for relief" include, but are not limited to, claims of a parent, guardian, custodian, or spouse of an individual who was the subject of any medical diagnosis, care, or treatment, dental diagnosis, care, or treatment, dental operation, optometric diagnosis, care, or treatment, or chiropractic diagnosis, care, or treatment, that arise from that diagnosis, care, treatment, or operation, and that seek the	226 227 228 229 230 231 232



recovery of damages for any of the following:	233
(a) Loss of society, consortium, companionship, care,	234
assistance, attention, protection, advice, guidance, counsel,	235
instruction, training, or education, or any other intangible loss	236
that was sustained by the parent, guardian, custodian, or spouse;	237
(b) Expenditures of the parent, guardian, custodian, or	238
spouse for medical, dental, optometric, or chiropractic care or	239
treatment, for rehabilitation services, or for other care,	240
treatment, services, products, or accommodations provided to the	241
individual who was the subject of the medical diagnosis, care, or	242
treatment, the dental diagnosis, care, or treatment, the dental	243
operation, the optometric diagnosis, care, or treatment, or the	244
chiropractic diagnosis, care, or treatment.	245
(8) "Registered nurse" means any person who is licensed to	246
practice nursing as a registered nurse by the board of nursing.	247
(9) "Chiropractic claim" means any claim that is asserted in	248
any civil action against a chiropractor, or against any employee	249
or agent of a chiropractor, and that arises out of the	250
chiropractic diagnosis, care, or treatment of any person.	251
"Chiropractic claim" includes derivative claims for relief that	252
arise from the chiropractic diagnosis, care, or treatment of a	253
person.	254
(10) "Chiropractor" means any person who is licensed to	255
practice chiropractic by the state chiropractic board.	256
(11) "Optometric claim" means any claim that is asserted in	257
any civil action against an optometrist, or against any employee	258
or agent of an optometrist, and that arises out of the optometric	259
diagnosis, care, or treatment of any person. "Optometric claim"	260
includes derivative claims for relief that arise from the	261
optometric diagnosis, care, or treatment of a person.	262
(12) "Optometrist" means any person licensed to practice	263

optometry by the state board of optometry.	264
(13) "Physical therapist" means any person who is licensed to practice physical therapy under Chapter 4755. of the Revised Code.	265 266
(14) "Home" has the same meaning as in section 3721.10 of the Revised Code.	267 268
(15) "Residential facility" means a facility licensed under section 5123.19 of the Revised Code.	269 270
(16) "Advanced practice registered nurse" means any 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.	271 272 273 274 275
(17) "Licensed practical nurse" means any person who is licensed to practice nursing as a licensed practical nurse by the board of nursing pursuant to Chapter 4723. of the Revised Code.	276 277 278
(18) "Physician assistant" means any person who <del>holds a valid certificate to practice issued pursuant to</del> <u>is licensed as a physician assistant under</u> Chapter 4730. of the Revised Code.	279 280 281
(19) "Emergency medical technician-basic," "emergency medical technician-intermediate," and "emergency medical technician-paramedic" means any person who is certified under Chapter 4765. of the Revised Code as an emergency medical technician-basic, emergency medical technician-intermediate, or emergency medical technician-paramedic, whichever is applicable.	282 283 284 285 286 287
<b>Sec. 3701.92.</b> As used in sections 3701.921 to 3701.929 of the Revised Code:	288 289
(A) "Advanced practice registered nurse" has the same meaning as in section 4723.01 of the Revised Code.	290 291
(B) "Patient centered medical home education advisory group"	292

means the entity established under section 3701.924 of the Revised Code. 293  
294

(C) "Patient centered medical home education program" means 295  
the program established under section 3701.921 of the Revised Code 296  
and any pilot projects operated pursuant to that section. 297

(D) "Patient centered medical home education pilot project" 298  
means the pilot project established under section 3701.923 of the 299  
Revised Code. 300

(E) "Physician assistant" ~~has the same meaning as in section~~ 301  
~~4730.01~~ means any person who is licensed as a physician assistant 302  
under Chapter 4730. of the Revised Code. 303

**Sec. 4503.44.** (A) As used in this section and in section 304  
4511.69 of the Revised Code: 305

(1) "Person with a disability that limits or impairs the 306  
ability to walk" means any person who, as determined by a health 307  
care provider, meets any of the following criteria: 308

(a) Cannot walk two hundred feet without stopping to rest; 309

(b) Cannot walk without the use of, or assistance from, a 310  
brace, cane, crutch, another person, prosthetic device, 311  
wheelchair, or other assistive device; 312

(c) Is restricted by a lung disease to such an extent that 313  
the person's forced (respiratory) expiratory volume for one 314  
second, when measured by spirometry, is less than one liter, or 315  
the arterial oxygen tension is less than sixty millimeters of 316  
mercury on room air at rest; 317

(d) Uses portable oxygen; 318

(e) Has a cardiac condition to the extent that the person's 319  
functional limitations are classified in severity as class III or 320  
class IV according to standards set by the American heart 321

association;	322
(f) Is severely limited in the ability to walk due to an arthritic, neurological, or orthopedic condition;	323 324
(g) Is blind.	325
(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.	326 327 328 329 330 331 332 333
(3) "Health care provider" means a physician, physician assistant, advanced practice registered nurse, or chiropractor as defined in this section.	334 335 336
(4) "Physician" means a person licensed to practice medicine or surgery or osteopathic medicine and surgery under Chapter 4731. of the Revised Code.	337 338 339
(5) "Chiropractor" means a person licensed to practice chiropractic under Chapter 4734. of the Revised Code.	340 341
(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.	342 343 344 345 346
(7) "Physician assistant" means a person who <del>holds a</del> <del>certificate to practice as a physician assistant issued is</del> <u>licensed as a physician assistant</u> under Chapter 4730. of the Revised Code.	347 348 349 350
(B) Any organization or person with a disability that limits	351

or impairs the ability to walk may apply to the registrar of motor 352  
vehicles for a removable windshield placard or, if the person owns 353  
or leases a motor vehicle, the person may apply for the 354  
registration of any motor vehicle the person owns or leases. In 355  
addition to one or more sets of license plates or one placard, a 356  
person with a disability that limits or impairs the ability to 357  
walk is entitled to one additional placard, but only if the person 358  
applies separately for the additional placard, states the reasons 359  
why the additional placard is needed, and the registrar, in the 360  
registrar's discretion, determines that good and justifiable cause 361  
exists to approve the request for the additional placard. When a 362  
motor vehicle has been altered for the purpose of providing it 363  
with special equipment for a person with a disability that limits 364  
or impairs the ability to walk, but is owned or leased by someone 365  
other than such a person, the owner or lessee may apply to the 366  
registrar or a deputy registrar for registration under this 367  
section. The application for registration of a motor vehicle owned 368  
or leased by a person with a disability that limits or impairs the 369  
ability to walk shall be accompanied by a signed statement from 370  
the applicant's health care provider certifying that the applicant 371  
meets at least one of the criteria contained in division (A)(1) of 372  
this section and that the disability is expected to continue for 373  
more than six consecutive months. The application for a removable 374  
windshield placard made by a person with a disability that limits 375  
or impairs the ability to walk shall be accompanied by a 376  
prescription from the applicant's health care provider prescribing 377  
such a placard for the applicant, provided that the applicant 378  
meets at least one of the criteria contained in division (A)(1) of 379  
this section. The health care provider shall state on the 380  
prescription the length of time the health care provider expects 381  
the applicant to have the disability that limits or impairs the 382  
applicant's ability to walk. The application for a removable 383  
windshield placard made by an organization shall be accompanied by 384

such documentary evidence of regular transport of persons with 385  
disabilities that limit or impair the ability to walk by the 386  
organization as the registrar may require by rule and shall be 387  
completed in accordance with procedures that the registrar may 388  
require by rule. The application for registration of a motor 389  
vehicle that has been altered for the purpose of providing it with 390  
special equipment for a person with a disability that limits or 391  
impairs the ability to walk but is owned by someone other than 392  
such a person shall be accompanied by such documentary evidence of 393  
vehicle alterations as the registrar may require by rule. 394

(C) When an organization, a person with a disability that 395  
limits or impairs the ability to walk, or a person who does not 396  
have a disability that limits or impairs the ability to walk but 397  
owns a motor vehicle that has been altered for the purpose of 398  
providing it with special equipment for a person with a disability 399  
that limits or impairs the ability to walk first submits an 400  
application for registration of a motor vehicle under this section 401  
and every fifth year thereafter, the organization or person shall 402  
submit a signed statement from the applicant's health care 403  
provider, a completed application, and any required documentary 404  
evidence of vehicle alterations as provided in division (B) of 405  
this section, and also a power of attorney from the owner of the 406  
motor vehicle if the applicant leases the vehicle. Upon submission 407  
of these items, the registrar or deputy registrar shall issue to 408  
the applicant appropriate vehicle registration and a set of 409  
license plates and validation stickers, or validation stickers 410  
alone when required by section 4503.191 of the Revised Code. In 411  
addition to the letters and numbers ordinarily inscribed thereon, 412  
the license plates shall be imprinted with the international 413  
symbol of access. The license plates and validation stickers shall 414  
be issued upon payment of the regular license fee as prescribed 415  
under section 4503.04 of the Revised Code and any motor vehicle 416  
tax levied under Chapter 4504. of the Revised Code, and the 417

payment of a service fee equal to the amount specified in division 418  
(D) or (G) of section 4503.10 of the Revised Code. 419

(D)(1) Upon receipt of a completed and signed application for 420  
a removable windshield placard, a prescription as described in 421  
division (B) of this section, documentary evidence of regular 422  
transport of persons with disabilities that limit or impair the 423  
ability to walk, if required, and payment of a service fee equal 424  
to the amount specified in division (D) or (G) of section 4503.10 425  
of the Revised Code, the registrar or deputy registrar shall issue 426  
to the applicant a removable windshield placard, which shall bear 427  
the date of expiration on both sides of the placard and shall be 428  
valid until expired, revoked, or surrendered. Every removable 429  
windshield placard expires as described in division (D)(2) of this 430  
section, but in no case shall a removable windshield placard be 431  
valid for a period of less than sixty days. Removable windshield 432  
placards shall be renewable upon application as provided in 433  
division (B) of this section, and a service fee equal to the 434  
amount specified in division (D) or (G) of section 4503.10 of the 435  
Revised Code shall be charged for the renewal of a removable 436  
windshield placard. The registrar shall provide the application 437  
form and shall determine the information to be included thereon. 438  
The registrar also shall determine the form and size of the 439  
removable windshield placard, the material of which it is to be 440  
made, and any other information to be included thereon, and shall 441  
adopt rules relating to the issuance, expiration, revocation, 442  
surrender, and proper display of such placards. Any placard issued 443  
after October 14, 1999, shall be manufactured in a manner that 444  
allows the expiration date of the placard to be indicated on it 445  
through the punching, drilling, boring, or creation by any other 446  
means of holes in the placard. 447

(2) At the time a removable windshield placard is issued to a 448  
person with a disability that limits or impairs the ability to 449

walk, the registrar or deputy registrar shall enter into the 450  
records of the bureau of motor vehicles the last date on which the 451  
person will have that disability, as indicated on the accompanying 452  
prescription. Not less than thirty days prior to that date and all 453  
removable windshield placard renewal dates, the bureau shall send 454  
a renewal notice to that person at the person's last known address 455  
as shown in the records of the bureau, informing the person that 456  
the person's removable windshield placard will expire on the 457  
indicated date not to exceed five years from the date of issuance, 458  
and that the person is required to renew the placard by submitting 459  
to the registrar or a deputy registrar another prescription, as 460  
described in division (B) of this section, and by complying with 461  
the renewal provisions prescribed in division (D)(1) of this 462  
section. If such a prescription is not received by the registrar 463  
or a deputy registrar by that date, the placard issued to that 464  
person expires and no longer is valid, and this fact shall be 465  
recorded in the records of the bureau. 466

(3) At least once every year, on a date determined by the 467  
registrar, the bureau shall examine the records of the office of 468  
vital statistics, located within the department of health, that 469  
pertain to deceased persons, and also the bureau's records of all 470  
persons who have been issued removable windshield placards and 471  
temporary removable windshield placards. If the records of the 472  
office of vital statistics indicate that a person to whom a 473  
removable windshield placard or temporary removable windshield 474  
placard has been issued is deceased, the bureau shall cancel that 475  
placard, and note the cancellation in its records. 476

The office of vital statistics shall make available to the 477  
bureau all information necessary to enable the bureau to comply 478  
with division (D)(3) of this section. 479

(4) Nothing in this section shall be construed to require a 480  
person or organization to apply for a removable windshield placard 481



or special license plates if the parking card or special license 482  
plates issued to the person or organization under prior law have 483  
not expired or been surrendered or revoked. 484

(E)(1)(a) Any person with a disability that limits or impairs 485  
the ability to walk may apply to the registrar or a deputy 486  
registrar for a temporary removable windshield placard. The 487  
application for a temporary removable windshield placard shall be 488  
accompanied by a prescription from the applicant's health care 489  
provider prescribing such a placard for the applicant, provided 490  
that the applicant meets at least one of the criteria contained in 491  
division (A)(1) of this section and that the disability is 492  
expected to continue for six consecutive months or less. The 493  
health care provider shall state on the prescription the length of 494  
time the health care provider expects the applicant to have the 495  
disability that limits or impairs the applicant's ability to walk, 496  
which cannot exceed six months from the date of the prescription. 497  
Upon receipt of an application for a temporary removable 498  
windshield placard, presentation of the prescription from the 499  
applicant's health care provider, and payment of a service fee 500  
equal to the amount specified in division (D) or (G) of section 501  
4503.10 of the Revised Code, the registrar or deputy registrar 502  
shall issue to the applicant a temporary removable windshield 503  
placard. 504

(b) Any active-duty member of the armed forces of the United 505  
States, including the reserve components of the armed forces and 506  
the national guard, who has an illness or injury that limits or 507  
impairs the ability to walk may apply to the registrar or a deputy 508  
registrar for a temporary removable windshield placard. With the 509  
application, the person shall present evidence of the person's 510  
active-duty status and the illness or injury. Evidence of the 511  
illness or injury may include a current department of defense 512  
convalescent leave statement, any department of defense document 513

indicating that the person currently has an ill or injured 514  
casualty status or has limited duties, or a prescription from any 515  
health care provider prescribing the placard for the applicant. 516  
Upon receipt of the application and the necessary evidence, the 517  
registrar or deputy registrar shall issue the applicant the 518  
temporary removable windshield placard without the payment of any 519  
service fee. 520

(2) The temporary removable windshield placard shall be of 521  
the same size and form as the removable windshield placard, shall 522  
be printed in white on a red-colored background, and shall bear 523  
the word "temporary" in letters of such size as the registrar 524  
shall prescribe. A temporary removable windshield placard also 525  
shall bear the date of expiration on the front and back of the 526  
placard, and shall be valid until expired, surrendered, or 527  
revoked, but in no case shall such a placard be valid for a period 528  
of less than sixty days. The registrar shall provide the 529  
application form and shall determine the information to be 530  
included on it, provided that the registrar shall not require a 531  
health care provider's prescription or certification for a person 532  
applying under division (E)(1)(b) of this section. The registrar 533  
also shall determine the material of which the temporary removable 534  
windshield placard is to be made and any other information to be 535  
included on the placard and shall adopt rules relating to the 536  
issuance, expiration, surrender, revocation, and proper display of 537  
those placards. Any temporary removable windshield placard issued 538  
after October 14, 1999, shall be manufactured in a manner that 539  
allows for the expiration date of the placard to be indicated on 540  
it through the punching, drilling, boring, or creation by any 541  
other means of holes in the placard. 542

(F) If an applicant for a removable windshield placard is a 543  
veteran of the armed forces of the United States whose disability, 544  
as defined in division (A)(1) of this section, is 545

service-connected, the registrar or deputy registrar, upon receipt 546  
of the application, presentation of a signed statement from the 547  
applicant's health care provider certifying the applicant's 548  
disability, and presentation of such documentary evidence from the 549  
department of veterans affairs that the disability of the 550  
applicant meets at least one of the criteria identified in 551  
division (A)(1) of this section and is service-connected as the 552  
registrar may require by rule, but without the payment of any 553  
service fee, shall issue the applicant a removable windshield 554  
placard that is valid until expired, surrendered, or revoked. 555

(G) Upon a conviction of a violation of division (I), (J), or 556  
(K) of this section, the court shall report the conviction, and 557  
send the placard or parking card, if available, to the registrar, 558  
who thereupon shall revoke the privilege of using the placard or 559  
parking card and send notice in writing to the placardholder or 560  
cardholder at that holder's last known address as shown in the 561  
records of the bureau, and the placardholder or cardholder shall 562  
return the placard or card if not previously surrendered to the 563  
court, to the registrar within ten days following mailing of the 564  
notice. 565

Whenever a person to whom a removable windshield placard or 566  
parking card has been issued moves to another state, the person 567  
shall surrender the placard or card to the registrar; and whenever 568  
an organization to which a placard or card has been issued changes 569  
its place of operation to another state, the organization shall 570  
surrender the placard or card to the registrar. 571

(H) Subject to division (F) of section 4511.69 of the Revised 572  
Code, the operator of a motor vehicle displaying a removable 573  
windshield placard, temporary removable windshield placard, 574  
parking card, or the special license plates authorized by this 575  
section is entitled to park the motor vehicle in any special 576  
parking location reserved for persons with disabilities that limit 577

or impair the ability to walk, also known as handicapped parking 578  
spaces or disability parking spaces. 579

(I) No person or organization that is not eligible under 580  
division (B) or (E) of this section shall willfully and falsely 581  
represent that the person or organization is so eligible. 582

No person or organization shall display license plates issued 583  
under this section unless the license plates have been issued for 584  
the vehicle on which they are displayed and are valid. 585

(J) No person or organization to which a removable windshield 586  
placard or temporary removable windshield placard is issued shall 587  
do either of the following: 588

(1) Display or permit the display of the placard on any motor 589  
vehicle when having reasonable cause to believe the motor vehicle 590  
is being used in connection with an activity that does not include 591  
providing transportation for persons with disabilities that limit 592  
or impair the ability to walk; 593

(2) Refuse to return or surrender the placard, when required. 594

(K)(1) No person or organization to which a parking card is 595  
issued shall do either of the following: 596

(a) Display or permit the display of the parking card on any 597  
motor vehicle when having reasonable cause to believe the motor 598  
vehicle is being used in connection with an activity that does not 599  
include providing transportation for a person with a disability; 600

(b) Refuse to return or surrender the parking card, when 601  
required. 602

(2) As used in division (K) of this section: 603

(a) "Person with a disability" means any person who has lost 604  
the use of one or both legs or one or both arms, who is blind, 605  
deaf, or so severely disabled as to be unable to move about 606  
without the aid of crutches or a wheelchair, or whose mobility is 607

restricted by a permanent cardiovascular, pulmonary, or other 608  
disabling condition. 609

(b) "Organization" means any private organization or 610  
corporation, or any governmental board, agency, department, 611  
division, or office, that, as part of its business or program, 612  
transports persons with disabilities on a regular basis in a motor 613  
vehicle that has not been altered for the purposes of providing it 614  
with special equipment for use by persons with disabilities. 615

(L) If a removable windshield placard, temporary removable 616  
windshield placard, or parking card is lost, destroyed, or 617  
mutilated, the placardholder or cardholder may obtain a duplicate 618  
by doing both of the following: 619

(1) Furnishing suitable proof of the loss, destruction, or 620  
mutilation to the registrar; 621

(2) Paying a service fee equal to the amount specified in 622  
division (D) or (G) of section 4503.10 of the Revised Code. 623

Any placardholder or cardholder who loses a placard or card 624  
and, after obtaining a duplicate, finds the original, immediately 625  
shall surrender the original placard or card to the registrar. 626

(M) The registrar shall pay all fees received under this 627  
section for the issuance of removable windshield placards or 628  
temporary removable windshield placards or duplicate removable 629  
windshield placards or cards into the state treasury to the credit 630  
of the state bureau of motor vehicles fund created in section 631  
4501.25 of the Revised Code. 632

(N) In addition to the fees collected under this section, the 633  
registrar or deputy registrar shall ask each person applying for a 634  
removable windshield placard or temporary removable windshield 635  
placard or duplicate removable windshield placard or license plate 636  
issued under this section, whether the person wishes to make a 637  
two-dollar voluntary contribution to support rehabilitation 638

employment services. The registrar shall transmit the 639  
contributions received under this division to the treasurer of 640  
state for deposit into the rehabilitation employment fund, which 641  
is hereby created in the state treasury. A deputy registrar shall 642  
transmit the contributions received under this division to the 643  
registrar in the time and manner prescribed by the registrar. The 644  
contributions in the fund shall be used by the opportunities for 645  
Ohioans with disabilities agency to purchase services related to 646  
vocational evaluation, work adjustment, personal adjustment, job 647  
placement, job coaching, and community-based assessment from 648  
accredited community rehabilitation program facilities. 649

(O) For purposes of enforcing this section, every peace 650  
officer is deemed to be an agent of the registrar. Any peace 651  
officer or any authorized employee of the bureau of motor vehicles 652  
who, in the performance of duties authorized by law, becomes aware 653  
of a person whose placard or parking card has been revoked 654  
pursuant to this section, may confiscate that placard or parking 655  
card and return it to the registrar. The registrar shall prescribe 656  
any forms used by law enforcement agencies in administering this 657  
section. 658

No peace officer, law enforcement agency employing a peace 659  
officer, or political subdivision or governmental agency employing 660  
a peace officer, and no employee of the bureau is liable in a 661  
civil action for damages or loss to persons arising out of the 662  
performance of any duty required or authorized by this section. As 663  
used in this division, "peace officer" has the same meaning as in 664  
division (B) of section 2935.01 of the Revised Code. 665

(P) All applications for registration of motor vehicles, 666  
removable windshield placards, and temporary removable windshield 667  
placards issued under this section, all renewal notices for such 668  
items, and all other publications issued by the bureau that relate 669  
to this section shall set forth the criminal penalties that may be 670

imposed upon a person who violates any provision relating to 671  
special license plates issued under this section, the parking of 672  
vehicles displaying such license plates, and the issuance, 673  
procurement, use, and display of removable windshield placards and 674  
temporary removable windshield placards issued under this section. 675

(Q) Whoever violates this section is guilty of a misdemeanor 676  
of the fourth degree. 677

**Sec. 4729.01.** As used in this chapter: 678

(A) "Pharmacy," except when used in a context that refers to 679  
the practice of pharmacy, means any area, room, rooms, place of 680  
business, department, or portion of any of the foregoing where the 681  
practice of pharmacy is conducted. 682

(B) "Practice of pharmacy" means providing pharmacist care 683  
requiring specialized knowledge, judgment, and skill derived from 684  
the principles of biological, chemical, behavioral, social, 685  
pharmaceutical, and clinical sciences. As used in this division, 686  
"pharmacist care" includes the following: 687

(1) Interpreting prescriptions; 688

(2) Dispensing drugs and drug therapy related devices; 689

(3) Compounding drugs; 690

(4) Counseling individuals with regard to their drug therapy, 691  
recommending drug therapy related devices, and assisting in the 692  
selection of drugs and appliances for treatment of common diseases 693  
and injuries and providing instruction in the proper use of the 694  
drugs and appliances; 695

(5) Performing drug regimen reviews with individuals by 696  
discussing all of the drugs that the individual is taking and 697  
explaining the interactions of the drugs; 698

(6) Performing drug utilization reviews with licensed health 699

professionals authorized to prescribe drugs when the pharmacist 700  
determines that an individual with a prescription has a drug 701  
regimen that warrants additional discussion with the prescriber; 702

(7) Advising an individual and the health care professionals 703  
treating an individual with regard to the individual's drug 704  
therapy; 705

(8) Acting pursuant to a consult agreement with a physician 706  
authorized under Chapter 4731. of the Revised Code to practice 707  
medicine and surgery or osteopathic medicine and surgery, if an 708  
agreement has been established with the physician; 709

(9) Engaging in the administration of immunizations to the 710  
extent authorized by section 4729.41 of the Revised Code. 711

(C) "Compounding" means the preparation, mixing, assembling, 712  
packaging, and labeling of one or more drugs in any of the 713  
following circumstances: 714

(1) Pursuant to a prescription issued by a licensed health 715  
professional authorized to prescribe drugs; 716

(2) Pursuant to the modification of a prescription made in 717  
accordance with a consult agreement; 718

(3) As an incident to research, teaching activities, or 719  
chemical analysis; 720

(4) In anticipation of orders for drugs pursuant to 721  
prescriptions, based on routine, regularly observed dispensing 722  
patterns; 723

(5) Pursuant to a request made by a licensed health 724  
professional authorized to prescribe drugs for a drug that is to 725  
be used by the professional for the purpose of direct 726  
administration to patients in the course of the professional's 727  
practice, if all of the following apply: 728

(a) At the time the request is made, the drug is not 729



commercially available regardless of the reason that the drug is 730  
not available, including the absence of a manufacturer for the 731  
drug or the lack of a readily available supply of the drug from a 732  
manufacturer. 733

(b) A limited quantity of the drug is compounded and provided 734  
to the professional. 735

(c) The drug is compounded and provided to the professional 736  
as an occasional exception to the normal practice of dispensing 737  
drugs pursuant to patient-specific prescriptions. 738

(D) "Consult agreement" means an agreement to manage an 739  
individual's drug therapy that has been entered into by a 740  
pharmacist and a physician authorized under Chapter 4731. of the 741  
Revised Code to practice medicine and surgery or osteopathic 742  
medicine and surgery. 743

(E) "Drug" means: 744

(1) Any article recognized in the United States pharmacopoeia 745  
and national formulary, or any supplement to them, intended for 746  
use in the diagnosis, cure, mitigation, treatment, or prevention 747  
of disease in humans or animals; 748

(2) Any other article intended for use in the diagnosis, 749  
cure, mitigation, treatment, or prevention of disease in humans or 750  
animals; 751

(3) Any article, other than food, intended to affect the 752  
structure or any function of the body of humans or animals; 753

(4) Any article intended for use as a component of any 754  
article specified in division (E)(1), (2), or (3) of this section; 755  
but does not include devices or their components, parts, or 756  
accessories. 757

(F) "Dangerous drug" means any of the following: 758

(1) Any drug to which either of the following applies: 759

(a) Under the "Federal Food, Drug, and Cosmetic Act," 52 Stat. 1040 (1938), 21 U.S.C.A. 301, as amended, the drug is required to bear a label containing the legend "Caution: Federal law prohibits dispensing without prescription" or "Caution: Federal law restricts this drug to use by or on the order of a licensed veterinarian" or any similar restrictive statement, or the drug may be dispensed only upon a prescription;

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

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

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

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

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

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

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

(2) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner who holds a certificate to prescribe

issued under section 4723.48 of the Revised Code;	790
(3) An optometrist licensed under Chapter 4725. of the Revised Code to practice optometry under a therapeutic pharmaceutical agents certificate;	791 792 793
(4) A physician authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery;	794 795 796
(5) A physician assistant who holds a <del>certificate to prescribe valid prescriber number</del> issued <del>under Chapter 4730. of the Revised Code by the state medical board and has been granted</del> <u>physician-delegated prescriptive authority</u> ;	797 798 799 800
(6) A veterinarian licensed under Chapter 4741. of the Revised Code.	801 802
(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.	803 804 805 806
(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.	807 808 809
(L) "Retail sale" and "sale at retail" mean any sale other than a wholesale sale or sale at wholesale.	810 811
(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.	812 813 814 815 816
(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:	817 818 819

(1) The proprietary name of the drug product;	820
(2) The established (generic) name of the drug product;	821
(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 ingredient. The established name and quantity of each active ingredient are required if such a relevant strength cannot be so associated with a drug product containing more than one ingredient.	822 823 824 825 826 827 828 829
(4) The dosage form;	830
(5) The price charged for a specific quantity of the drug product. The stated price shall include all charges to the consumer, including, but not limited to, the cost of the drug product, professional fees, handling fees, if any, and a statement identifying professional services routinely furnished by the pharmacy. Any mailing fees and delivery fees may be stated separately without repetition. The information shall not be false or misleading.	831 832 833 834 835 836 837 838
(O) "Wholesale distributor of dangerous drugs" means a person engaged in the sale of dangerous drugs at wholesale and includes any agent or employee of such a person authorized by the person to engage in the sale of dangerous drugs at wholesale.	839 840 841 842
(P) "Manufacturer of dangerous drugs" means a person, other than a pharmacist, who manufactures dangerous drugs and who is engaged in the sale of those dangerous drugs within this state.	843 844 845
(Q) "Terminal distributor of dangerous drugs" means a person who is engaged in the sale of dangerous drugs at retail, or any person, other than a wholesale distributor or a pharmacist, who has possession, custody, or control of dangerous drugs for any purpose other than for that person's own use and consumption, and	846 847 848 849 850

includes pharmacies, hospitals, nursing homes, and laboratories 851  
and all other persons who procure dangerous drugs for sale or 852  
other distribution by or under the supervision of a pharmacist or 853  
licensed health professional authorized to prescribe drugs. 854

(R) "Promote to the public" means disseminating a 855  
representation to the public in any manner or by any means, other 856  
than by labeling, for the purpose of inducing, or that is likely 857  
to induce, directly or indirectly, the purchase of a dangerous 858  
drug at retail. 859

(S) "Person" includes any individual, partnership, 860  
association, limited liability company, or corporation, the state, 861  
any political subdivision of the state, and any district, 862  
department, or agency of the state or its political subdivisions. 863

(T) "Finished dosage form" has the same meaning as in section 864  
3715.01 of the Revised Code. 865

(U) "Generically equivalent drug" has the same meaning as in 866  
section 3715.01 of the Revised Code. 867

(V) "Animal shelter" means a facility operated by a humane 868  
society or any society organized under Chapter 1717. of the 869  
Revised Code or a dog pound operated pursuant to Chapter 955. of 870  
the Revised Code. 871

(W) "Food" has the same meaning as in section 3715.01 of the 872  
Revised Code. 873

(X) "Pain management clinic" has the same meaning as in 874  
section 4731.054 of the Revised Code. 875

**Sec. 4730.01.** As used in this chapter: 876

~~(A) "Physician assistant" means a skilled person qualified by 877  
academic and clinical training to provide services to patients as 878  
a physician assistant under the supervision, control, and 879  
direction of one or more physicians who are responsible for the 880~~

~~physician assistant's performance.~~ 881

~~(B)~~ "Physician" means an individual who is authorized under 882  
Chapter 4731. of the Revised Code to practice medicine and 883  
surgery, osteopathic medicine and surgery, or podiatric medicine 884  
and surgery. 885

~~(C)~~(B) "Health care facility" means any of the following: 886

(1) A hospital registered with the department of health under 887  
section 3701.07 of the Revised Code; 888

(2) A health care facility licensed by the department of 889  
health under section 3702.30 of the Revised Code; 890

(3) Any other facility designated by the state medical board 891  
in rules adopted pursuant to division (B)~~(2)~~ of section 4730.08 of 892  
the Revised Code. 893

~~(D) "Special services" means the health care services that a 894  
physician assistant may be authorized to provide under the special 895  
services portion of a physician supervisory plan approved under 896  
section 4730.17 of the Revised Code (C) "Service" means a medical 897  
activity that requires training in the diagnosis, treatment, or 898  
prevention of disease.~~ 899

**Sec. 4730.02.** (A) No person shall hold that person out as 900  
being able to function as a physician assistant, or use any words 901  
or letters indicating or implying that the person is a physician 902  
assistant, without a current, valid certificate license to 903  
practice as a physician assistant issued pursuant to this chapter. 904

(B) No person shall practice as a physician assistant without 905  
the supervision, control, and direction of a physician. 906

~~(C) No person shall act as the supervising physician of a 907  
physician assistant without having received the state medical 908  
board's approval of a supervision agreement entered into with the 909  
physician assistant.~~ 910

~~(D)~~ No person shall practice as a physician assistant without 911  
having entered into a supervision agreement ~~that has been approved~~ 912  
~~by the state medical board~~ with a supervising physician under 913  
section 4730.19 of the Revised Code. 914

~~(E)~~(D) No person acting as the supervising physician of a 915  
physician assistant shall authorize the physician assistant to 916  
perform services if either of the following is the case: 917

(1) The services are not within the physician's normal course 918  
of practice and expertise; 919

(2) The services are inconsistent with the ~~physician~~ 920  
~~supervisory plan approved by the state medical board for the~~ 921  
~~supervising physician or~~ supervision agreement under which the 922  
physician assistant is being supervised, including, if applicable, 923  
the policies of the health care facility in which the physician 924  
and physician assistant are practicing. 925

~~(F)~~ No person shall practice as a physician assistant in a 926  
manner that is inconsistent with the physician supervisory plan 927  
approved for the physician who is responsible for supervising the 928  
physician assistant or the policies of the health care facility in 929  
which the physician assistant is practicing. 930

~~(G)~~(E) No person practicing as a physician assistant shall 931  
prescribe any drug or device to perform or induce an abortion, or 932  
otherwise perform or induce an abortion. 933

~~(H)~~(F) No person shall advertise to provide services as a 934  
physician assistant, except for the purpose of seeking employment. 935

~~(I)~~(G) No person practicing as a physician assistant shall 936  
fail to wear at all times when on duty a placard, plate, or other 937  
device identifying that person as a "physician assistant." 938

**Sec. 4730.03.** Nothing in this chapter shall: 939

(A) Be construed to affect or interfere with the performance 940

of duties of any medical personnel who are either of the 941  
following: 942

(1) In active service in the army, navy, coast guard, marine 943  
corps, air force, public health service, or marine hospital 944  
service of the United States while so serving; 945

(2) Employed by the veterans administration of the United 946  
States while so employed; 947

(B) Prevent any person from performing any of the services a 948  
physician assistant may be authorized to perform, if the person's 949  
professional scope of practice established under any other chapter 950  
of the Revised Code authorizes the person to perform the services; 951

(C) Prohibit a physician from delegating responsibilities to 952  
any nurse or other qualified person who does not hold a 953  
~~certificate~~ license to practice as a physician assistant, provided 954  
that the individual does not hold the individual out to be a 955  
physician assistant; 956

(D) Be construed as authorizing a physician assistant 957  
independently to order or direct the execution of procedures or 958  
techniques by a registered nurse or licensed practical nurse in 959  
the care and treatment of a person in any setting, except to the 960  
extent that the physician assistant is authorized to do so by ~~the~~ 961  
~~physician supervisory plan approved under section 4730.17 of the~~ 962  
~~Revised Code for the~~ a physician who is responsible for 963  
supervising the physician assistant ~~or~~ and, if applicable, the 964  
policies of the health care facility in which the physician 965  
assistant is practicing; 966

(E) Authorize a physician assistant to engage in the practice 967  
of optometry, except to the extent that the physician assistant is 968  
authorized by a supervising physician acting in accordance with 969  
this chapter to perform routine visual screening, provide medical 970  
care prior to or following eye surgery, or assist in the care of 971



diseases of the eye; 972

(F) Be construed as authorizing a physician assistant to 973  
prescribe any drug or device to perform or induce an abortion, or 974  
as otherwise authorizing a physician assistant to perform or 975  
induce an abortion. 976

**Sec. 4730.04.** (A) As used in this section: 977

(1) "Disaster" means any imminent threat or actual occurrence 978  
of widespread or severe damage to or loss of property, personal 979  
hardship or injury, or loss of life that results from any natural 980  
phenomenon or act of a human. 981

(2) "Emergency" means an occurrence or event that poses an 982  
imminent threat to the health or life of a human. 983

(B) Nothing in this chapter prohibits any of the following 984  
individuals from providing medical care, to the extent the 985  
individual is able, in response to a need for medical care 986  
precipitated by a disaster or emergency: 987

(1) An individual who holds a ~~certificate~~ license to practice 988  
as a physician assistant issued under this chapter; 989

(2) An individual licensed or authorized to practice as a 990  
physician assistant in another state; 991

(3) An individual credentialed or employed as a physician 992  
assistant by an agency, office, or other instrumentality of the 993  
federal government. 994

(C) For purposes of the medical care provided by a physician 995  
assistant pursuant to division (B)(1) of this section, both of the 996  
following apply notwithstanding any supervision requirement of 997  
this chapter to the contrary: 998

(1) The physician who supervises the physician assistant 999  
pursuant to a ~~physician supervisory plan approved by the state~~ 1000

~~medical board under section 4730.17 of the Revised Code~~ 1001  
~~supervision agreement entered into under section 4730.19 of the~~ 1002  
~~Revised Code~~ is not required to meet the supervision requirements 1003  
established under this chapter. 1004

(2) The physician designated as the medical director of the 1005  
disaster or emergency may supervise the medical care provided by 1006  
the physician assistant. 1007

**Sec. 4730.06.** (A) The physician assistant policy committee of 1008  
the state medical board shall review, and shall submit to the 1009  
board recommendations concerning, all of the following: 1010

(1) Requirements for ~~issuance of certificates~~ issuing a 1011  
license to practice as a physician assistant, including the 1012  
educational requirements that must be met to receive a ~~certificate~~ 1013  
license to practice; 1014

(2) Existing and proposed rules pertaining to the practice of 1015  
physician assistants, the supervisory relationship between 1016  
physician assistants and supervising physicians, and the 1017  
administration and enforcement of this chapter; 1018

(3) In accordance with section 4730.38 of the Revised Code, 1019  
physician-delegated prescriptive authority for physician 1020  
assistants and proposed changes to the physician assistant 1021  
formulary the board adopts pursuant to division (A)(1) of section 1022  
4730.39 of the Revised Code; 1023

(4) Application procedures and forms for ~~certificates a~~ 1024  
license to practice as a physician assistant, ~~physician~~ 1025  
~~supervisory plans, and supervision agreements;~~ 1026

(5) Fees required by this chapter for issuance and renewal of 1027  
~~certificates a~~ license to practice as a physician assistant; 1028

(6) ~~Criteria to be included in applications submitted to the~~ 1029  
~~board for approval of physician supervisory plans, including~~ 1030

~~criteria to be included in applications for approval to delegate to physician assistants the performance of special services;~~ 1031  
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~~(7) Criteria to be included in supervision agreements submitted to the board for approval and renewal of the board's approval;~~ 1033  
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~~(8) Any issue the board asks the committee to consider.~~ 1036

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

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~~(1) Quality quality assurance activities to be performed by a supervising physician and physician assistant under a quality assurance system established pursuant to division (F) of section 4730.21 of the Revised Code;~~ 1041  
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~~(2) The development and approval of one or more model physician supervisory plans and one or more models for a special services portion of the one or more model physician supervisory plans. The committee may submit recommendations for model plans that reflect various medical specialties.~~ 1045  
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(C) The board shall take into consideration all recommendations submitted by the committee. Not later than ninety days after receiving a recommendation from the committee, the board shall approve or disapprove the recommendation and notify the committee of its decision. If a recommendation is disapproved, the board shall inform the committee of its reasons for making that decision. The committee may resubmit the recommendation after addressing the concerns expressed by the board and modifying the disapproved recommendation accordingly. Not later than ninety days after receiving a resubmitted recommendation, the board shall approve or disapprove the recommendation. There is no limit on the number of times the committee may resubmit a recommendation for

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consideration by the board. 1062

(D)(1) Except as provided in division (D)(2) of this section, 1063  
the board may not take action regarding a matter that is subject 1064  
to the committee's review under division (A) or (B) of this 1065  
section unless the committee has made a recommendation to the 1066  
board concerning the matter. 1067

(2) If the board submits to the committee a request for a 1068  
recommendation regarding a matter that is subject to the 1069  
committee's review under division (A) or (B) of this section, and 1070  
the committee does not provide a recommendation before the 1071  
sixty-first day after the request is submitted, the board may take 1072  
action regarding the matter without a recommendation. 1073

**Sec. 4730.08.** (A) A ~~certificate~~ license to practice as a 1074  
physician assistant issued under this chapter authorizes the 1075  
holder to practice as a physician assistant, ~~subject to all of the~~ 1076  
~~following as follows:~~ 1077

(1) The physician assistant shall practice only under the 1078  
supervision, control, and direction of a physician with whom the 1079  
physician assistant has entered into a supervision agreement 1080  
~~approved by the state medical board~~ under section ~~4730.17~~ 4730.19 1081  
of the Revised Code. 1082

(2) ~~When the physician assistant practices outside a health~~ 1083  
~~care facility, the~~ The physician assistant shall practice in 1084  
accordance with the ~~physician supervisory plan approved under~~ 1085  
~~section 4730.17 of the Revised Code for~~ supervision agreement 1086  
entered into with the physician who is responsible for supervising 1087  
the physician assistant. 1088

(3) ~~When the physician assistant practices within a health~~ 1089  
~~care facility, the physician assistant shall practice in~~ 1090  
~~accordance with, including, if applicable, the policies of the~~ 1091

health care facility in which the physician assistant is 1092  
practicing. 1093

~~(B) For purposes of division (A) of this section and all~~ 1094  
~~other provisions of this chapter pertaining to the practice of a~~ 1095  
~~physician assistant under the policies of a health care facility,~~ 1096  
~~both of the following apply:~~ 1097

~~(1) A physician who is supervising a physician assistant~~ 1098  
~~within a health care facility may impose limitations on the~~ 1099  
~~physician assistant's practice that are in addition to any~~ 1100  
~~limitations applicable under the policies of the facility.~~ 1101

~~(2) The state medical board may, subject to division (D) of~~ 1102  
~~section 4730.06 of the Revised Code, adopt rules designating~~ 1103  
~~facilities to be included as health care facilities that are in~~ 1104  
~~addition to the facilities specified in divisions ~~(C)~~(B)(1) and~~ 1105  
~~(2) of section 4730.01 of the Revised Code. The Any rules adopted~~ 1106  
~~shall be adopted in accordance with Chapter 119. of the Revised~~ 1107  
~~Code.~~ 1108

**Sec. 4730.10.** (A) An individual seeking a certificate license 1109  
to practice as a physician assistant shall file with the state 1110  
medical board a written application on a form prescribed and 1111  
supplied by the board. The application shall include all of the 1112  
following: 1113

(1) The applicant's name, residential address, business 1114  
address, if any, and social security number; 1115

(2) Satisfactory proof that the applicant meets the age and 1116  
moral character requirements specified in divisions (A)(1) and (2) 1117  
of section 4730.11 of the Revised Code; 1118

(3) Satisfactory proof that the applicant meets either the 1119  
educational requirements specified in division (B)(1) or (2) of 1120  
section 4730.11 of the Revised Code or the educational or other 1121

applicable requirements specified in division (C)(1), (2), or (3) 1122  
of that section; 1123

(4) Any other information the board requires. 1124

(B) At the time of making application for a ~~certificate~~ 1125  
license to practice, the applicant shall pay the board a fee of 1126  
~~two~~ five hundred dollars, no part of which shall be returned. The 1127  
fees shall be deposited in accordance with section 4731.24 of the 1128  
Revised Code. 1129

**Sec. 4730.101.** In addition to any other eligibility 1130  
requirement set forth in this chapter, each applicant for a 1131  
~~certificate~~ license to practice as a physician assistant shall 1132  
comply with sections 4776.01 to 4776.04 of the Revised Code. The 1133  
state medical board shall not grant to an applicant a ~~certificate~~ 1134  
license to practice as a physician assistant unless the board, in 1135  
its discretion, decides that the results of the criminal records 1136  
check do not make the applicant ineligible for a ~~certificate~~ 1137  
license issued pursuant to section 4730.12 of the Revised Code. 1138

**Sec. 4730.11.** (A) To be eligible to receive a ~~certificate~~ 1139  
license to practice as a physician assistant, all of the following 1140  
apply to an applicant: 1141

(1) The applicant shall be at least eighteen years of age. 1142

(2) The applicant shall be of good moral character. 1143

(3) The applicant shall hold current certification by the 1144  
national commission on certification of physician assistants or a 1145  
successor organization that is recognized by the state medical 1146  
board. 1147

(4) The applicant shall meet either of the following 1148  
requirements: 1149

(a) The educational requirements specified in division (B)(1) 1150

or (2) of this section; 1151

(b) The educational or other applicable requirements 1152  
specified in division (C)(1), (2), or (3) of this section. 1153

(B) Effective January 1, 2008, for purposes of division 1154  
(A)(4)(a) of this section, an applicant shall meet either of the 1155  
following educational requirements: 1156

(1) The applicant shall hold a master's or higher degree 1157  
obtained from a program accredited by the accreditation review 1158  
commission on education for the physician assistant or a 1159  
predecessor or successor organization recognized by the board. 1160

(2) The applicant shall hold both of the following degrees: 1161

(a) A degree other than a master's or higher degree obtained 1162  
from a program accredited by the accreditation review commission 1163  
on education for the physician assistant or a predecessor or 1164  
successor organization recognized by the board; 1165

(b) A master's or higher degree in a course of study with 1166  
clinical relevance to the practice of physician assistants and 1167  
obtained from a program accredited by a regional or specialized 1168  
and professional accrediting agency recognized by the council for 1169  
higher education accreditation. 1170

(C) For purposes of division (A)(4)(b) of this section, an 1171  
applicant shall present evidence satisfactory to the board of 1172  
meeting one of the following requirements in lieu of meeting the 1173  
educational requirements specified in division (B)(1) or (2) of 1174  
this section: 1175

(1) The applicant shall hold a current, valid license or 1176  
other form of authority to practice as a physician assistant 1177  
issued by another jurisdiction ~~prior to January 1, 2008~~ and have 1178  
been in active practice in any jurisdiction throughout the 1179  
three-year period immediately preceding the date of application. 1180

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

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

~~(a) Hold~~ hold a degree obtained from a program accredited by the accreditation review commission on education for the physician assistant; and meet either of the following experience requirements:

~~(b)~~(a) 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.

(b) 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, in the military, or in the public health service, 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)(1) 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 1212  
assistant if the individual received the ~~certificate~~ license 1213  
without holding a master's or higher degree as provided in either 1214  
of the following, but the license will not include the authority 1215  
to exercise physician-delegated prescriptive authority: 1216

~~(1)~~(a) Before the educational requirements specified in 1217  
division (B)(1) or (2) of this section became effective January 1, 1218  
2008; 1219

~~(2)~~(b) By meeting the educational or other applicable 1220  
requirements specified in division (C)(1), (2), or (3) of this 1221  
section. 1222

(2) On application of an individual who received a license 1223  
without having first obtained a master's or higher degree, the 1224  
board shall grant the individual the authority to exercise 1225  
physician-delegated prescriptive authority if the individual 1226  
provides evidence satisfactory to the board of having obtained a 1227  
master's or higher degree from either of the following: 1228

(a) A program accredited by the accreditation review 1229  
commission on education for the physician assistant or a 1230  
predecessor or successor organization recognized by the board; 1231

(b) A program accredited by a regional or specialized and 1232  
professional accrediting agency recognized by the council for 1233  
higher education accreditation, if the degree is in a course of 1234  
study with clinical relevance to the practice of physician 1235  
assistants. 1236

Sec. 4730.111. A physician assistant whose certification by 1237  
the national commission on certification of physician assistants 1238  
or a successor organization recognized by the state medical board 1239  
is suspended or revoked shall give notice of that occurrence to 1240  
the board not later than fourteen days after the physician 1241

assistant receives notice of the change in certification status. A 1242  
physician assistant who fails to renew the certification shall 1243  
notify the board not later than fourteen days after the 1244  
certification expires. 1245

**Sec. 4730.12.** (A) The state medical board shall review ~~all~~ 1246  
~~applications~~ each application received under section 4730.10 of 1247  
the Revised Code for ~~certificates~~ a license to practice as a 1248  
physician assistant. Not later than sixty days after receiving a 1249  
complete application, the board shall determine whether an 1250  
applicant meets the requirements to receive a ~~certificate~~ license 1251  
to practice, as specified in section 4730.11 of the Revised Code. 1252  
An affirmative vote of not fewer than six members of the board is 1253  
required to determine that an applicant meets the requirements to 1254  
receive a ~~certificate~~ license to practice as a physician 1255  
assistant. 1256

(B) If the board determines that an applicant meets the 1257  
requirements to receive the ~~certificate~~ license, the secretary of 1258  
the board shall register the applicant as a physician assistant 1259  
and issue to the applicant a ~~certificate~~ license to practice as a 1260  
physician assistant. 1261

(C)(1) During the first five hundred hours of the first one 1262  
thousand hours of a physician assistant's exercise of 1263  
physician-delegated prescriptive authority, the physician 1264  
assistant shall exercise that authority only under the on-site 1265  
supervision of a supervising physician. 1266

(2) A physician assistant shall be excused from the 1267  
requirement established in division (C)(1) of this section if 1268  
prior to application the physician assistant held a prescriber 1269  
number, or the equivalent, from another jurisdiction and practiced 1270  
with prescriptive authority in that jurisdiction for not less than 1271  
one thousand hours. 1272

(3) A record of a physician assistant's completion of the hours required by division (C)(1) of this section or issuance of a prescriber number or equivalent by another jurisdiction shall be kept on file by a supervising physician of the physician assistant. The record shall be made available for inspection by the board. 1273  
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**Sec. 4730.13.** Upon application by the holder of a ~~certificate~~ license to practice as a physician assistant, the state medical board shall issue a duplicate ~~certificate~~ license to replace one that is missing or damaged, to reflect a name change, or for any other reasonable cause. The fee for a duplicate ~~certificate~~ license shall be thirty-five dollars. All fees collected under this section shall be deposited in accordance with section 4731.24 of the Revised Code. 1279  
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**Sec. 4730.14.** (A) A ~~certificate~~ license to practice as a physician assistant shall expire biennially and may be renewed in accordance with this section. A person seeking to renew a ~~certificate~~ license to practice as a physician assistant shall, on or before the thirty-first day of January of each even-numbered year, apply for renewal of the certificate. The state medical board shall send renewal notices at least one month prior to the expiration date. 1287  
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Applications shall be submitted to the board on forms the board shall prescribe and furnish. Each application shall be accompanied by a biennial renewal fee of ~~one~~ two hundred dollars. The board shall deposit the fees in accordance with section 4731.24 of the Revised Code. 1295  
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The applicant shall report any criminal offense that constitutes grounds for refusing to issue a ~~certificate~~ license to practice under section 4730.25 of the Revised Code to which the 1300  
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applicant has pleaded guilty, of which the applicant has been 1303  
found guilty, or for which the applicant has been found eligible 1304  
for intervention in lieu of conviction, since last signing an 1305  
application for a ~~certificate~~ license to practice as a physician 1306  
assistant. 1307

(B) To be eligible for renewal, a physician assistant shall 1308  
certify to the board both of the following: 1309

(1) That the physician assistant has maintained certification 1310  
by the national commission on certification of physician 1311  
assistants or a successor organization that is recognized by the 1312  
board by meeting the standards to hold current certification from 1313  
the commission or its successor, including completion of 1314  
continuing medical education requirements and passing periodic 1315  
recertification examinations; 1316

(2) Except as provided in division (F) of this section and 1317  
section 5903.12 of the Revised Code, that the physician assistant 1318  
has completed during the current certification period not less 1319  
than one hundred hours of continuing medical education acceptable 1320  
to the board. 1321

(C) The board shall adopt rules in accordance with Chapter 1322  
119. of the Revised Code specifying the types of continuing 1323  
medical education that must be completed to fulfill the board's 1324  
requirements under division (B)(2) of this section. Except when 1325  
additional continuing medical education is required to renew a 1326  
certificate to prescribe, as specified in section 4730.49 of the 1327  
Revised Code, the board shall not adopt rules that require a 1328  
physician assistant to complete in any certification period more 1329  
than one hundred hours of continuing medical education acceptable 1330  
to the board. In fulfilling the board's requirements, a physician 1331  
assistant may use continuing medical education courses or programs 1332  
completed to maintain certification by the national commission on 1333  
certification of physician assistants or a successor organization 1334

that is recognized by the board if the standards for acceptable 1335  
courses and programs of the commission or its successor are at 1336  
least equivalent to the standards established by the board. 1337

(D) If an applicant submits a complete renewal application 1338  
and qualifies for renewal pursuant to division (B) of this 1339  
section, the board shall issue to the applicant a renewed 1340  
~~certificate~~ license to practice as a physician assistant. 1341

(E) The board may require a random sample of physician 1342  
assistants to submit materials documenting certification by the 1343  
national commission on certification of physician assistants or a 1344  
successor organization that is recognized by the board and 1345  
completion of the required number of hours of continuing medical 1346  
education. 1347

(F) The board shall provide for pro rata reductions by month 1348  
of the number of hours of continuing education that must be 1349  
completed for individuals who are in their first certification 1350  
period, who have been disabled due to illness or accident, or who 1351  
have been absent from the country. The board shall adopt rules, in 1352  
accordance with Chapter 119. of the Revised Code, as necessary to 1353  
implement this division. 1354

(G)(1) A ~~certificate~~ license to practice that is not renewed 1355  
on or before its expiration date is automatically suspended on its 1356  
expiration date. Continued practice after suspension of the 1357  
certificate shall be considered as practicing in violation of 1358  
division (A) of section 4730.02 of the Revised Code. 1359

(2) If a ~~certificate~~ license has been suspended pursuant to 1360  
division (G)(1) of this section for two years or less, it may be 1361  
reinstated. The board shall reinstate a ~~certificate~~ license 1362  
suspended for failure to renew upon an applicant's submission of a 1363  
renewal application, the biennial renewal fee, and any applicable 1364  
monetary penalty. 1365

If a ~~certificate~~ license has been suspended pursuant to 1366  
division (G)(1) of this ~~division~~ section for more than two years, 1367  
it may be restored. In accordance with section 4730.28 of the 1368  
Revised Code, the board may restore a ~~certificate~~ license 1369  
suspended for failure to renew upon an applicant's submission of a 1370  
restoration application, the biennial renewal fee, and any 1371  
applicable monetary penalty and compliance with sections 4776.01 1372  
to 4776.04 of the Revised Code. The board shall not restore to an 1373  
applicant a ~~certificate~~ license to practice as a physician 1374  
assistant unless the board, in its discretion, decides that the 1375  
results of the criminal records check do not make the applicant 1376  
ineligible for a ~~certificate~~ license issued pursuant to section 1377  
4730.12 of the Revised Code. 1378

The penalty for reinstatement shall be fifty dollars and the 1379  
penalty for restoration shall be one hundred dollars. The board 1380  
shall deposit penalties in accordance with section 4731.24 of the 1381  
Revised Code. 1382

(H) If an individual certifies that the individual has 1383  
completed the number of hours and type of continuing medical 1384  
education required for renewal or reinstatement of a ~~certificate~~ 1385  
license to practice as a physician assistant, and the board finds 1386  
through a random sample conducted under division (E) of this 1387  
section or through any other means that the individual did not 1388  
complete the requisite continuing medical education, the board may 1389  
impose a civil penalty of not more than five thousand dollars. The 1390  
board's finding shall be made pursuant to an adjudication under 1391  
Chapter 119. of the Revised Code and by an affirmative vote of not 1392  
fewer than six members. 1393

A civil penalty imposed under this division may be in 1394  
addition to or in lieu of any other action the board may take 1395  
under section 4730.25 of the Revised Code. The board shall deposit 1396  
civil penalties in accordance with section 4731.24 of the Revised 1397

Code. 1398

~~Sec. 4730.19. (A) For a supervision agreement to be approved by the board, all of the following apply:~~ 1399  
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~~(1) Before initiating supervision of one or more physician assistants licensed under this chapter, a physician shall enter into a supervision agreement with each physician assistant who will be supervised. The supervision agreement shall specify that the physician agrees to supervise the physician assistant and the physician assistant agrees to practice in accordance with the conditions specified in the physician supervisory plan approved for that physician or the policies of the health care facility in which the supervising physician and physician assistant are practicing under that physician's supervision.~~ 1401  
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~~(2) The agreement shall clearly state that the supervising physician is legally responsible and assumes legal liability for the services provided by the physician assistant. The agreement shall be signed by the physician and the physician assistant.~~ 1411  
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~~(3) The physician assistant shall hold a current certificate to practice as a physician assistant.~~ 1415  
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~~(4) If a physician supervisory plan applies to the physician assistant's practice, the physician shall hold an approved physician supervisory plan.~~ 1417  
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~~(5) If the physician intends to grant physician delegated prescriptive authority to a physician assistant, the physician assistant shall hold a certificate to prescribe issued under this chapter.~~ 1420  
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~~(6) If the physician holds approval of more than one physician supervisory plan, the agreement shall specify the plan under which the physician assistant will practice.~~ 1424  
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~~(B) The board shall review each application received. If the~~ 1427

~~board finds that the requirements specified in division (A) of  
this section have been met and the applicant has paid the fee  
specified in section 4730.18 of the Revised Code, the board shall  
approve the supervision agreement and notify the supervising  
physician of the board's approval. If physician delegated  
prescriptive authority will be granted to more than one physician  
assistant under the supervision agreement, the board shall specify  
in the notice that its approval is specific to each physician  
assistant. The board shall provide notice of its approval of a  
supervision agreement not later than thirty days after the board  
receives a complete application for approval. A supervision  
agreement shall include either or both of the following:~~

(1) If a physician assistant will practice within a health  
care facility, the agreement shall include terms that require the  
physician assistant to practice in accordance with the policies of  
the health care facility.

(2) If a physician assistant will practice outside a health  
care facility, the agreement shall include terms that specify all  
of the following:

(a) The responsibilities to be fulfilled by the physician in  
supervising the physician assistant;

(b) The responsibilities to be fulfilled by the physician  
assistant when performing services under the physician's  
supervision;

(c) Any limitations on the responsibilities to be fulfilled  
by the physician assistant;

(d) The circumstances under which the physician assistant is  
required to refer a patient to the supervising physician;

(e) If the supervising physician chooses to designate  
physicians to act as alternate supervising physicians, the names,  
business addresses, and business telephone numbers of the



physicians who have agreed to act in that capacity. 1459

~~(C) After a supervision agreement is approved, a physician  
may apply to the board for approval to initiate supervision of a  
physician assistant who is not listed on the agreement. There is  
no fee for applying for the addition of a physician assistant to a  
supervision agreement.~~ 1460  
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~~To receive the board's approval of the addition to the  
supervision agreement, the physician assistant shall hold a  
current certificate to practice as a physician assistant. If the  
physician intends to grant physician delegated prescriptive  
authority to the physician assistant, the physician assistant  
shall hold a current certificate to prescribe. If these  
requirements are met, the board shall notify the physician of its  
approval of the addition to the supervision agreement. The board  
shall provide notice of its approval not later than thirty days  
after the board receives a complete application for approval (1)  
The supervising physician shall submit a copy of each supervision  
agreement to the board. The board shall review the supervision  
agreement for compliance with this section and for verification of  
licensure of the supervising physician and the physician  
assistant. All of the following apply to the submission and review  
process:~~ 1465  
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(a) Before the end of the fifth business day after the day it  
receives a supervision agreement, the board shall notify the  
supervising physician of any way that the agreement fails to  
comply with this section and section 4730.20 of the Revised Code.  
If the board does not give timely notice, the agreement becomes  
effective at the end of the fifth business day after the day the  
board receives the agreement. 1481  
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A supervision agreement expires two years after the day it  
takes effect. The agreement may be renewed. 1488  
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(b) If a physician receives a notice under division (C)(1)(a) of this section, the physician may revise the supervision agreement and resubmit the agreement to the board. The board shall review the agreement as provided in division (C)(1)(a) of this section. 1490  
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(c) Until July 1, 2015, each initial or renewed agreement submitted under division (C)(1)(a) of this section shall be accompanied by a fee of twenty-five dollars. No fee is required for submitting a revised agreement under division (C)(1)(b) of this section or for submitting an amendment under division (C)(2) of this section. Fees shall be deposited in accordance with section 4731.24 of the Revised Code. 1495  
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(2) Before expiration, a supervision agreement may be amended by including one or more additional physician assistants. An amendment to a supervision agreement shall be submitted to the board for review in the manner provided for review of an initial agreement under division (C)(1) of this section. The amendment does not alter the agreement's expiration date. 1502  
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(D) A supervision agreement shall be kept in the records maintained by the supervising physician who entered into the agreement. 1508  
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(E) The board shall post on its internet web site a copy of each supervision agreement that goes into effect under this section. The posting shall be updated to reflect any amendment, renewal, expiration, or termination of the agreement. Each posting or update shall be made not later than five business days after the effective date of the action for which the posting or update is required. 1511  
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**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 1518  
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<u>physician's normal course of practice and expertise:</u>	1521
<u>(1) Ordering diagnostic, therapeutic, and other medical services;</u>	1522
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<u>(2) Prescribing physical therapy or referring a patient to a physical therapist for physical therapy;</u>	1524
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<u>(3) Ordering occupational therapy or referring a patient to an occupational therapist for occupational therapy;</u>	1526
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<u>(4) Taking any action that may be taken by an attending physician under sections 2133.21 to 2133.26 of the Revised Code, as specified in section 2133.211 of the Revised Code;</u>	1528
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<u>(5) Determining and pronouncing death in accordance with section 4730.202 of the Revised Code;</u>	1531
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<u>(6) Assisting in surgery;</u>	1533
<u>(7) If the physician assistant holds a valid prescriber number issued by the state medical board and has been granted physician-delegated prescriptive authority, ordering, prescribing, personally furnishing, and administering drugs and medical devices;</u>	1534
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<u>(8) Any other services that are part of the supervising physician's normal course of practice and expertise.</u>	1539
	1540
<u>(B) The services a physician assistant may provide under the policies of a health care facility are limited to the services the facility authorizes the physician assistant to provide for the facility. A facility shall not authorize a physician assistant to perform a service that is prohibited under this chapter. A physician who is supervising a physician assistant within a health care facility may impose limitations on the physician assistant's practice that are in addition to any limitations applicable under the policies of the facility.</u>	1541
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**Sec. ~~4730.091~~ 4730.201.** (A) As used in this section, "local 1550  
anesthesia" means the injection of a drug or combination of drugs 1551  
to stop or prevent a painful sensation in a circumscribed area of 1552  
the body where a painful procedure is to be performed. "Local 1553  
anesthesia" includes only local infiltration anesthesia, digital 1554  
blocks, and pudendal blocks. 1555

(B) A physician assistant may administer, monitor, or 1556  
maintain local anesthesia as a component of a procedure the 1557  
physician assistant is performing or as a separate service when 1558  
the procedure requiring local anesthesia is to be performed by the 1559  
physician assistant's supervising physician or another person. A 1560  
physician assistant shall not administer, monitor, or maintain any 1561  
other form of anesthesia, including regional anesthesia or any 1562  
systemic sedation, ~~regardless of whether the physician assistant~~ 1563  
~~is practicing under a physician supervisory plan or the policies~~ 1564  
~~of a health care facility.~~ 1565

**Sec. ~~4730.092~~ 4730.202.** (A) A physician assistant may 1566  
determine and pronounce an individual's death, but only if the 1567  
individual's respiratory and circulatory functions are not being 1568  
artificially sustained and, at the time the determination and 1569  
pronouncement of death is made, either or both of the following 1570  
apply: 1571

(1) The individual was receiving care in one of the 1572  
following: 1573

(a) A nursing home licensed under section 3721.02 of the 1574  
Revised Code or by a political subdivision under section 3721.09 1575  
of the Revised Code; 1576

(b) A residential care facility or home for the aging 1577  
licensed under Chapter 3721. of the Revised Code; 1578

(c) A county home or district home operated pursuant to 1579

Chapter 5155. of the Revised Code; 1580

(d) A residential facility licensed under section 5123.19 of 1581  
the Revised Code. 1582

(2) The physician assistant is providing or supervising the 1583  
individual's care through a hospice care program licensed under 1584  
Chapter 3712. of the Revised Code or any other entity that 1585  
provides palliative care. 1586

(B) If a physician assistant determines and pronounces an 1587  
individual's death, the physician assistant shall comply with both 1588  
of the following: 1589

(1) The physician assistant shall not complete any portion of 1590  
the individual's death certificate. 1591

(2) The physician assistant shall notify the individual's 1592  
attending physician of the determination and pronouncement of 1593  
death in order for the physician to fulfill the physician's duties 1594  
under section 3705.16 of the Revised Code. The physician assistant 1595  
shall provide the notification within a period of time that is 1596  
reasonable but not later than twenty-four hours following the 1597  
determination and pronouncement of the individual's death. 1598

**Sec. 4730.203.** (A) Acting pursuant to a supervision 1599  
agreement, a physician assistant may delegate performance of a 1600  
task to implement a patient's plan of care or, if the conditions 1601  
in division (C) of this section are met, may delegate 1602  
administration of a drug. Delegation may be to a person who has 1603  
successfully completed a training and competency evaluation 1604  
program approved by the director of health under section 3721.31 1605  
of the Revised Code or, subject to division (D) of section 4730.03 1606  
of the Revised Code, any other person. The physician assistant 1607  
must be physically present at the location where the task is 1608  
performed or the drug administered. 1609

(B) Prior to delegating a task or administration of a drug, a physician assistant shall determine that the task or drug is appropriate for the patient and the person to whom the delegation is to be made may safely perform the task or administer the drug.

(C) A physician assistant may delegate administration of a drug only if all of the following conditions are met:

(1) The physician assistant has physician-delegated prescriptive authority to administer the drug.

(2) The drug is included in the formulary established under division (A) of section 4730.39 of the Revised Code.

(3) The drug is not a controlled substance.

(4) The drug will not be administered intravenously.

(5) The drug will not be administered in a hospital inpatient care unit, as defined in section 3727.50 of the Revised Code; a hospital emergency department; a freestanding emergency department; or an ambulatory surgical facility licensed under section 3702.30 of the Revised Code.

(D) A person not otherwise authorized to administer a drug or perform a specific task may do so in accordance with a physician assistant's delegation under this section.

**Sec. 4730.21.** (A) The supervising physician of a physician assistant exercises supervision, control, and direction of the physician assistant. ~~In~~ A physician assistant may practice in any setting within which the supervising physician has supervision, control, and direction of the physician assistant.

In supervising a physician assistant, all of the following apply:

(1) ~~Except when the on-site supervision requirements specified in section 4730.45 of the Revised Code are applicable,~~

~~the~~ The supervising physician shall be continuously available for 1639  
direct communication with the physician assistant by either of the 1640  
following means: 1641

(a) Being physically present at the location where the 1642  
physician assistant is practicing; 1643

(b) Being readily available to the physician assistant 1644  
through some means of telecommunication and being in a location 1645  
that ~~under normal conditions is not more than sixty minutes travel~~ 1646  
~~time away~~ a distance from the location where the physician 1647  
assistant is practicing that reasonably allows the physician to 1648  
assure proper care of patients. 1649

(2) The supervising physician shall personally and actively 1650  
review the physician assistant's professional activities. 1651

~~(3) The supervising physician shall regularly review the~~ 1652  
~~condition of the patients treated by the physician assistant.~~ 1653

~~(4)~~ The supervising physician shall ensure that the quality 1654  
assurance system established pursuant to division (F) of this 1655  
section is implemented and maintained. 1656

~~(5)~~(4) The supervising physician shall regularly perform any 1657  
other reviews of the physician assistant that the supervising 1658  
physician considers necessary. 1659

(B) A physician may enter into supervision agreements with 1660  
any number of physician assistants, but the physician may not 1661  
supervise more than ~~two~~ three physician assistants at any one 1662  
time. A physician assistant may enter into supervision agreements 1663  
with any number of supervising physicians, ~~but when practicing~~ 1664  
~~under the supervision of a particular physician, the physician~~ 1665  
~~assistant's scope of practice is subject to the limitations of the~~ 1666  
~~physician supervisory plan that has been approved under section~~ 1667  
~~4730.17 of the Revised Code for that physician or the policies of~~ 1668  
~~the health care facility in which the physician and physician~~ 1669

~~assistant are practicing.~~ 1670

~~(C) A supervising physician may authorize a physician~~ 1671  
~~assistant to perform a service only if the service is authorized~~ 1672  
~~under the physician supervisory plan approved for that physician~~ 1673  
~~or the policies of the health care facility in which the physician~~ 1674  
~~and physician assistant are practicing.~~ 1675  
A supervising physician 1675  
may authorize a physician assistant to perform a service only if 1676  
the physician is satisfied that the physician assistant is capable 1677  
of competently performing the service. A supervising physician 1678  
shall not authorize a physician assistant to perform any service 1679  
that is beyond the physician's or the physician assistant's normal 1680  
course of practice and expertise. 1681

~~(D)(1) A supervising physician may authorize a physician~~ 1682  
~~assistant to practice in any setting within which the supervising~~ 1683  
~~physician routinely practices.~~ 1684

~~(2)~~ In the case of a health care facility with an emergency 1685  
department, if the supervising physician routinely practices in 1686  
the facility's emergency department, the supervising physician 1687  
shall provide on-site supervision of the physician assistant when 1688  
the physician assistant practices in the emergency department. If 1689  
the supervising physician does not routinely practice in the 1690  
facility's emergency department, the supervising physician may, on 1691  
occasion, send the physician assistant to the facility's emergency 1692  
department to assess and manage a patient. In supervising the 1693  
physician assistant's assessment and management of the patient, 1694  
the supervising physician shall determine the appropriate level of 1695  
supervision in compliance with the requirements of divisions (A) 1696  
to (C) of this section, except that the supervising physician must 1697  
be available to go to the emergency department to personally 1698  
evaluate the patient and, at the request of an emergency 1699  
department physician, the supervising physician shall go to the 1700  
emergency department to personally evaluate the patient. 1701



(E) Each time a physician assistant writes a medical order, 1702  
including prescriptions written in the exercise of 1703  
physician-delegated prescriptive authority, the physician 1704  
assistant shall sign the form on which the order is written and 1705  
record on the form the time and date that the order is written. 1706  
~~When writing a medical order, the physician assistant shall~~ 1707  
~~clearly identify the physician under whose supervision the~~ 1708  
~~physician assistant is authorized to write the order.~~ 1709

(F)(1) The supervising physician of a physician assistant 1710  
shall establish a quality assurance system to be used in 1711  
supervising the physician assistant. All or part of the system may 1712  
be applied to other physician assistants who are supervised by the 1713  
supervising physician. The system shall be developed in 1714  
consultation with each physician assistant to be supervised by the 1715  
physician. 1716

(2) In establishing the quality assurance system, the 1717  
supervising physician shall describe a process to be used for all 1718  
of the following: 1719

(a) Routine review by the physician of selected patient 1720  
record entries made by the physician assistant and selected 1721  
medical orders issued by the physician assistant; 1722

(b) Discussion of complex cases; 1723

(c) Discussion of new medical developments relevant to the 1724  
practice of the physician and physician assistant; 1725

(d) Performance of any quality assurance activities required 1726  
in rules adopted by state medical board pursuant to any 1727  
recommendations made by the physician assistant policy committee 1728  
under section 4730.06 of the Revised Code; 1729

(e) Performance of any other quality assurance activities 1730  
that the supervising physician considers to be appropriate. 1731

(3) The supervising physician and physician assistant shall 1732  
keep records of their quality assurance activities. On request, 1733  
the records shall be made available to the board ~~and any health~~ 1734  
~~care professional working with the supervising physician and~~ 1735  
~~physician assistant.~~ 1736

**Sec. 4730.22.** (A) ~~A~~ When performing authorized services, a 1737  
physician assistant acts as the agent of the physician assistant's 1738  
supervising physician. The supervising physician is legally 1739  
responsible and assumes legal liability for the services provided 1740  
by the physician assistant. 1741

The physician is not responsible or liable for any services 1742  
provided by the physician assistant after their supervision 1743  
agreement expires or is terminated. 1744

(B) When a health care facility permits physician assistants 1745  
to practice within that facility or any other health care facility 1746  
under its control, the health care facility shall make reasonable 1747  
efforts to explain to each individual who may work with a 1748  
particular physician assistant the scope of that physician 1749  
assistant's practice within the facility. The appropriate 1750  
credentialing body within the health care facility shall provide, 1751  
on request of an individual practicing in the facility with a 1752  
physician assistant, a copy of the facility's policies on the 1753  
practice of physician assistants within the facility and a copy of 1754  
each ~~physician supervisory plan and~~ supervision agreement 1755  
applicable to the physician assistant. 1756

An individual who follows the orders of a physician assistant 1757  
practicing in a health care facility is not subject to 1758  
disciplinary action by any administrative agency that governs that 1759  
individual's conduct and is not liable in damages in a civil 1760  
action for injury, death, or loss to person or property resulting 1761  
from the individual's acts or omissions in the performance of any 1762

procedure, treatment, or other health care service if the 1763  
individual reasonably believed that the physician assistant was 1764  
acting within the proper scope of practice or was relaying medical 1765  
orders from a supervising physician, unless the act or omission 1766  
constitutes willful or wanton misconduct. 1767

**Sec. 4730.25.** (A) The state medical board, by an affirmative 1768  
vote of not fewer than six members, may revoke or may refuse to 1769  
grant a ~~certificate~~ license to practice as a physician assistant 1770  
~~or a certificate to prescribe~~ to a person found by the board to 1771  
have committed fraud, misrepresentation, or deception in applying 1772  
for or securing the ~~certificate~~ license. 1773

(B) The board, by an affirmative vote of not fewer than six 1774  
members, shall, to the extent permitted by law, limit, revoke, or 1775  
suspend an individual's ~~certificate~~ license to practice as a 1776  
physician assistant or ~~certificate to prescribe~~ prescriber number, 1777  
refuse to issue a ~~certificate~~ license to an applicant, refuse to 1778  
reinstate a ~~certificate~~ license, or reprimand or place on 1779  
probation the holder of a ~~certificate~~ license for any of the 1780  
following reasons: 1781

(1) Failure to practice in accordance with the ~~conditions~~ 1782  
~~under which the~~ supervising physician's supervision agreement with 1783  
the physician assistant ~~was approved, including the requirement~~ 1784  
~~that when practicing under a particular supervising physician, the~~ 1785  
~~physician assistant must practice only according to the physician~~ 1786  
~~supervisory plan the board approved for that physician or,~~ 1787  
including, if applicable, the policies of the health care facility 1788  
in which the supervising physician and physician assistant are 1789  
practicing; 1790

(2) Failure to comply with the requirements of this chapter, 1791  
Chapter 4731. of the Revised Code, or any rules adopted by the 1792  
board; 1793

(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;	1794 1795 1796 1797
(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;	1798 1799 1800 1801
(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;	1802 1803 1804 1805
(6) Administering drugs for purposes other than those authorized under this chapter;	1806 1807
(7) Willfully betraying a professional confidence;	1808
(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 <del>certificate</del> <u>license</u> to practice as a physician assistant, <del>a certificate to prescribe, or approval of a supervision agreement.</del>	1809 1810 1811 1812 1813 1814 1815 1816
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 of a failure to disclose material facts, is intended or is likely to create false or unjustified expectations of favorable results, or includes representations or implications that in reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived.	1817 1818 1819 1820 1821 1822 1823 1824

(9) Representing, with the purpose of obtaining compensation	1825
or other advantage personally or for any other person, that an	1826
incurable disease or injury, or other incurable condition, can be	1827
permanently cured;	1828
(10) The obtaining of, or attempting to obtain, money or	1829
anything of value by fraudulent misrepresentations in the course	1830
of practice;	1831
(11) A plea of guilty to, a judicial finding of guilt of, or	1832
a judicial finding of eligibility for intervention in lieu of	1833
conviction for, a felony;	1834
(12) Commission of an act that constitutes a felony in this	1835
state, regardless of the jurisdiction in which the act was	1836
committed;	1837
(13) A plea of guilty to, a judicial finding of guilt of, or	1838
a judicial finding of eligibility for intervention in lieu of	1839
conviction for, a misdemeanor committed in the course of practice;	1840
(14) A plea of guilty to, a judicial finding of guilt of, or	1841
a judicial finding of eligibility for intervention in lieu of	1842
conviction for, a misdemeanor involving moral turpitude;	1843
(15) Commission of an act in the course of practice that	1844
constitutes a misdemeanor in this state, regardless of the	1845
jurisdiction in which the act was committed;	1846
(16) Commission of an act involving moral turpitude that	1847
constitutes a misdemeanor in this state, regardless of the	1848
jurisdiction in which the act was committed;	1849
(17) A plea of guilty to, a judicial finding of guilt of, or	1850
a judicial finding of eligibility for intervention in lieu of	1851
conviction for violating any state or federal law regulating the	1852
possession, distribution, or use of any drug, including	1853
trafficking in drugs;	1854

(18) Any of the following actions taken by the state agency 1855  
responsible for regulating the practice of physician assistants in 1856  
another state, for any reason other than the nonpayment of fees: 1857  
the limitation, revocation, or suspension of an individual's 1858  
license to practice; acceptance of an individual's license 1859  
surrender; denial of a license; refusal to renew or reinstate a 1860  
license; imposition of probation; or issuance of an order of 1861  
censure or other reprimand; 1862

(19) A departure from, or failure to conform to, minimal 1863  
standards of care of similar physician assistants under the same 1864  
or similar circumstances, regardless of whether actual injury to a 1865  
patient is established; 1866

(20) Violation of the conditions placed by the board on a 1867  
~~certificate~~ license to practice as a physician assistant, ~~a~~ 1868  
~~certificate to prescribe, a physician supervisory plan, or~~ 1869  
~~supervision agreement;~~ 1870

(21) Failure to use universal blood and body fluid 1871  
precautions established by rules adopted under section 4731.051 of 1872  
the Revised Code; 1873

(22) Failure to cooperate in an investigation conducted by 1874  
the board under section 4730.26 of the Revised Code, including 1875  
failure to comply with a subpoena or order issued by the board or 1876  
failure to answer truthfully a question presented by the board at 1877  
a deposition or in written interrogatories, except that failure to 1878  
cooperate with an investigation shall not constitute grounds for 1879  
discipline under this section if a court of competent jurisdiction 1880  
has issued an order that either quashes a subpoena or permits the 1881  
individual to withhold the testimony or evidence in issue; 1882

(23) Assisting suicide as defined in section 3795.01 of the 1883  
Revised Code; 1884

(24) Prescribing any drug or device to perform or induce an 1885

abortion, or otherwise performing or inducing an abortion; 1886

(25) Having certification by the national commission on 1887  
certification of physician assistants or a successor organization 1888  
expire, lapse, or be suspended or revoked. 1889

(C) Disciplinary actions taken by the board under divisions 1890  
(A) and (B) of this section shall be taken pursuant to an 1891  
adjudication under Chapter 119. of the Revised Code, except that 1892  
in lieu of an adjudication, the board may enter into a consent 1893  
agreement with a physician assistant or applicant to resolve an 1894  
allegation of a violation of this chapter or any rule adopted 1895  
under it. A consent agreement, when ratified by an affirmative 1896  
vote of not fewer than six members of the board, shall constitute 1897  
the findings and order of the board with respect to the matter 1898  
addressed in the agreement. If the board refuses to ratify a 1899  
consent agreement, the admissions and findings contained in the 1900  
consent agreement shall be of no force or effect. 1901

(D) For purposes of divisions (B)(12), (15), and (16) of this 1902  
section, the commission of the act may be established by a finding 1903  
by the board, pursuant to an adjudication under Chapter 119. of 1904  
the Revised Code, that the applicant or ~~certificate~~ license holder 1905  
committed the act in question. The board shall have no 1906  
jurisdiction under these divisions in cases where the trial court 1907  
renders a final judgment in the ~~certificate~~ license holder's favor 1908  
and that judgment is based upon an adjudication on the merits. The 1909  
board shall have jurisdiction under these divisions in cases where 1910  
the trial court issues an order of dismissal upon technical or 1911  
procedural grounds. 1912

(E) The sealing of conviction records by any court shall have 1913  
no effect upon a prior board order entered under the provisions of 1914  
this section or upon the board's jurisdiction to take action under 1915  
the provisions of this section if, based upon a plea of guilty, a 1916  
judicial finding of guilt, or a judicial finding of eligibility 1917

for intervention in lieu of conviction, the board issued a notice 1918  
of opportunity for a hearing prior to the court's order to seal 1919  
the records. The board shall not be required to seal, destroy, 1920  
redact, or otherwise modify its records to reflect the court's 1921  
sealing of conviction records. 1922

(F) For purposes of this division, any individual who holds a 1923  
~~certificate~~ license issued under this chapter, or applies for a 1924  
~~certificate~~ license issued under this chapter, shall be deemed to 1925  
have given consent to submit to a mental or physical examination 1926  
when directed to do so in writing by the board and to have waived 1927  
all objections to the admissibility of testimony or examination 1928  
reports that constitute a privileged communication. 1929

(1) In enforcing division (B)(4) of this section, the board, 1930  
upon a showing of a possible violation, may compel any individual 1931  
who holds a ~~certificate~~ license issued under this chapter or who 1932  
has applied for a ~~certificate~~ license pursuant to this chapter to 1933  
submit to a mental examination, physical examination, including an 1934  
HIV test, or both a mental and physical examination. The expense 1935  
of the examination is the responsibility of the individual 1936  
compelled to be examined. Failure to submit to a mental or 1937  
physical examination or consent to an HIV test ordered by the 1938  
board constitutes an admission of the allegations against the 1939  
individual unless the failure is due to circumstances beyond the 1940  
individual's control, and a default and final order may be entered 1941  
without the taking of testimony or presentation of evidence. If 1942  
the board finds a physician assistant unable to practice because 1943  
of the reasons set forth in division (B)(4) of this section, the 1944  
board shall require the physician assistant to submit to care, 1945  
counseling, or treatment by physicians approved or designated by 1946  
the board, as a condition for an initial, continued, reinstated, 1947  
or renewed ~~certificate~~ license. An individual affected under this 1948  
division shall be afforded an opportunity to demonstrate to the 1949



board the ability to resume practicing in compliance with 1950  
acceptable and prevailing standards of care. 1951

(2) For purposes of division (B)(5) of this section, if the 1952  
board has reason to believe that any individual who holds a 1953  
~~certificate~~ license issued under this chapter or any applicant for 1954  
a ~~certificate~~ license suffers such impairment, the board may 1955  
compel the individual to submit to a mental or physical 1956  
examination, or both. The expense of the examination is the 1957  
responsibility of the individual compelled to be examined. Any 1958  
mental or physical examination required under this division shall 1959  
be undertaken by a treatment provider or physician qualified to 1960  
conduct such examination and chosen by the board. 1961

Failure to submit to a mental or physical examination ordered 1962  
by the board constitutes an admission of the allegations against 1963  
the individual unless the failure is due to circumstances beyond 1964  
the individual's control, and a default and final order may be 1965  
entered without the taking of testimony or presentation of 1966  
evidence. If the board determines that the individual's ability to 1967  
practice is impaired, the board shall suspend the individual's 1968  
~~certificate~~ license or deny the individual's application and shall 1969  
require the individual, as a condition for initial, continued, 1970  
reinstated, or renewed ~~certification~~ licensure to practice or 1971  
prescribe, to submit to treatment. 1972

Before being eligible to apply for reinstatement of a 1973  
~~certificate~~ license suspended under this division, the physician 1974  
assistant shall demonstrate to the board the ability to resume 1975  
practice or prescribing in compliance with acceptable and 1976  
prevailing standards of care. The demonstration shall include the 1977  
following: 1978

(a) Certification from a treatment provider approved under 1979  
section 4731.25 of the Revised Code that the individual has 1980  
successfully completed any required inpatient treatment; 1981

(b) Evidence of continuing full compliance with an aftercare contract or consent agreement; 1982  
1983

(c) Two written reports indicating that the individual's ability to practice has been assessed and that the individual has been found capable of practicing according to acceptable and prevailing standards of care. The reports shall be made by individuals or providers approved by the board for making such assessments and shall describe the basis for their determination. 1984  
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The board may reinstate a ~~certificate~~ license suspended under this division after such demonstration and after the individual has entered into a written consent agreement. 1990  
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When the impaired physician assistant resumes practice or prescribing, the board shall require continued monitoring of the physician assistant. The monitoring shall include compliance with the written consent agreement entered into before reinstatement or with conditions imposed by board order after a hearing, and, upon termination of the consent agreement, submission to the board for at least two years of annual written progress reports made under penalty of falsification stating whether the physician assistant has maintained sobriety. 1993  
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(G) If the secretary and supervising member determine that there is clear and convincing evidence that a physician assistant has violated division (B) of this section and that the individual's continued practice or prescribing presents a danger of immediate and serious harm to the public, they may recommend that the board suspend the individual's ~~certificate~~ license to practice or authority to prescribe without a prior hearing. Written allegations shall be prepared for consideration by the board. 2002  
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The board, upon review of those allegations and by an affirmative vote of not fewer than six of its members, excluding 2011  
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the secretary and supervising member, may suspend a ~~certificate~~ 2013  
license without a prior hearing. A telephone conference call may 2014  
be utilized for reviewing the allegations and taking the vote on 2015  
the summary suspension. 2016

The board shall issue a written order of suspension by 2017  
certified mail or in person in accordance with section 119.07 of 2018  
the Revised Code. The order shall not be subject to suspension by 2019  
the court during pendency of any appeal filed under section 119.12 2020  
of the Revised Code. If the physician assistant requests an 2021  
adjudicatory hearing by the board, the date set for the hearing 2022  
shall be within fifteen days, but not earlier than seven days, 2023  
after the physician assistant requests the hearing, unless 2024  
otherwise agreed to by both the board and the ~~certificate~~ license 2025  
holder. 2026

A summary suspension imposed under this division shall remain 2027  
in effect, unless reversed on appeal, until a final adjudicative 2028  
order issued by the board pursuant to this section and Chapter 2029  
119. of the Revised Code becomes effective. The board shall issue 2030  
its final adjudicative order within sixty days after completion of 2031  
its hearing. Failure to issue the order within sixty days shall 2032  
result in dissolution of the summary suspension order, but shall 2033  
not invalidate any subsequent, final adjudicative order. 2034

(H) If the board takes action under division (B)(11), (13), 2035  
or (14) of this section, and the judicial finding of guilt, guilty 2036  
plea, or judicial finding of eligibility for intervention in lieu 2037  
of conviction is overturned on appeal, upon exhaustion of the 2038  
criminal appeal, a petition for reconsideration of the order may 2039  
be filed with the board along with appropriate court documents. 2040  
Upon receipt of a petition and supporting court documents, the 2041  
board shall reinstate the ~~certificate~~ license to practice ~~or~~ 2042  
~~prescribe~~. The board may then hold an adjudication under Chapter 2043  
119. of the Revised Code to determine whether the individual 2044

committed the act in question. Notice of opportunity for hearing 2045  
shall be given in accordance with Chapter 119. of the Revised 2046  
Code. If the board finds, pursuant to an adjudication held under 2047  
this division, that the individual committed the act, or if no 2048  
hearing is requested, it may order any of the sanctions identified 2049  
under division (B) of this section. 2050

(I) The ~~certificate~~ license to practice issued to a physician 2051  
assistant and the physician assistant's practice in this state are 2052  
automatically suspended as of the date the physician assistant 2053  
pleads guilty to, is found by a judge or jury to be guilty of, or 2054  
is subject to a judicial finding of eligibility for intervention 2055  
in lieu of conviction in this state or treatment or intervention 2056  
in lieu of conviction in another state for any of the following 2057  
criminal offenses in this state or a substantially equivalent 2058  
criminal offense in another jurisdiction: aggravated murder, 2059  
murder, voluntary manslaughter, felonious assault, kidnapping, 2060  
rape, sexual battery, gross sexual imposition, aggravated arson, 2061  
aggravated robbery, or aggravated burglary. Continued practice 2062  
after the suspension shall be considered practicing without a 2063  
~~certificate~~ license. 2064

The board shall notify the individual subject to the 2065  
suspension by certified mail or in person in accordance with 2066  
section 119.07 of the Revised Code. If an individual whose 2067  
~~certificate~~ license is suspended under this division fails to make 2068  
a timely request for an adjudication under Chapter 119. of the 2069  
Revised Code, the board shall enter a final order permanently 2070  
revoking the individual's ~~certificate~~ license to practice. 2071

(J) In any instance in which the board is required by Chapter 2072  
119. of the Revised Code to give notice of opportunity for hearing 2073  
and the individual subject to the notice does not timely request a 2074  
hearing in accordance with section 119.07 of the Revised Code, the 2075  
board is not required to hold a hearing, but may adopt, by an 2076

affirmative vote of not fewer than six of its members, a final 2077  
order that contains the board's findings. In that final order, the 2078  
board may order any of the sanctions identified under division (A) 2079  
or (B) of this section. 2080

(K) Any action taken by the board under division (B) of this 2081  
section resulting in a suspension shall be accompanied by a 2082  
written statement of the conditions under which the physician 2083  
assistant's ~~certificate~~ license may be reinstated. The board shall 2084  
adopt rules in accordance with Chapter 119. of the Revised Code 2085  
governing conditions to be imposed for reinstatement. 2086  
Reinstatement of a ~~certificate~~ license suspended pursuant to 2087  
division (B) of this section requires an affirmative vote of not 2088  
fewer than six members of the board. 2089

(L) When the board refuses to grant to an applicant a 2090  
~~certificate~~ license to practice as a physician assistant ~~or a~~ 2091  
~~certificate to prescribe~~, revokes an individual's ~~certificate~~ 2092  
license, refuses to issue a ~~certificate~~ license, or refuses to 2093  
reinstate an individual's ~~certificate~~ license, the board may 2094  
specify that its action is permanent. An individual subject to a 2095  
permanent action taken by the board is forever thereafter 2096  
ineligible to hold the ~~certificate~~ license and the board shall not 2097  
accept an application for reinstatement of the ~~certificate~~ license 2098  
or for issuance of a new ~~certificate~~ license. 2099

(M) Notwithstanding any other provision of the Revised Code, 2100  
all of the following apply: 2101

(1) The surrender of a ~~certificate~~ license issued under this 2102  
chapter is not effective unless or until accepted by the board. 2103  
Reinstatement of a ~~certificate~~ license surrendered to the board 2104  
requires an affirmative vote of not fewer than six members of the 2105  
board. 2106

(2) An application made under this chapter for a ~~certificate~~, 2107

~~approval of a physician supervisory plan, or approval of a~~ 2108  
~~supervision agreement~~ license may not be withdrawn without 2109  
approval of the board. 2110

(3) Failure by an individual to renew a ~~certificate~~ license 2111  
in accordance with section 4730.14 ~~or section 4730.48~~ of the 2112  
Revised Code shall not remove or limit the board's jurisdiction to 2113  
take disciplinary action under this section against the 2114  
individual. 2115

**Sec. 4730.251.** On receipt of a notice pursuant to section 2116  
3123.43 of the Revised Code, the state medical board shall comply 2117  
with sections 3123.41 to 3123.50 of the Revised Code and any 2118  
applicable rules adopted under section 3123.63 of the Revised Code 2119  
with respect to a ~~certificate~~ license to practice as a physician 2120  
assistant issued pursuant to this chapter. 2121

**Sec. 4730.27.** If the state medical board has reason to 2122  
believe that any person who has been granted a ~~certificate~~ license 2123  
under this chapter to practice as a physician assistant is 2124  
mentally ill or mentally incompetent, it may file in the probate 2125  
court of the county in which such person has a legal residence an 2126  
affidavit in the form prescribed in section 5122.11 of the Revised 2127  
Code and signed by the board secretary or a member of the 2128  
secretary's staff, whereupon the same proceedings shall be had as 2129  
provided in Chapter 5122. of the Revised Code. The attorney 2130  
general may represent the board in any proceeding commenced under 2131  
this section. 2132

If a physician assistant is adjudged by a probate court to be 2133  
mentally ill or mentally incompetent, the individual's ~~certificate~~ 2134  
license shall be automatically suspended until the individual has 2135  
filed with the board a certified copy of an adjudication by a 2136  
probate court of being restored to competency or has submitted to 2137

the board proof, satisfactory to the board, of having been 2138  
discharged as being restored to competency in the manner and form 2139  
provided in section 5122.38 of the Revised Code. The judge of the 2140  
court shall immediately notify the board of an adjudication of 2141  
incompetence and note any suspension of a ~~certificate~~ license in 2142  
the margin of the court's record of the ~~certificate~~ license. 2143

**Sec. 4730.28.** (A) An individual whose ~~certificate~~ license to 2144  
practice as a physician assistant issued under this chapter has 2145  
been suspended or is in an inactive state for any cause for more 2146  
than two years may apply to the state medical board to have the 2147  
~~certificate~~ license restored. 2148

(B)(1) The board shall not restore a ~~certificate~~ license 2149  
under this section unless the applicant complies with sections 2150  
4776.01 to 4776.04 of the Revised Code. The board shall determine 2151  
the applicant's present fitness to resume practice. The board 2152  
shall consider the moral background and the activities of the 2153  
applicant during the period of suspension or inactivity. 2154

(2) When restoring a ~~certificate~~ license, the board may 2155  
impose terms and conditions, including the following: 2156

(a) Requiring the applicant to obtain additional training and 2157  
pass an examination upon completion of the training; 2158

(b) Restricting or limiting the extent, scope, or type of 2159  
practice as a physician assistant that the individual may resume. 2160

**Sec. 4730.31.** (A) As used in this section, "prosecutor" has 2161  
the same meaning as in section 2935.01 of the Revised Code. 2162

(B) Whenever any person holding a valid ~~certificate~~ license 2163  
to practice as a physician assistant issued pursuant to this 2164  
chapter pleads guilty to, is subject to a judicial finding of 2165  
guilt of, or is subject to a judicial finding of eligibility for 2166  
intervention in lieu of conviction for a violation of Chapter 2167

2907., 2925., or 3719. of the Revised Code or of any substantively 2168  
comparable ordinance of a municipal corporation in connection with 2169  
practicing as a physician assistant, the prosecutor in the case 2170  
shall, on forms prescribed and provided by the state medical 2171  
board, promptly notify the board of the conviction. Within thirty 2172  
days of receipt of such information, the board shall initiate 2173  
action in accordance with Chapter 119. of the Revised Code to 2174  
determine whether to suspend or revoke the ~~certificate~~ license 2175  
under section 4730.25 of the Revised Code. 2176

(C) The prosecutor in any case against any person holding a 2177  
valid ~~certificate~~ license issued pursuant to this chapter shall, 2178  
on forms prescribed and provided by the state medical board, 2179  
notify the board of any of the following: 2180

(1) A plea of guilty to, a judicial finding of guilt of, or 2181  
judicial finding of eligibility for intervention in lieu of 2182  
conviction for a felony, or a case where the trial court issues an 2183  
order of dismissal upon technical or procedural grounds of a 2184  
felony charge; 2185

(2) A plea of guilty to, a judicial finding of guilt of, or 2186  
judicial finding or eligibility for intervention in lieu of 2187  
conviction for a misdemeanor committed in the course of practice, 2188  
or a case where the trial court issues an order of dismissal upon 2189  
technical or procedural grounds of a charge of a misdemeanor, if 2190  
the alleged act was committed in the course of practice; 2191

(3) A plea of guilty to, a judicial finding of guilt of, or 2192  
judicial finding of eligibility for intervention in lieu of 2193  
conviction for a misdemeanor involving moral turpitude, or a case 2194  
where the trial court issues an order of dismissal upon technical 2195  
or procedural grounds of a charge of a misdemeanor involving moral 2196  
turpitude. 2197

The report shall include the name and address of the 2198



~~certificate~~ license holder, the nature of the offense for which 2199  
the action was taken, and the certified court documents recording 2200  
the action. 2201

**Sec. 4730.32.** (A) Within sixty days after the imposition of 2202  
any formal disciplinary action taken by a health care facility 2203  
against any individual holding a valid ~~certificate~~ license to 2204  
practice as a physician assistant issued under this chapter, the 2205  
chief administrator or executive officer of the facility shall 2206  
report to the state medical board the name of the individual, the 2207  
action taken by the facility, and a summary of the underlying 2208  
facts leading to the action taken. Upon request, the board shall 2209  
be provided certified copies of the patient records that were the 2210  
basis for the facility's action. Prior to release to the board, 2211  
the summary shall be approved by the peer review committee that 2212  
reviewed the case or by the governing board of the facility. 2213

The filing of a report with the board or decision not to file 2214  
a report, investigation by the board, or any disciplinary action 2215  
taken by the board, does not preclude a health care facility from 2216  
taking disciplinary action against a physician assistant. 2217

In the absence of fraud or bad faith, no individual or entity 2218  
that provides patient records to the board shall be liable in 2219  
damages to any person as a result of providing the records. 2220

(B) A physician assistant, professional association or 2221  
society of physician assistants, physician, or professional 2222  
association or society of physicians that believes a violation of 2223  
any provision of this chapter, Chapter 4731. of the Revised Code, 2224  
or rule of the board has occurred shall report to the board the 2225  
information upon which the belief is based. This division does not 2226  
require any treatment provider approved by the board under section 2227  
4731.25 of the Revised Code or any employee, agent, or 2228  
representative of such a provider to make reports with respect to 2229

a physician assistant participating in treatment or aftercare for 2230  
substance abuse as long as the physician assistant maintains 2231  
participation in accordance with the requirements of section 2232  
4731.25 of the Revised Code and the treatment provider or 2233  
employee, agent, or representative of the provider has no reason 2234  
to believe that the physician assistant has violated any provision 2235  
of this chapter or rule adopted under it, other than being 2236  
impaired by alcohol, drugs, or other substances. This division 2237  
does not require reporting by any member of an impaired 2238  
practitioner committee established by a health care facility or by 2239  
any representative or agent of a committee or program sponsored by 2240  
a professional association or society of physician assistants to 2241  
provide peer assistance to physician assistants with substance 2242  
abuse problems with respect to a physician assistant who has been 2243  
referred for examination to a treatment program approved by the 2244  
board under section 4731.25 of the Revised Code if the physician 2245  
assistant cooperates with the referral for examination and with 2246  
any determination that the physician assistant should enter 2247  
treatment and as long as the committee member, representative, or 2248  
agent has no reason to believe that the physician assistant has 2249  
ceased to participate in the treatment program in accordance with 2250  
section 4731.25 of the Revised Code or has violated any provision 2251  
of this chapter or rule adopted under it, other than being 2252  
impaired by alcohol, drugs, or other substances. 2253

(C) Any professional association or society composed 2254  
primarily of physician assistants that suspends or revokes an 2255  
individual's membership for violations of professional ethics, or 2256  
for reasons of professional incompetence or professional 2257  
malpractice, within sixty days after a final decision, shall 2258  
report to the board, on forms prescribed and provided by the 2259  
board, the name of the individual, the action taken by the 2260  
professional organization, and a summary of the underlying facts 2261  
leading to the action taken. 2262

The filing or nonfiling of a report with the board, 2263  
investigation by the board, or any disciplinary action taken by 2264  
the board, shall not preclude a professional organization from 2265  
taking disciplinary action against a physician assistant. 2266

(D) Any insurer providing professional liability insurance to 2267  
any person holding a valid ~~certificate~~ license to practice as a 2268  
physician assistant issued under this chapter or any other entity 2269  
that seeks to indemnify the professional liability of a physician 2270  
assistant shall notify the board within thirty days after the 2271  
final disposition of any written claim for damages where such 2272  
disposition results in a payment exceeding twenty-five thousand 2273  
dollars. The notice shall contain the following information: 2274

(1) The name and address of the person submitting the 2275  
notification; 2276

(2) The name and address of the insured who is the subject of 2277  
the claim; 2278

(3) The name of the person filing the written claim; 2279

(4) The date of final disposition; 2280

(5) If applicable, the identity of the court in which the 2281  
final disposition of the claim took place. 2282

(E) The board may investigate possible violations of this 2283  
chapter or the rules adopted under it that are brought to its 2284  
attention as a result of the reporting requirements of this 2285  
section, except that the board shall conduct an investigation if a 2286  
possible violation involves repeated malpractice. As used in this 2287  
division, "repeated malpractice" means three or more claims for 2288  
malpractice within the previous five-year period, each resulting 2289  
in a judgment or settlement in excess of twenty-five thousand 2290  
dollars in favor of the claimant, and each involving negligent 2291  
conduct by the physician assistant. 2292

(F) All summaries, reports, and records received and 2293  
maintained by the board pursuant to this section shall be held in 2294  
confidence and shall not be subject to discovery or introduction 2295  
in evidence in any federal or state civil action involving a 2296  
physician assistant, supervising physician, or health care 2297  
facility arising out of matters that are the subject of the 2298  
reporting required by this section. The board may use the 2299  
information obtained only as the basis for an investigation, as 2300  
evidence in a disciplinary hearing against a physician assistant 2301  
or supervising physician, or in any subsequent trial or appeal of 2302  
a board action or order. 2303

The board may disclose the summaries and reports it receives 2304  
under this section only to health care facility committees within 2305  
or outside this state that are involved in credentialing or 2306  
recredentialing a physician assistant or supervising physician or 2307  
reviewing their privilege to practice within a particular 2308  
facility. The board shall indicate whether or not the information 2309  
has been verified. Information transmitted by the board shall be 2310  
subject to the same confidentiality provisions as when maintained 2311  
by the board. 2312

(G) Except for reports filed by an individual pursuant to 2313  
division (B) of this section, the board shall send a copy of any 2314  
reports or summaries it receives pursuant to this section to the 2315  
physician assistant. The physician assistant shall have the right 2316  
to file a statement with the board concerning the correctness or 2317  
relevance of the information. The statement shall at all times 2318  
accompany that part of the record in contention. 2319

(H) An individual or entity that reports to the board or 2320  
refers an impaired physician assistant to a treatment provider 2321  
approved by the board under section 4731.25 of the Revised Code 2322  
shall not be subject to suit for civil damages as a result of the 2323  
report, referral, or provision of the information. 2324

(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~~ 2355  
~~prescribe under this chapter;~~ 2356

(2) Any issue the committee considers necessary to assist the 2357  
board in fulfilling its duty to adopt rules governing 2358  
physician-delegated prescriptive authority, ~~including the issuance~~ 2359  
~~of certificates to prescribe.~~ 2360

(B) Not less than every six months beginning on the first day 2361  
of June following ~~the effective date of this amendment~~ March 22, 2362  
2013, the committee shall review the physician assistant formulary 2363  
the board adopts pursuant to division (A)(1) of section 4730.39 of 2364  
the Revised Code and, to the extent it determines to be necessary, 2365  
submit recommendations proposing changes to the formulary. 2366

(C) Recommendations submitted under this section are subject 2367  
to the procedures and time frames specified in division (C) of 2368  
section 4730.06 of the Revised Code. 2369

**Sec. 4730.39.** (A) The state medical board shall do ~~both~~ all 2370  
of the following: 2371

(1) Adopt a formulary listing the drugs and therapeutic 2372  
devices by class and specific generic nomenclature that a 2373  
physician may include in the physician-delegated prescriptive 2374  
authority granted to a physician assistant who holds a ~~certificate~~ 2375  
~~to prescribe under this chapter~~ valid prescriber number issued by 2376  
the state medical board; 2377

(2) Adopt rules governing physician-delegated prescriptive 2378  
authority for physician assistants, ~~including the issuance of~~ 2379  
~~certificates to prescribe under this chapter;~~ 2380

(3) Establish standards and procedures for delegation under 2381  
division (A) of section 4730.203 of the Revised Code of the 2382  
authority to administer drugs. 2383

(B) The board's rules governing physician-delegated 2384

prescriptive authority adopted pursuant to division (A)(2) of this 2385  
section shall be adopted in accordance with Chapter 119. of the 2386  
Revised Code and shall establish all of the following: 2387

(1) Requirements regarding the pharmacology courses that a 2388  
physician assistant is required to complete ~~to receive a~~ 2389  
~~certificate to prescribe;~~ 2390

~~(2) Standards and procedures for the issuance and renewal of~~ 2391  
~~certificates to prescribe to physician assistants;~~ 2392

~~(3) Standards and procedures for the appropriate conduct of~~ 2393  
~~the provisional period that a physician assistant is required to~~ 2394  
~~complete pursuant to section 4730.45 of the Revised Code and for~~ 2395  
~~determining whether a physician assistant has successfully~~ 2396  
~~completed the provisional period;~~ 2397

~~(4) A specific prohibition against prescribing any drug or~~ 2398  
~~device to perform or induce an abortion;~~ 2399

~~(5)~~(3) Standards and procedures to be followed by a physician 2400  
assistant in personally furnishing samples of drugs or complete or 2401  
partial supplies of drugs to patients under section 4730.43 of the 2402  
Revised Code; 2403

~~(6)~~(4) Any other requirements the board considers necessary 2404  
to implement the provisions of this chapter regarding 2405  
physician-delegated prescriptive authority ~~and the issuance of~~ 2406  
~~certificates to prescribe.~~ 2407

(C)(1) After considering recommendations submitted by the 2408  
physician assistant policy committee pursuant to sections 4730.06 2409  
and 4730.38 of the Revised Code, the board shall review either or 2410  
both of the following, as appropriate according to the submitted 2411  
recommendations: 2412

(a) The formulary the board adopts under division (A)(1) of 2413  
this section; 2414

(b) The rules the board adopts under division (A)(2) of this section regarding physician-delegated prescriptive authority. 2415  
2416

(2) Based on its review, the board shall make any necessary modifications to the formulary or rules. 2417  
2418

**Sec. 4730.41.** (A) ~~A certificate to prescribe issued under this chapter authorizes a~~ physician assistant who holds a valid prescriber number issued by the state medical board is authorized to prescribe and personally furnish drugs and therapeutic devices in the exercise of physician-delegated prescriptive authority. 2419  
2420  
2421  
2422  
2423

(B) In exercising physician-delegated prescriptive authority, a physician assistant is subject to all of the following: 2424  
2425

(1) The physician assistant shall exercise physician-delegated prescriptive authority only to the extent that the physician supervising the physician assistant has granted that authority. 2426  
2427  
2428  
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(2) The physician assistant shall comply with all conditions placed on the physician-delegated prescriptive authority, as specified by the supervising physician who is supervising the physician assistant in the exercise of physician-delegated prescriptive authority. 2430  
2431  
2432  
2433  
2434

(3) If the physician assistant possesses physician-delegated prescriptive authority for controlled substances, the physician assistant shall register with the federal drug enforcement administration. 2435  
2436  
2437  
2438

(4) If the physician assistant possesses physician-delegated prescriptive authority for schedule II controlled substances, the physician assistant shall comply with section 4730.411 of the Revised Code. 2439  
2440  
2441  
2442

**Sec. 4730.42.** (A) In granting physician-delegated 2443



prescriptive authority to a particular physician assistant who 2444  
holds a ~~certificate to prescribe~~ valid prescriber number issued 2445  
~~under this chapter by the state medical board~~, the supervising 2446  
physician is subject to all of the following: 2447

(1) The supervising physician shall not grant 2448  
physician-delegated prescriptive authority for any drug or 2449  
therapeutic device that is not listed on the physician assistant 2450  
formulary adopted under section 4730.39 of the Revised Code as a 2451  
drug or therapeutic device that may be included in the 2452  
physician-delegated prescriptive authority granted to a physician 2453  
assistant. 2454

(2) The supervising physician shall not grant 2455  
physician-delegated prescriptive authority for any drug or device 2456  
that may be used to perform or induce an abortion. 2457

(3) The supervising physician shall not grant 2458  
physician-delegated prescriptive authority in a manner that 2459  
exceeds the supervising physician's prescriptive authority, 2460  
including the physician's authority to treat chronic pain with 2461  
controlled substances and products containing tramadol as 2462  
described in section 4731.052 of the Revised Code. 2463

(4) The supervising physician shall supervise the physician 2464  
assistant in accordance with ~~all~~ both of the following: 2465

(a) The supervision requirements specified in section 4730.21 2466  
of the Revised Code ~~and, in the case of supervision provided~~ 2467  
~~during a provisional period of physician-delegated prescriptive~~ 2468  
~~authority, the supervision requirements specified in section~~ 2469  
~~4730.45 of the Revised Code;~~ 2470

(b) The ~~physician supervisory plan approved for the~~ 2471  
~~supervising physician or~~ supervision agreement entered into with 2472  
the physician assistant under section 4730.19 of the Revised Code, 2473

<u>including, if applicable,</u> the policies of the health care facility	2474
in which the physician and physician assistant are practicing+	2475
<del>(c) The supervision agreement approved under section 4730.19</del>	2476
<del>of the Revised Code that applies to the supervising physician and</del>	2477
<del>the physician assistant.</del>	2478
(B)(1) The supervising physician of a physician assistant may	2479
place conditions on the physician-delegated prescriptive authority	2480
granted to the physician assistant. If conditions are placed on	2481
that authority, the supervising physician shall maintain a written	2482
record of the conditions and make the record available to the	2483
state medical board on request.	2484
(2) The conditions that a supervising physician may place on	2485
the physician-delegated prescriptive authority granted to a	2486
physician assistant include the following:	2487
(a) Identification by class and specific generic nomenclature	2488
of drugs and therapeutic devices that the physician chooses not to	2489
permit the physician assistant to prescribe;	2490
(b) Limitations on the dosage units or refills that the	2491
physician assistant is authorized to prescribe;	2492
(c) Specification of circumstances under which the physician	2493
assistant is required to refer patients to the supervising	2494
physician or another physician when exercising physician-delegated	2495
prescriptive authority;	2496
(d) Responsibilities to be fulfilled by the physician in	2497
supervising the physician assistant that are not otherwise	2498
specified in the <del>physician supervisory plan</del> <u>supervision agreement</u>	2499
or otherwise required by this chapter.	2500
<b>Sec. 4730.43.</b> (A) A physician assistant who holds a	2501
<del>certificate to prescribe</del> <u>valid prescriber number</u> issued <del>under this</del>	2502
<del>chapter</del> <u>by the state medical board</u> and has been granted	2503

physician-delegated prescriptive authority ~~by a supervising~~ 2504  
~~physician~~ may personally furnish to a patient samples of drugs and 2505  
therapeutic devices that are included in the physician assistant's 2506  
physician-delegated prescriptive authority, subject to all of the 2507  
following: 2508

(1) The amount of the sample furnished shall not exceed a 2509  
seventy-two-hour supply, except when the minimum available 2510  
quantity of the sample is packaged in an amount that is greater 2511  
than a seventy-two-hour supply, in which case the physician 2512  
assistant may furnish the sample in the package amount. 2513

(2) No charge may be imposed for the sample or for furnishing 2514  
it. 2515

(3) Samples of controlled substances may not be personally 2516  
furnished. 2517

(B) A physician assistant who holds a ~~certificate to~~ 2518  
~~prescribe~~ valid prescriber number issued ~~under this chapter~~ by the 2519  
board and has been granted physician-delegated prescriptive 2520  
authority ~~by a supervising physician~~ may personally furnish to a 2521  
patient a complete or partial supply of the drugs and therapeutic 2522  
devices that are included in the physician assistant's 2523  
physician-delegated prescriptive authority, subject to all of the 2524  
following: 2525

(1) The physician assistant shall personally furnish only 2526  
antibiotics, antifungals, scabicides, contraceptives, prenatal 2527  
vitamins, antihypertensives, drugs and devices used in the 2528  
treatment of diabetes, drugs and devices used in the treatment of 2529  
asthma, and drugs used in the treatment of dyslipidemia. 2530

(2) The physician assistant shall not furnish the drugs and 2531  
devices in locations other than a health department operated by 2532  
the board of health of a city or general health district or the 2533

authority having the duties of a board of health under section 2534  
3709.05 of the Revised Code, a federally funded comprehensive 2535  
primary care clinic, or a nonprofit health care clinic or program. 2536

(3) The physician assistant shall comply with all standards 2537  
and procedures for personally furnishing supplies of drugs and 2538  
devices, as established in rules adopted under section 4730.39 of 2539  
the Revised Code. 2540

**Sec. 4730.49.** (A) To be eligible for renewal of a ~~certificate~~ 2541  
~~to prescribe~~ license to practice as a physician assistant, an 2542  
applicant shall complete every two years at least twelve hours of 2543  
continuing education in pharmacology from an accredited 2544  
institution recognized by the state medical board. Except as 2545  
provided in division (B) of this section and in section 5903.12 of 2546  
the Revised Code, the continuing education shall be completed not 2547  
later than the thirty-first day of January of each even-numbered 2548  
year. 2549

(B) The state medical board shall provide for pro rata 2550  
reductions by month of the number of hours of continuing education 2551  
in pharmacology that is required to be completed for physician 2552  
assistants who are in their first ~~certification~~ licensure period 2553  
after completing the ~~provisional~~ period of supervision required 2554  
under section ~~4730.45~~ 4730.12 of the Revised Code, who have been 2555  
disabled due to illness or accident, or who have been absent from 2556  
the country. The board shall adopt rules, in accordance with 2557  
Chapter 119. of the Revised Code, as necessary to implement this 2558  
division. 2559

(C) The continuing education required by this section is in 2560  
addition to the continuing education required under section 2561  
4730.14 of the Revised Code. 2562

**Sec. 4730.51.** In the information the board maintains on ~~the~~ 2563

its internet web site, the state medical board shall include the 2564  
following: 2565

(A) The name of each physician assistant who holds a 2566  
~~certificate to prescribe~~ license under this chapter; 2567

(B) For each physician assistant who holds a ~~certificate to~~ 2568  
~~prescribe~~ valid prescriber number issued by the state medical 2569  
board, the name of each supervising physician who has authority to 2570  
grant physician-delegated prescriptive authority to the physician 2571  
assistant. 2572

**Sec. 4730.53.** (A) As used in this section, "drug database" 2573  
means the database established and maintained by the state board 2574  
of pharmacy pursuant to section 4729.75 of the Revised Code. 2575

(B) The state medical board shall adopt rules in accordance 2576  
with Chapter 119. of the Revised Code that establish standards and 2577  
procedures to be followed by a physician assistant ~~who holds a~~ 2578  
~~certificate to prescribe issued~~ licensed under this chapter who 2579  
has been granted physician-delegated prescriptive authority 2580  
regarding the review of patient information available through the 2581  
drug database under division (A)(5) of section 4729.80 of the 2582  
Revised Code. 2583

(C) This section and the rules adopted under it do not apply 2584  
if the state board of pharmacy no longer maintains the drug 2585  
database. 2586

**Sec. 4731.07.** (A) The state medical board shall keep a record 2587  
of its proceedings. The minutes of a meeting of the board shall, 2588  
on approval by the board, constitute an official record of its 2589  
proceedings. 2590

(B) The board shall keep a register of applicants for 2591  
certificates of registration and certificates to practice issued 2592

under this chapter and Chapters ~~4730.~~, 4760., 4762., and 4774. of 2593  
the Revised Code and licenses issued under ~~Chapter~~ Chapters 4730. 2594  
and 4778. of the Revised Code. The register shall show the name of 2595  
the applicant and whether the applicant was granted or refused a 2596  
certificate or license. With respect to applicants to practice 2597  
medicine and surgery or osteopathic medicine and surgery, the 2598  
register shall show the name of the institution that granted the 2599  
applicant the degree of doctor of medicine or osteopathic 2600  
medicine. The books and records of the board shall be prima-facie 2601  
evidence of matters therein contained. 2602

**Sec. 4765.01.** As used in this chapter: 2603

(A) "First responder" means an individual who holds a 2604  
current, valid certificate issued under section 4765.30 of the 2605  
Revised Code to practice as a first responder. 2606

(B) "Emergency medical technician-basic" or "EMT-basic" means 2607  
an individual who holds a current, valid certificate issued under 2608  
section 4765.30 of the Revised Code to practice as an emergency 2609  
medical technician-basic. 2610

(C) "Emergency medical technician-intermediate" or "EMT-I" 2611  
means an individual who holds a current, valid certificate issued 2612  
under section 4765.30 of the Revised Code to practice as an 2613  
emergency medical technician-intermediate. 2614

(D) "Emergency medical technician-paramedic" or "paramedic" 2615  
means an individual who holds a current, valid certificate issued 2616  
under section 4765.30 of the Revised Code to practice as an 2617  
emergency medical technician-paramedic. 2618

(E) "Ambulance" means any motor vehicle that is used, or is 2619  
intended to be used, for the purpose of responding to emergency 2620  
medical situations, transporting emergency patients, and 2621  
administering emergency medical service to patients before, 2622

during, or after transportation. 2623

(F) "Cardiac monitoring" means a procedure used for the 2624  
purpose of observing and documenting the rate and rhythm of a 2625  
patient's heart by attaching electrical leads from an 2626  
electrocardiograph monitor to certain points on the patient's body 2627  
surface. 2628

(G) "Emergency medical service" means any of the services 2629  
described in sections 4765.35, 4765.37, 4765.38, and 4765.39 of 2630  
the Revised Code that are performed by first responders, emergency 2631  
medical technicians-basic, emergency medical 2632  
technicians-intermediate, and paramedics. "Emergency medical 2633  
service" includes such services performed before or during any 2634  
transport of a patient, including transports between hospitals and 2635  
transports to and from helicopters. 2636

(H) "Emergency medical service organization" means a public 2637  
or private organization using first responders, EMTs-basic, 2638  
EMTs-I, or paramedics, or a combination of first responders, 2639  
EMTs-basic, EMTs-I, and paramedics, to provide emergency medical 2640  
services. 2641

(I) "Physician" means an individual who holds a current, 2642  
valid certificate issued under Chapter 4731. of the Revised Code 2643  
authorizing the practice of medicine and surgery or osteopathic 2644  
medicine and surgery. 2645

(J) "Registered nurse" means an individual who holds a 2646  
current, valid license issued under Chapter 4723. of the Revised 2647  
Code authorizing the practice of nursing as a registered nurse. 2648

(K) "Volunteer" means a person who provides services either 2649  
for no compensation or for compensation that does not exceed the 2650  
actual expenses incurred in providing the services or in training 2651  
to provide the services. 2652

(L) "Emergency medical service personnel" means first 2653

responders, emergency medical service technicians-basic, emergency 2654  
medical service technicians-intermediate, emergency medical 2655  
service technicians-paramedic, and persons who provide medical 2656  
direction to such persons. 2657

(M) "Hospital" has the same meaning as in section 3727.01 of 2658  
the Revised Code. 2659

(N) "Trauma" or "traumatic injury" means severe damage to or 2660  
destruction of tissue that satisfies both of the following 2661  
conditions: 2662

(1) It creates a significant risk of any of the following: 2663

(a) Loss of life; 2664

(b) Loss of a limb; 2665

(c) Significant, permanent disfigurement; 2666

(d) Significant, permanent disability. 2667

(2) It is caused by any of the following: 2668

(a) Blunt or penetrating injury; 2669

(b) Exposure to electromagnetic, chemical, or radioactive 2670  
energy; 2671

(c) Drowning, suffocation, or strangulation; 2672

(d) A deficit or excess of heat. 2673

(O) "Trauma victim" or "trauma patient" means a person who 2674  
has sustained a traumatic injury. 2675

(P) "Trauma care" means the assessment, diagnosis, 2676  
transportation, treatment, or rehabilitation of a trauma victim by 2677  
emergency medical service personnel or by a physician, nurse, 2678  
physician assistant, respiratory therapist, physical therapist, 2679  
chiropractor, occupational therapist, speech-language pathologist, 2680  
audiologist, or psychologist licensed to practice as such in this 2681  
state or another jurisdiction. 2682



(Q) "Trauma center" means all of the following:	2683
(1) Any hospital that is verified by the American college of surgeons as an adult or pediatric trauma center;	2684 2685
(2) Any hospital that is operating as an adult or pediatric trauma center under provisional status pursuant to section 3727.101 of the Revised Code;	2686 2687 2688
(3) Until December 31, 2004, any hospital in this state that is designated by the director of health as a level II pediatric trauma center under section 3727.081 of the Revised Code;	2689 2690 2691
(4) Any hospital in another state that is licensed or designated under the laws of that state as capable of providing specialized trauma care appropriate to the medical needs of the trauma patient.	2692 2693 2694 2695
(R) "Pediatric" means involving a patient who is less than sixteen years of age.	2696 2697
(S) "Adult" means involving a patient who is not a pediatric patient.	2698 2699
(T) "Geriatric" means involving a patient who is at least seventy years old or exhibits significant anatomical or physiological characteristics associated with advanced aging.	2700 2701 2702
(U) "Air medical organization" means an organization that provides emergency medical services, or transports emergency victims, by means of fixed or rotary wing aircraft.	2703 2704 2705
(V) "Emergency care" and "emergency facility" have the same meanings as in section 3727.01 of the Revised Code.	2706 2707
(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.	2708 2709 2710 2711
(X) "Transfer" has the same meaning as in section 1753.28 of	2712

the Revised Code. 2713

(Y) "Firefighter" means any member of a fire department as 2714  
defined in section 742.01 of the Revised Code. 2715

(Z) "Volunteer firefighter" has the same meaning as in 2716  
section 146.01 of the Revised Code. 2717

(AA) "Part-time paid firefighter" means a person who provides 2718  
firefighting services on less than a full-time basis, is routinely 2719  
scheduled to be present on site at a fire station or other 2720  
designated location for purposes of responding to a fire or other 2721  
emergency, and receives more than nominal compensation for the 2722  
provision of firefighting services. 2723

(BB) "Physician assistant" means an individual who holds a 2724  
current, valid ~~certificate~~ license to practice as a physician 2725  
assistant issued under Chapter 4730. of the Revised Code. 2726

**Sec. 4765.51.** Nothing in this chapter prevents or restricts 2727  
the practice, services, or activities of any registered nurse 2728  
practicing within the scope of the registered nurse's practice. 2729

Nothing in this chapter prevents or restricts the practice, 2730  
services, or activities of any physician assistant practicing in 2731  
accordance with a ~~physician supervisory plan approved~~ supervision 2732  
agreement entered into under section ~~4730.17~~ 4730.19 of the 2733  
Revised Code ~~or, including, if applicable,~~ the policies of the 2734  
health care facility in which the physician assistant is 2735  
practicing. 2736

**Sec. 5123.47.** (A) As used in this section: 2737

(1) "In-home care" means the supportive services provided 2738  
within the home of an individual with mental retardation or a 2739  
developmental disability who receives funding for the services 2740  
through a county board of developmental disabilities, including 2741

any recipient of residential services funded as home and 2742  
community-based services, family support services provided under 2743  
section 5126.11 of the Revised Code, or supported living provided 2744  
in accordance with sections 5126.41 to 5126.47 of the Revised 2745  
Code. "In-home care" includes care that is provided outside an 2746  
individual's home in places incidental to the home, and while 2747  
traveling to places incidental to the home, except that "in-home 2748  
care" does not include care provided in the facilities of a county 2749  
board of developmental disabilities or care provided in schools. 2750

(2) "Parent" means either parent of a child, including an 2751  
adoptive parent but not a foster parent. 2752

(3) "Unlicensed in-home care worker" means an individual who 2753  
provides in-home care but is not a health care professional. 2754

(4) "Family member" means a parent, sibling, spouse, son, 2755  
daughter, grandparent, aunt, uncle, cousin, or guardian of the 2756  
individual with mental retardation or a developmental disability 2757  
if the individual with mental retardation or developmental 2758  
disabilities lives with the person and is dependent on the person 2759  
to the extent that, if the supports were withdrawn, another living 2760  
arrangement would have to be found. 2761

(5) "Health care professional" means any of the following: 2762

(a) A dentist who holds a valid license issued under Chapter 2763  
4715. of the Revised Code; 2764

(b) A registered or licensed practical nurse who holds a 2765  
valid license issued under Chapter 4723. of the Revised Code; 2766

(c) An optometrist who holds a valid license issued under 2767  
Chapter 4725. of the Revised Code; 2768

(d) A pharmacist who holds a valid license issued under 2769  
Chapter 4729. of the Revised Code; 2770

(e) A person who holds a valid certificate issued under 2771

Chapter 4731. of the Revised Code to practice medicine and	2772
surgery, osteopathic medicine and surgery, podiatric medicine and	2773
surgery, or a limited brand of medicine;	2774
(f) A physician assistant who holds a valid <del>certificate</del>	2775
<u>license</u> issued under Chapter 4730. of the Revised Code;	2776
(g) An occupational therapist or occupational therapy	2777
assistant or a physical therapist or physical therapist assistant	2778
who holds a valid license issued under Chapter 4755. of the	2779
Revised Code;	2780
(h) A respiratory care professional who holds a valid license	2781
issued under Chapter 4761. of the Revised Code.	2782
(6) "Health care task" means a task that is prescribed,	2783
ordered, delegated, or otherwise directed by a health care	2784
professional acting within the scope of the professional's	2785
practice.	2786
(B) Except as provided in division (E) of this section, a	2787
family member of an individual with mental retardation or a	2788
developmental disability may authorize an unlicensed in-home care	2789
worker to administer oral and topical prescribed medications or	2790
perform other health care tasks as part of the in-home care the	2791
worker provides to the individual, if all of the following apply:	2792
(1) The family member is the primary supervisor of the care.	2793
(2) The unlicensed in-home care worker has been selected by	2794
the family member or the individual receiving care and is under	2795
the direct supervision of the family member.	2796
(3) The unlicensed in-home care worker is providing the care	2797
through an employment or other arrangement entered into directly	2798
with the family member and is not otherwise employed by or under	2799
contract with a person or government entity to provide services to	2800
individuals with mental retardation and developmental	2801

disabilities. 2802

(C) A family member shall obtain a prescription, if 2803  
applicable, and written instructions from a health care 2804  
professional for the care to be provided to the individual. The 2805  
family member shall authorize the unlicensed in-home care worker 2806  
to provide the care by preparing a written document granting the 2807  
authority. The family member shall provide the unlicensed in-home 2808  
care worker with appropriate training and written instructions in 2809  
accordance with the instructions obtained from the health care 2810  
professional. 2811

(D) A family member who authorizes an unlicensed in-home care 2812  
worker to administer oral and topical prescribed medications or 2813  
perform other health care tasks retains full responsibility for 2814  
the health and safety of the individual receiving the care and for 2815  
ensuring that the worker provides the care appropriately and 2816  
safely. No entity that funds or monitors the provision of in-home 2817  
care may be held liable for the results of the care provided under 2818  
this section by an unlicensed in-home care worker, including such 2819  
entities as the county board of developmental disabilities and the 2820  
department of developmental disabilities. 2821

An unlicensed in-home care worker who is authorized under 2822  
this section by a family member to provide care to an individual 2823  
may not be held liable for any injury caused in providing the 2824  
care, unless the worker provides the care in a manner that is not 2825  
in accordance with the training and instructions received or the 2826  
worker acts in a manner that constitutes wanton or reckless 2827  
misconduct. 2828

(E) A county board of developmental disabilities may evaluate 2829  
the authority granted by a family member under this section to an 2830  
unlicensed in-home care worker at any time it considers necessary 2831  
and shall evaluate the authority on receipt of a complaint. If the 2832  
board determines that a family member has acted in a manner that 2833

is inappropriate for the health and safety of the individual 2834  
receiving the care, the authorization granted by the family member 2835  
to an unlicensed in-home care worker is void, and the family 2836  
member may not authorize other unlicensed in-home care workers to 2837  
provide the care. In making such a determination, the board shall 2838  
use appropriately licensed health care professionals and shall 2839  
provide the family member an opportunity to file a complaint under 2840  
section 5126.06 of the Revised Code. 2841

**Section 2.** That existing sections 1.64, 2133.211, 2151.3515 2842  
2305.113, 3701.92, 4503.44, 4729.01, 4730.01, 4730.02, 4730.03, 2843  
4730.04, 4730.06, 4730.08, 4730.091, 4730.092, 4730.10, 4730.101, 2844  
4730.11, 4730.12, 4730.13, 4730.14, 4730.19, 4730.21, 4730.22, 2845  
4730.25, 4730.251, 4730.27, 4730.28, 4730.31, 4730.32, 4730.33, 2846  
4730.38, 4730.39, 4730.41, 4730.42, 4730.43, 4730.49, 4730.51, 2847  
4730.53, 4731.07, 4765.01, 4765.51, and 5123.47 and sections 2848  
4730.081, 4730.09, 4730.15, 4730.16, 4730.17, 4730.18, 4730.20, 2849  
4730.44, 4730.45, 4730.46, 4730.47, 4730.48, 4730.50, and 4730.52 2850  
of the Revised Code are hereby repealed. 2851

**Section 3.** (A) The State Medical Board may continue to issue 2852  
certificates to practice and certificates to prescribe pursuant to 2853  
Chapter 4730. of the Revised Code for not longer than ninety days 2854  
after the effective date of this act. Thereafter, the Board shall 2855  
issue physician assistant licenses in compliance with this act. 2856

(B) Certificates to practice and certificates to prescribe 2857  
issued pursuant to division (A) of this section or Chapter 4730. 2858  
of the Revised Code, as it existed immediately prior to the 2859  
effective date of this act, shall satisfy the requirements for 2860  
physician assistant licenses, as created by this act, until the 2861  
thirty-first day of January of the first even-numbered year 2862  
following the effective date of this act. 2863