## As Re-reported by the Senate Rules Committee

# 130th General Assembly Regular Session 2013-2014

Sub. H. B. No. 412

## **Representative Gonzales**

Cosponsors: Representatives Bishoff, Terhar, Young, Wachtmann, Schuring, Brown, Anielski, Baker, Blessing, Carney, Green, Grossman, Hackett, Huffman, Landis, Perales, Pillich, Rogers, Scherer Speaker Batchelder

## A BILL

I.O	amend sections 1.64, 2133.211, 2151.3515,	Т
	2305.113, 2925.61, 3701.92, 3727.06, 3729.05,	2
	4123.01, 4123.026, 4123.46, 4503.44, 4723.01,	3
	4723.06, 4723.07, 4723.18, 4723.181, 4723.48,	4
	4723.482, 4723.50, 4729.01, 4730.01, 4730.02,	5
	4730.03, 4730.04, 4730.06, 4730.08, 4730.091,	6
	4730.10, 4730.101, 4730.11, 4730.12, 4730.13,	7
	4730.14, 4730.19, 4730.21, 4730.22, 4730.25,	8
	4730.251, 4730.27, 4730.28, 4730.31, 4730.32,	9
	4730.33, 4730.38, 4730.39, 4730.41, 4730.42,	10
	4730.43, 4730.431, 4730.49, 4730.51, 4730.53,	11
	4731.07, 4761.01, 4761.17, 4765.01, 4765.51,	12
	5122.11, 5122.111, and 5123.47; to amend, for the	13
	purpose of adopting new section numbers as	14
	indicated in parentheses, section 4730.091	15
	(4730.201) and 4730.092 (4730.202); to enact new	16
	section 4730.20 and sections 4723.489, 4730.111,	17
	and 4730.203; and to repeal sections 4730.081,	18
	4730.09, 4730.15, 4730.16, 4730.17, 4730.18,	19
	4730.20, 4730.44, 4730.45, 4730.46, 4730.47,	20
	4730.48, 4730.50, and 4730.52 of the Revised Code	21

to revise the law governing the practice of	22
physician assistants, the practice of advanced	23
practice registered nurses, eligibility for	24
compensation and benefits under Ohio's Workers'	25
Compensation Law, the proceedings for	26
court-ordered treatment of a mentally ill person,	27
and the licensure of recreational vehicle parks	28
and recreation camps, and to amend the versions of	29
sections 4730.25 and 4730.53 of the Revised Code	30
that are scheduled to take effect April 1, 2015,	31
to continue the provisions of this act on and	32
after that effective date.	33
BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:	
Section 1. That sections 1.64, 2133.211, 2151.3515, 2305.113,	34
2925.61, 3701.92, 3727.06, 3729.05, 4123.01, 4123.026, 4123.46,	35
4503.44, 4723.01, 4723.06, 4723.07, 4723.18, 4723.181, 4723.48,	36
4723.482, 4723.50, 4729.01, 4730.01, 4730.02, 4730.03, 4730.04,	37
4730.06, 4730.08, 4730.091, 4730.10, 4730.101, 4730.11, 4730.12,	38
4730.13, 4730.14, 4730.19, 4730.21, 4730.22, 4730.25, 4730.251,	39
4730.27, 4730.28, 4730.31, 4730.32, 4730.33, 4730.38, 4730.39,	40
4730.41, 4730.42, 4730.43, 4730.431, 4730.49, 4730.51, 4730.53,	41
4731.07, 4761.01, 4761.17, 4765.01, 4765.51, 5122.11, 5122.111,	42
and 5123.47 be amended, sections 4730.091 (4730.201) and 4730.092	43
(4730.202) be amended for the purpose of adopting new section	44
numbers as indicated in parentheses, and new section 4730.20 and	45
sections 4723.489, 4730.111, and 4730.203 of the Revised Code be	46
enacted to read as follows:	47
Sec. 1.64. As used in the Revised Code:	48
(A) "Certified nurse-midwife" means a registered nurse who	49

holds a valid certificate of authority issued under Chapter 4723.

Page 2

50

Sub. H. B. No. 412

As Re-reported by the Senate Rules Committee

of the Revised Code that authorizes the practice of nursing as a certified nurse-midwife in accordance with section 4723.43 of the Revised Code and rules adopted by the board of nursing.

- (B) "Certified nurse practitioner" means a registered nurse who holds a valid certificate of authority issued under Chapter 4723. of the Revised Code that authorizes the practice of nursing as a certified nurse practitioner in accordance with section 4723.43 of the Revised Code and rules adopted by the board of nursing.
- (C) "Clinical nurse specialist" means a registered nurse who 60 holds a valid certificate of authority issued under Chapter 4723. 61 of the Revised Code that authorizes the practice of nursing as a 62 clinical nurse specialist in accordance with section 4723.43 of 63 the Revised Code and rules adopted by the board of nursing. 64
- (D) "Physician assistant" means an individual who holds a 65 valid certificate to practice issued is licensed under Chapter 66 4730. of the Revised Code authorizing the individual to provide 67 services as a physician assistant to patients under the 68 supervision, control, and direction of one or more physicians. 69
- 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 78 physician assistant issued under Chapter 4730. of the Revised Code 79 may take any action that may be taken by an attending physician 80 under sections 2133.21 to 2133.26 of the Revised Code and has the

notice that the claimant is considering bringing an action upon

Page 6

169

170

171

that claim, that action may be commenced against the person	141
notified at any time within one hundred eighty days after the	142
notice is so given.	143
(2) An insurance company shall not consider the existence or	144
nonexistence of a written notice described in division (B)(1) of	145
this section in setting the liability insurance premium rates that	146
the company may charge the company's insured person who is	147
notified by that written notice.	148
(C) Except as to persons within the age of minority or of	149
unsound mind as provided by section 2305.16 of the Revised Code,	150
and except as provided in division (D) of this section, both of	151
the following apply:	152
(1) No action upon a medical, dental, optometric, or	153
chiropractic claim shall be commenced more than four years after	154
the occurrence of the act or omission constituting the alleged	155
basis of the medical, dental, optometric, or chiropractic claim.	156
(2) If an action upon a medical, dental, optometric, or	157
chiropractic claim is not commenced within four years after the	158
occurrence of the act or omission constituting the alleged basis	159
of the medical, dental, optometric, or chiropractic claim, then,	160
any action upon that claim is barred.	161
(D)(1) If a person making a medical claim, dental claim,	162
optometric claim, or chiropractic claim, in the exercise of	163
reasonable care and diligence, could not have discovered the	164
injury resulting from the act or omission constituting the alleged	165
basis of the claim within three years after the occurrence of the	166
act or omission, but, in the exercise of reasonable care and	167
diligence, discovers the injury resulting from that act or	168

omission before the expiration of the four-year period specified

in division (C)(1) of this section, the person may commence an

action upon the claim not later than one year after the person

191

discovers the injury resulting from that act or omission.

(2) If the alleged basis of a medical claim, dental claim, 173 optometric claim, or chiropractic claim is the occurrence of an 174 act or omission that involves a foreign object that is left in the 175 body of the person making the claim, the person may commence an 176 action upon the claim not later than one year after the person 177 discovered the foreign object or not later than one year after the 178 person, with reasonable care and diligence, should have discovered 179 180 the foreign object.

- (3) A person who commences an action upon a medical claim, 181 dental claim, optometric claim, or chiropractic claim under the 182 circumstances described in division (D)(1) or (2) of this section 183 has the affirmative burden of proving, by clear and convincing 184 evidence, that the person, with reasonable care and diligence, 185 could not have discovered the injury resulting from the act or 186 omission constituting the alleged basis of the claim within the 187 three-year period described in division (D)(1) of this section or 188 within the one-year period described in division (D)(2) of this 189 section, whichever is applicable. 190
  - (E) As used in this section:
- (1) "Hospital" includes any person, corporation, association, 192 board, or authority that is responsible for the operation of any 193 hospital licensed or registered in the state, including, but not 194 limited to, those that are owned or operated by the state, 195 political subdivisions, any person, any corporation, or any 196 combination of the state, political subdivisions, persons, and 197 corporations. "Hospital" also includes any person, corporation, 198 association, board, entity, or authority that is responsible for 199 the operation of any clinic that employs a full-time staff of 200 physicians practicing in more than one recognized medical 201 specialty and rendering advice, diagnosis, care, and treatment to 202 individuals. "Hospital" does not include any hospital operated by 203

(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.

231

232

chiropractic diagnosis, care, or treatment.

263

264

(4) "Podiatrist" means any person who is licensed to practice 234 podiatric medicine and surgery by the state medical board. 235 (5) "Dentist" means any person who is licensed to practice 236 dentistry by the state dental board. 237 (6) "Dental claim" means any claim that is asserted in any 238 civil action against a dentist, or against any employee or agent 239 of a dentist, and that arises out of a dental operation or the 240 dental diagnosis, care, or treatment of any person. "Dental claim" 241 includes derivative claims for relief that arise from a dental 242 operation or the dental diagnosis, care, or treatment of a person. 243 (7) "Derivative claims for relief" include, but are not 244 limited to, claims of a parent, guardian, custodian, or spouse of 245 an individual who was the subject of any medical diagnosis, care, 246 or treatment, dental diagnosis, care, or treatment, dental 247 operation, optometric diagnosis, care, or treatment, or 248 chiropractic diagnosis, care, or treatment, that arise from that 249 250 diagnosis, care, treatment, or operation, and that seek the recovery of damages for any of the following: 251 (a) Loss of society, consortium, companionship, care, 252 assistance, attention, protection, advice, guidance, counsel, 253 instruction, training, or education, or any other intangible loss 254 that was sustained by the parent, guardian, custodian, or spouse; 255 (b) Expenditures of the parent, quardian, custodian, or 256 spouse for medical, dental, optometric, or chiropractic care or 257 treatment, for rehabilitation services, or for other care, 258 treatment, services, products, or accommodations provided to the 259 individual who was the subject of the medical diagnosis, care, or 260 treatment, the dental diagnosis, care, or treatment, the dental 261 operation, the optometric diagnosis, care, or treatment, or the 262

(8) "Registered nurse" means any person who is licensed to

practice nursing as a registered nurse by the board of nursing.	265
(9) "Chiropractic claim" means any claim that is asserted in	266
any civil action against a chiropractor, or against any employee	267
or agent of a chiropractor, and that arises out of the	268
chiropractic diagnosis, care, or treatment of any person.	269
"Chiropractic claim" includes derivative claims for relief that	270
arise from the chiropractic diagnosis, care, or treatment of a	271
person.	272
(10) "Chiropractor" means any person who is licensed to	273
practice chiropractic by the state chiropractic board.	274
(11) "Optometric claim" means any claim that is asserted in	275
any civil action against an optometrist, or against any employee	276
or agent of an optometrist, and that arises out of the optometric	277
diagnosis, care, or treatment of any person. "Optometric claim"	278
includes derivative claims for relief that arise from the	279
optometric diagnosis, care, or treatment of a person.	280
(12) "Optometrist" means any person licensed to practice	281
optometry by the state board of optometry.	282
(13) "Physical therapist" means any person who is licensed to	283
practice physical therapy under Chapter 4755. of the Revised Code.	284
(14) "Home" has the same meaning as in section 3721.10 of the	285
Revised Code.	286
(15) "Residential facility" means a facility licensed under	287
section 5123.19 of the Revised Code.	288
(16) "Advanced practice registered nurse" means any certified	289
nurse practitioner, clinical nurse specialist, certified	290
registered nurse anesthetist, or certified nurse-midwife who holds	291
a certificate of authority issued by the board of nursing under	292
Chapter 4723. of the Revised Code.	293
(17) "Licensed practical nurse" means any person who is	294

of the Revised Code, holds a certificate to prescribe valid

by the state medical board, and has been granted

physician-delegated prescriptive authority;

prescriber number issued under Chapter 4730. of the Revised Code

320

321

322

(c) A clinical nurse specialist, certified nurse-midwife, or 324 certified nurse practitioner who holds a certificate to prescribe 325 issued under section 4723.48 of the Revised Code. 326 (4) "Peace officer" has the same meaning as in section 327 2921.51 of the Revised Code. 328 (B) A family member, friend, or other individual who is in a 329 position to assist an individual who is apparently experiencing or 330 at risk of experiencing an opioid-related overdose, is not subject 331 to criminal prosecution for a violation of section 4731.41 of the 332 Revised Code or criminal prosecution under this chapter if the 333 individual, acting in good faith, does all of the following: 334 (1) Obtains naloxone from a licensed health professional or a 335 prescription for naloxone from a licensed health professional; 336 (2) Administers that naloxone to an individual who is 337 apparently experiencing an opioid-related overdose; 338 (3) Attempts to summon emergency services either immediately 339 before or immediately after administering the naloxone. 340 (C) Division (B) of this section does not apply to a peace 341 officer or to an emergency medical technician-basic, emergency 342 medical technician-intermediate, or emergency medical 343 technician-paramedic, as defined in section 4765.01 of the Revised 344 Code. 345 (D) A peace officer employed by a law enforcement agency is 346 not subject to administrative action, criminal prosecution for a 347 violation of section 4731.41 of the Revised Code, or criminal 348 prosecution under this chapter if the peace officer, acting in 349 good faith, obtains naloxone from the peace officer's law 350 enforcement agency and administers the naloxone to an individual 351 who is apparently experiencing an opioid-related overdose. 352

## Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

Revised Code:	354
(A) "Advanced practice registered nurse" has the same meaning	355
as in section 4723.01 of the Revised Code.	356
(B) "Patient centered medical home education advisory group"	357
means the entity established under section 3701.924 of the Revised	358
Code.	359
(C) "Patient centered medical home education program" means	360
the program established under section 3701.921 of the Revised Code	361
and any pilot projects operated pursuant to that section.	362
(D) "Patient centered medical home education pilot project"	363
means the pilot project established under section 3701.923 of the	364
Revised Code.	365
(E) "Physician assistant" has the same meaning as in section	366
4730.01 means any person who is licensed as a physician assistant	367
under Chapter 4730. of the Revised Code.	368
Sec. 3727.06. (A) As used in this section:	369
(1) "Doctor" means an individual authorized to practice	370
medicine and surgery or osteopathic medicine and surgery.	371
(2) "Podiatrist" means an individual authorized to practice	372
podiatric medicine and surgery.	373
(B)(1) Only the following may admit a patient to a hospital:	374
(a) A doctor who is a member of the hospital's medical staff;	375
(b) A dentist who is a member of the hospital's medical	376
staff;	377
(c) A podiatrist who is a member of the hospital's medical	378
staff;	379
(d) A clinical nurse specialist, certified nurse-midwife, or	380
certified nurse practitioner if all of the following conditions	381

are met:	382
(i) The clinical nurse specialist, certified nurse-midwife,	383
or certified nurse practitioner has a standard care arrangement	384
entered into pursuant to section 4723.431 of the Revised Code with	385
a collaborating doctor or podiatrist who is a member of the	386
medical staff;	387
(ii) The patient will be under the medical supervision of the	388
collaborating doctor or podiatrist;	389
(iii) The hospital has granted the clinical nurse specialist,	390
certified nurse-midwife, or certified nurse practitioner admitting	391
privileges and appropriate credentials.	392
(e) A physician assistant if all of the following conditions	393
are met:	394
(i) The physician assistant is listed on a supervision	395
agreement approved entered into under section 4730.19 of the	396
Revised Code for a doctor or podiatrist who is a member of the	397
hospital's medical staff.	398
(ii) The patient will be under the medical supervision of the	399
supervising doctor or podiatrist.	400
(iii) The hospital has granted the physician assistant	401
admitting privileges and appropriate credentials.	402
(2) Prior to admitting a patient, a clinical nurse	403
specialist, certified nurse-midwife, certified nurse practitioner,	404
or physician assistant shall notify the collaborating or	405
supervising doctor or podiatrist of the planned admission.	406
(C) All hospital patients shall be under the medical	407
supervision of a doctor, except that services that may be rendered	408
by a licensed dentist pursuant to Chapter 4715. of the Revised	409
Code provided to patients admitted solely for the purpose of	410
receiving such services shall be under the supervision of the	411

440

441

442

admitting dentist and that services that may be rendered by a	412
podiatrist pursuant to section 4731.51 of the Revised Code	413
provided to patients admitted solely for the purpose of receiving	414
such services shall be under the supervision of the admitting	415
podiatrist. If treatment not within the scope of Chapter 4715. or	416
section 4731.51 of the Revised Code is required at the time of	417
admission by a dentist or podiatrist, or becomes necessary during	418
the course of hospital treatment by a dentist or podiatrist, such	419
treatment shall be under the supervision of a doctor who is a	420
member of the medical staff. It shall be the responsibility of the	421
admitting dentist or podiatrist to make arrangements with a doctor	422
who is a member of the medical staff to be responsible for the	423
patient's treatment outside the scope of Chapter 4715. or section	424
4731.51 of the Revised Code when necessary during the patient's	425
stay in the hospital.	426

Sec. 3729.05. (A)(1) On Except as otherwise provided in this 427 section, on or after the first day of April, but before the first 428 day of May of each year, every person who intends to operate a 429 recreational vehicle park, recreation camp, or combined park-camp 430 shall procure a license to operate the park or camp from the 431 licensor. If the applicable license fee prescribed under section 432 3729.07 of the Revised Code is not received by the licensor by the 433 close of business on the last day of April, the applicant for the 434 license shall pay a penalty equal to twenty-five per cent of the 435 applicable license fee. The penalty shall accompany the license 436 fee. If the last day of April is not a business day, the penalty 437 attaches upon the close of business on the next business day. 438

(2) Every person who intends to operate a temporary park-camp shall obtain a license to operate the temporary park-camp from the licensor at any time before the person begins operation of the temporary park-camp during the calendar year.

As Re-reported by the Senate Rules Committee

(3) No recreational vehicle park, recreation camp, combined 443 park-camp, or temporary park-camp shall be maintained or operated 444 in this state without a license. However, no person who neither 445 intends to receive nor receives anything of value arising from the 446 use of, or the sale of goods or services in connection with the 447 use of, a recreational vehicle park, recreation camp, combined 448 449 park-camp, or temporary park-camp is required to procure a license under this division. If any health hazard exists at such an 450 unlicensed park, camp, or park-camp, the health hazard shall be 451 corrected in a manner consistent with the appropriate rule adopted 452 under division (A) or (B) of section 3729.02 of the Revised Code. 453

- (4) No person who has received a license under division 454 (A)(1) of this section, upon the sale or disposition of the 455 recreational vehicle park, recreation camp, or combined park-camp, 456 may have the license transferred to the new operator. A person 457 shall obtain a separate license to operate each recreational 458 vehicle park, recreation camp, or combined park-camp. No license 459 to operate a temporary park-camp shall be transferred. A person 460 shall obtain a separate license for each temporary park-camp that 461 the person intends to operate, and the license shall be valid for 462 a period of not longer than seven consecutive days. A person who 463 operates a temporary park-camp on a tract of land for more than 464 twenty-one days or parts thereof in a calendar year shall obtain a 465 license to operate a recreational vehicle park, recreation camp, 466 or combined park-camp. 467
- (B)(1) Before a license is initially issued under division (A)(1) of this section and annually thereafter, or more often if necessary, the licensor shall cause each recreational vehicle park, recreation camp, or combined park-camp to be inspected to determine compliance with this chapter and rules adopted under it. A record shall be made of each inspection on a form prescribed by the director of health.

468

469

470

471

472

473

- (2) When a license is initially issued under division (A)(2) 475 of this section, and more often if necessary, the licensor shall 476 cause each temporary park-camp to be inspected to determine 477 compliance with this chapter and rules adopted under it during the 478 period that the temporary park-camp is in operation. A record 479 shall be made of each inspection on a form prescribed by the 480 director.
- (C) Each person applying for an initial license to operate a recreational vehicle park, recreation camp, combined park-camp, or temporary park-camp shall provide acceptable proof to the director, or to the licensor in the case of a temporary park-camp, that adequate fire protection will be provided and that applicable fire codes will be adhered to in the construction and operation of the park, camp, or park-camp.
- (D) Any person that operates a county or state fair or any 489 independent agricultural society organized pursuant to section 490 1711.02 of the Revised Code that operates a fair shall not be 491 required to obtain a license under this chapter if recreational 492 vehicles, portable camping units, or any combination of them are 493 parked at the site of the fair only during the time of preparation 494 for, operation of, and dismantling of the fair and if the 495 recreational vehicles, portable camping units, or any combination 496 of them belong to participants in the fair. 497
- (E) The following entities that operate a fair and that hold 498 a license issued under this chapter are not required to comply 499 with the requirements normally imposed on a licensee under this 500 chapter and rules adopted under it during the time of preparation 501 for, operation of, and dismantling of the fair: 502
- (1) A county agricultural society organized pursuant to 503 section 1711.01 of the Revised Code; 504
  - (2) An independent agricultural society organized pursuant to 505

Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee	Page 18
section 1711.02 of the Revised Code;	506
(3) The Ohio expositions commission.	507
(F) A motorsports park is exempt from the license	508
requirements established in divisions (A)(1) and (2) of this	509
section if the motorsports park does both of the following:	510
(1) Holds at least one annual event sanctioned by the	511
national association for stock car auto racing or the national hot	512
rod association during a motor sports racing event;	513
(2) Provides parking for recreational vehicles, dependent	514
recreational vehicles, and portable camping units that belong to	515
participants in that event.	516
The exemption established in this division applies to	517
participant-only areas during the time of preparation for and	518
operation of the event.	519
(G) A person subject to this chapter or rules adopted under	520
it may apply to the director for a waiver of or variance from a	521
provision of this chapter or rules adopted under it. The director	522
may grant a waiver or variance if the person demonstrates, to the	523
satisfaction of the director, that the waiver or variance will not	524
result in any adverse effect on the public health and safety. The	525
director shall adopt rules in accordance with Chapter 119. of the	526
Revised Code establishing requirements and procedures governing	527
the application for and granting of a waiver or variance under	528
this division.	529
Sec. 4123.01. As used in this chapter:	530
(A)(1) "Employee" means:	531
(a) Every person in the service of the state, or of any	532
county, municipal corporation, township, or school district	533
therein, including regular members of lawfully constituted police	534
and fire departments of municipal corporations and townships,	535

whether paid or volunteer, and wherever serving within the state	536
or on temporary assignment outside thereof, and executive officers	537
of boards of education, under any appointment or contract of hire,	538
express or implied, oral or written, including any elected	539
official of the state, or of any county, municipal corporation, or	540
township, or members of boards of education.	541
As used in division $(A)(1)(a)$ of this section, the term	542
"employee" includes the following persons when responding to an	543
inherently dangerous situation that calls for an immediate	544
response on the part of the person, regardless of whether the	545
person is within the limits of the jurisdiction of the person's	546
regular employment or voluntary service when responding, on the	547
condition that the person responds to the situation as the person	548
otherwise would if the person were on duty in the person's	549
jurisdiction:	550
(i) Off-duty peace officers. As used in division (A)(1)(a)(i)	551
of this section, "peace officer" has the same meaning as in	552
section 2935.01 of the Revised Code.;	553
(ii) Off-duty firefighters, whether paid or volunteer, of a	554
lawfully constituted fire department.;	555
(iii) Off-duty first responders, emergency medical	556
technicians-basic, emergency medical technicians-intermediate, or	557
emergency medical technicians paramedic, whether paid or	558
volunteer, emergency medical workers of an ambulance service	559
organization or emergency medical service organization pursuant to	560
Chapter 4765. of the Revised Code.	561
(b) Every person in the service of any person, firm, or	562
private corporation, including any public service corporation,	563
that (i) employs one or more persons regularly in the same	564
business or in or about the same establishment under any contract	565

of hire, express or implied, oral or written, including aliens and

minors, household workers who earn one hundred sixty dollars or	567
more in cash in any calendar quarter from a single household and	568
casual workers who earn one hundred sixty dollars or more in cash	569
in any calendar quarter from a single employer, or (ii) is bound	570
by any such contract of hire or by any other written contract, to	571
pay into the state insurance fund the premiums provided by this	572
chapter.	573
(c) Every person who performs labor or provides services	574
pursuant to a construction contract, as defined in section 4123.79	575
of the Revised Code, if at least ten of the following criteria	576
apply:	577
(i) The person is required to comply with instructions from	578
the other contracting party regarding the manner or method of	579
performing services;	580
(ii) The person is required by the other contracting party to	581
have particular training;	582
(iii) The person's services are integrated into the regular	583
functioning of the other contracting party;	584
(iv) The person is required to perform the work personally;	585
(v) The person is hired, supervised, or paid by the other	586
contracting party;	587
(vi) A continuing relationship exists between the person and	588
the other contracting party that contemplates continuing or	589
recurring work even if the work is not full time;	590
(vii) The person's hours of work are established by the other	591
contracting party;	592
	E 0.2
(viii) The person is required to devote full time to the	593
business of the other contracting party;	594
(ix) The person is required to perform the work on the	595
premises of the other contracting party;	596

(x) The person is required to follow the order of work set by the other contracting party;	597 598
the other contracting party.	370
(xi) The person is required to make oral or written reports	599
of progress to the other contracting party;	600
(xii) The person is paid for services on a regular basis such	601
as hourly, weekly, or monthly;	602
(xiii) The person's expenses are paid for by the other	603
contracting party;	604
(xiv) The person's tools and materials are furnished by the	605
other contracting party;	606
(xv) The person is provided with the facilities used to	607
perform services;	608
(xvi) The person does not realize a profit or suffer a loss	609
as a result of the services provided;	610
(xvii) The person is not performing services for a number of	611
employers at the same time;	612
(xviii) The person does not make the same services available	613
to the general public;	614
(xix) The other contracting party has a right to discharge	615
the person;	616
(xx) The person has the right to end the relationship with	617
the other contracting party without incurring liability pursuant	618
to an employment contract or agreement.	619
Every person in the service of any independent contractor or	620
subcontractor who has failed to pay into the state insurance fund	621
the amount of premium determined and fixed by the administrator of	622
workers' compensation for the person's employment or occupation or	623
if a self-insuring employer has failed to pay compensation and	624
benefits directly to the employer's injured and to the dependents	625
of the employer's killed employees as required by section 4123.35	626

of the Revised Code, shall be considered as the employee of the	627
person who has entered into a contract, whether written or verbal,	628
with such independent contractor unless such employees or their	629
legal representatives or beneficiaries elect, after injury or	630
death, to regard such independent contractor as the employer.	631
(2) "Employee" does not mean:	632
(a) A duly ordained, commissioned, or licensed minister or	633
assistant or associate minister of a church in the exercise of	634
ministry;	635
(b) Any officer of a family farm corporation;	636
(c) An individual incorporated as a corporation; or	637
(d) An individual who otherwise is an employee of an employer	638
but who signs the waiver and affidavit specified in section	639
4123.15 of the Revised Code on the condition that the	640
administrator has granted a waiver and exception to the	641
individual's employer under section 4123.15 of the Revised Code.	642
Any employer may elect to include as an "employee" within	643
this chapter, any person excluded from the definition of	644
"employee" pursuant to division (A)(2) of this section. If an	645
employer is a partnership, sole proprietorship, individual	646
incorporated as a corporation, or family farm corporation, such	647
employer may elect to include as an "employee" within this	648
chapter, any member of such partnership, the owner of the sole	649
proprietorship, the individual incorporated as a corporation, or	650
the officers of the family farm corporation. In the event of an	651
election, the employer shall serve upon the bureau of workers'	652
compensation written notice naming the persons to be covered,	653
include such employee's remuneration for premium purposes in all	654
future payroll reports, and no person excluded from the definition	655
of "employee" pursuant to division (A)(2) of this section,	656

proprietor, individual incorporated as a corporation, or partner

shall be deemed an employee within this division until the 658 employer has served such notice. 659

For informational purposes only, the bureau shall prescribe 660 such language as it considers appropriate, on such of its forms as 661 it considers appropriate, to advise employers of their right to 662 elect to include as an "employee" within this chapter a sole 663 proprietor, any member of a partnership, an individual 664 incorporated as a corporation, the officers of a family farm 665 corporation, or a person excluded from the definition of 666 "employee" under division (A)(2) of this section, that they should 667 check any health and disability insurance policy, or other form of 668 health and disability plan or contract, presently covering them, 669 or the purchase of which they may be considering, to determine 670 whether such policy, plan, or contract excludes benefits for 671 illness or injury that they might have elected to have covered by 672 workers' compensation. 673

### (B) "Employer" means:

- (1) The state, including state hospitals, each county, 675 municipal corporation, township, school district, and hospital 676 owned by a political subdivision or subdivisions other than the 677 state; 678
- (2) Every person, firm, professional employer organization, 679 and private corporation, including any public service corporation, 680 that (a) has in service one or more employees or shared employees 681 regularly in the same business or in or about the same 682 establishment under any contract of hire, express or implied, oral 683 or written, or (b) is bound by any such contract of hire or by any 684 other written contract, to pay into the insurance fund the 685 premiums provided by this chapter. 686

All such employers are subject to this chapter. Any member of a firm or association, who regularly performs manual labor in or 688

fitness activity;

household establishment, shall be considered an employee in determining whether such person, firm, or private corporation, or public service corporation, has in its service, one or more employees and the employer shall report the income derived from such labor to the bureau as part of the payroll of such employer, and such member shall thereupon be entitled to all the benefits of an employee.  (C) "Injury" includes any injury, whether caused by external accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (C) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or		
determining whether such person, firm, or private corporation, or public service corporation, has in its service, one or more employees and the employer shall report the income derived from such labor to the bureau as part of the payroll of such employer, and such member shall thereupon be entitled to all the benefits of an employee.  (C) "Injury" includes any injury, whether caused by external accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer. firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	about a mine, factory, or other establishment, including a	689
public service corporation, has in its service, one or more employees and the employer shall report the income derived from such labor to the bureau as part of the payroll of such employer, and such member shall thereupon be entitled to all the benefits of an employee.  (C) "Injury" includes any injury, whether caused by external accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer.  firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	household establishment, shall be considered an employee in	690
employees and the employer shall report the income derived from such labor to the bureau as part of the payroll of such employer, and such member shall thereupon be entitled to all the benefits of an employee.  (C) "Injury" includes any injury, whether caused by external accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	determining whether such person, firm, or private corporation, or	691
such labor to the bureau as part of the payroll of such employer, and such member shall thereupon be entitled to all the benefits of an employee.  (C) "Injury" includes any injury, whether caused by external accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	public service corporation, has in its service, one or more	692
and such member shall thereupon be entitled to all the benefits of an employee.  (C) "Injury" includes any injury, whether caused by external accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	employees and the employer shall report the income derived from	693
an employee.  (C) "Injury" includes any injury, whether caused by external accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	such labor to the bureau as part of the payroll of such employer,	694
(C) "Injury" includes any injury, whether caused by external accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	and such member shall thereupon be entitled to all the benefits of	695
accidental means or accidental in character and result, received in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	an employee.	696
in the course of, and arising out of, the injured employee's employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	(C) "Injury" includes any injury, whether caused by external	697
employment. "Injury" does not include:  (1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	accidental means or accidental in character and result, received	698
(1) Psychiatric conditions except where as follows:  (a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	in the course of, and arising out of, the injured employee's	699
(a) Where the claimant's psychiatric conditions have arisen from an injury or occupational disease sustained by that claimant or where;  (b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer.  (1) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	employment. "Injury" does not include:	700
from an injury or occupational disease sustained by that claimant  or where;  (b) Where the claimant's psychiatric conditions have arisen  from sexual conduct in which the claimant was forced by threat of  physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or  emergency medical worker and is diagnosed with post-traumatic  stress disorder that has been received in the course of, and has  arisen out of, the claimant's employment as a peace officer,  firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural  deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation  in an employer-sponsored recreation or fitness activity if the  employee signs a waiver of the employee's right to compensation or	(1) Psychiatric conditions except where as follows:	701
(b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	(a) Where the claimant's psychiatric conditions have arisen	702
(b) Where the claimant's psychiatric conditions have arisen from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	from an injury or occupational disease sustained by that claimant	703
from sexual conduct in which the claimant was forced by threat of physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	<del>or where</del> ;	704
physical harm to engage or participate;  (c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	(b) Where the claimant's psychiatric conditions have arisen	705
(c) Where the claimant is a peace officer, firefighter, or emergency medical worker and is diagnosed with post-traumatic stress disorder that has been received in the course of, and has arisen out of, the claimant's employment as a peace officer, firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	from sexual conduct in which the claimant was forced by threat of	706
emergency medical worker and is diagnosed with post-traumatic  stress disorder that has been received in the course of, and has  arisen out of, the claimant's employment as a peace officer,  firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural  deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation  in an employer-sponsored recreation or fitness activity if the  employee signs a waiver of the employee's right to compensation or	physical harm to engage or participate;	707
stress disorder that has been received in the course of, and has  arisen out of, the claimant's employment as a peace officer,  firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural  deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation  in an employer-sponsored recreation or fitness activity if the  employee signs a waiver of the employee's right to compensation or	(c) Where the claimant is a peace officer, firefighter, or	708
arisen out of, the claimant's employment as a peace officer,  firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	emergency medical worker and is diagnosed with post-traumatic	709
firefighter, or emergency medical worker.  (2) Injury or disability caused primarily by the natural  deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation  in an employer-sponsored recreation or fitness activity if the  employee signs a waiver of the employee's right to compensation or	stress disorder that has been received in the course of, and has	710
(2) Injury or disability caused primarily by the natural  deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation  in an employer-sponsored recreation or fitness activity if the  employee signs a waiver of the employee's right to compensation or	arisen out of, the claimant's employment as a peace officer,	711
deterioration of tissue, an organ, or part of the body;  (3) Injury or disability incurred in voluntary participation in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or	firefighter, or emergency medical worker.	712
(3) Injury or disability incurred in voluntary participation 71 in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or 71	(2) Injury or disability caused primarily by the natural	713
in an employer-sponsored recreation or fitness activity if the employee signs a waiver of the employee's right to compensation or 71	deterioration of tissue, an organ, or part of the body;	714
employee signs a waiver of the employee's right to compensation or 71	(3) Injury or disability incurred in voluntary participation	715
	in an employer-sponsored recreation or fitness activity if the	716
2 City 2 (2)	employee signs a waiver of the employee's right to compensation or	717
benefits under this chapter prior to engaging in the recreation or	benefits under this chapter prior to engaging in the recreation or	718

- (4) A condition that pre-existed an injury unless that 720 pre-existing condition is substantially aggravated by the injury. 721 Such a substantial aggravation must be documented by objective 722 diagnostic findings, objective clinical findings, or objective 723 test results. Subjective complaints may be evidence of such a 724 substantial aggravation. However, subjective complaints without 725 objective diagnostic findings, objective clinical findings, or 726 objective test results are insufficient to substantiate a 727 substantial aggravation. 728
- (D) "Child" includes a posthumous child and a child legally 729 adopted prior to the injury. 730
- (E) "Family farm corporation" means a corporation founded for 731 the purpose of farming agricultural land in which the majority of 732 the voting stock is held by and the majority of the stockholders 733 are persons or the spouse of persons related to each other within 734 the fourth degree of kinship, according to the rules of the civil 735 law, and at least one of the related persons is residing on or 736 actively operating the farm, and none of whose stockholders are a 737 corporation. A family farm corporation does not cease to qualify 738 under this division where, by reason of any devise, bequest, or 739 the operation of the laws of descent or distribution, the 740 ownership of shares of voting stock is transferred to another 741 person, as long as that person is within the degree of kinship 742 stipulated in this division. 743
- (F) "Occupational disease" means a disease contracted in the

  744

  course of employment, which by its causes and the characteristics

  745

  of its manifestation or the condition of the employment results in

  746

  a hazard which distinguishes the employment in character from

  747

  employment generally, and the employment creates a risk of

  748

  contracting the disease in greater degree and in a different

  749

  manner from the public in general.
  - (G) "Self-insuring employer" means an employer who is granted

the privilege of paying compensation and benefits directly under	752
section 4123.35 of the Revised Code, including a board of county	753
commissioners for the sole purpose of constructing a sports	754
facility as defined in section 307.696 of the Revised Code,	755
provided that the electors of the county in which the sports	756
facility is to be built have approved construction of a sports	757
facility by ballot election no later than November 6, 1997.	758
(H) "Private employer" means an employer as defined in	759
division (B)(2) of this section.	760
(I) "Professional employer organization" has the same meaning	761
as in section 4125.01 of the Revised Code.	762
(J) "Public employer" means an employer as defined in	763
division (B)(1) of this section.	764
(K) "Sexual conduct" means vaginal intercourse between a male	765
and female; anal intercourse, fellatio, and cunnilingus between	766
persons regardless of gender; and, without privilege to do so, the	767
insertion, however slight, of any part of the body or any	768
instrument, apparatus, or other object into the vaginal or anal	769
cavity of another. Penetration, however slight, is sufficient to	770
complete vaginal or anal intercourse.	771
(L) "Other-states' insurer" means an insurance company that	772
is authorized to provide workers' compensation insurance coverage	773
in any of the states that permit employers to obtain insurance for	774
workers' compensation claims through insurance companies.	775
(M) "Other-states' coverage" means both of the following:	776
(1) Insurance coverage secured by an eligible employer for	777
workers' compensation claims of employees who are in employment	778
relationships localized in a state other than this state or those	779
employees' dependents;	780

(2) Insurance coverage secured by an eligible employer for

809

810

811

812

workers' compensation claims that arise in a state other than this	782
state where an employer elects to obtain coverage through either	783
the administrator or an other-states' insurer.	784
(N) "Limited other-states coverage" means insurance coverage	785
provided by the administrator to an eligible employer for workers'	786
compensation claims of employees who are in an employment	787
relationship localized in this state but are temporarily working	788
in a state other than this state, or those employees' dependents.	789
(0) "Peace officer" has the same meaning as in section	790
2935.01 of the Revised Code.	791
(P) "Firefighter" means a firefighter, whether paid or	792
volunteer, of a lawfully constituted fire department.	793
(0) "Emergency medical worker" means a first responder,	794
emergency medical technician-basic, emergency medical	795
technician-intermediate, or emergency medical	796
technician-paramedic, certified under Chapter 4765. of the Revised	797
Code, whether paid or volunteer.	798
Sec. 4123.026. (A) The administrator of workers'	799
compensation, or a self-insuring public employer for the peace	800
officers, firefighters, and emergency medical workers employed by	801
or volunteering for that self-insuring public employer, shall pay	802
the costs of conducting post-exposure medical diagnostic services,	803
consistent with the standards of medical care existing at the time	804
of the exposure, to investigate whether an injury or occupational	805
disease was sustained by a peace officer, firefighter, or	806
emergency medical worker when coming into contact with the blood	807

or other body fluid of another person in the course of and arising

worker's employment, or when responding to an inherently dangerous

situation in the manner described in, and in accordance with the

conditions specified under, division (A)(1)(a) of section 4123.01

out of the peace officer's, firefighter's, or emergency medical

Page 28

Sub. H. B. No. 412

862

863

864

865

866

867

868

869

870

situations that call for an immediate response on the part of the	843
person, regardless of whether the person was within the limits of	844
the person's jurisdiction when responding, on the condition that	845
the person responds to the situation as the person otherwise would	846
if the person were on duty in the person's jurisdiction.	847

As used in division (A)(2) of this section, "peace officer," 848

"firefighter," and "emergency medical technician," "first 849

responder worker," and "jurisdiction" have the same meanings as in 850

section 4123.01 of the Revised Code. 851

(B) All self-insuring employers, in compliance with this 852 chapter, shall pay the compensation to injured employees, or to 853 the dependents of employees who have been killed in the course of 854 their employment, unless the injury or death of the employee was 855 purposely self-inflicted, and shall furnish the medical, surgical, 856 nurse, and hospital care and attention or funeral expenses as 857 would have been paid and furnished by virtue of this chapter under 858 a similar state of facts by the bureau out of the state insurance 859 fund if the employer had paid the premium into the fund. 860

If any rule or regulation of a self-insuring employer provides for or authorizes the payment of greater compensation or more complete or extended medical care, nursing, surgical, and hospital attention, or funeral expenses to the injured employees, or to the dependents of the employees as may be killed, the employer shall pay to the employees, or to the dependents of employees killed, the amount of compensation and furnish the medical care, nursing, surgical, and hospital attention or funeral expenses provided by the self-insuring employer's rules and regulations.

(C) Payment to injured employees, or to their dependents in 871 case death has ensued, is in lieu of any and all rights of action 872 against the employer of the injured or killed employees. 873

Sec. 4503.44. (A) As used in this section and in section	874
4511.69 of the Revised Code:	875
(1) "Person with a disability that limits or impairs the	876
ability to walk" means any person who, as determined by a health	877
care provider, meets any of the following criteria:	878
(a) Cannot walk two hundred feet without stopping to rest;	879
(b) Cannot walk without the use of, or assistance from, a	880
brace, cane, crutch, another person, prosthetic device,	881
wheelchair, or other assistive device;	882
(c) Is restricted by a lung disease to such an extent that	883
the person's forced (respiratory) expiratory volume for one	884
second, when measured by spirometry, is less than one liter, or	885
the arterial oxygen tension is less than sixty millimeters of	886
mercury on room air at rest;	887
(d) Uses portable oxygen;	888
(e) Has a cardiac condition to the extent that the person's	889
functional limitations are classified in severity as class III or	890
class IV according to standards set by the American heart	891
association;	892
(f) Is severely limited in the ability to walk due to an	893
arthritic, neurological, or orthopedic condition;	894
(g) Is blind, legally blind, or severely visually impaired.	895
(2) "Organization" means any private organization or	896
corporation, or any governmental board, agency, department,	897
division, or office, that, as part of its business or program,	898
transports persons with disabilities that limit or impair the	899
ability to walk on a regular basis in a motor vehicle that has not	900
been altered for the purpose of providing it with special	901
equipment for use by persons with disabilities. This definition	902
does not apply to division (I) of this section.	903

(3) "Health care provider" means a physician, physician 904 assistant, advanced practice registered nurse, optometrist, or 905 chiropractor as defined in this section except that an optometrist 906 shall only make determinations as to division (A)(1)(g) of this 907 section. 908 (4) "Physician" means a person licensed to practice medicine 909 or surgery or osteopathic medicine and surgery under Chapter 4731. 910 of the Revised Code. 911 (5) "Chiropractor" means a person licensed to practice 912 chiropractic under Chapter 4734. of the Revised Code. 913 (6) "Advanced practice registered nurse" means a certified 914 nurse practitioner, clinical nurse specialist, certified 915 registered nurse anesthetist, or certified nurse-midwife who holds 916 a certificate of authority issued by the board of nursing under 917 Chapter 4723. of the Revised Code. 918 (7) "Physician assistant" means a person who holds a 919 certificate to practice as a physician assistant issued is 920 licensed as a physician assistant under Chapter 4730. of the 921 Revised Code. 922 (8) "Optometrist" means a person licensed to engage in the 923 practice of optometry under Chapter 4725. of the Revised Code. 924 (B)(1) An organization, or a person with a disability that 925 limits or impairs the ability to walk, may apply for the 926 registration of any motor vehicle the organization or person owns 927 or leases. When a motor vehicle has been altered for the purpose 928 of providing it with special equipment for a person with a 929 disability that limits or impairs the ability to walk, but is 930 owned or leased by someone other than such a person, the owner or 931 lessee may apply to the registrar or a deputy registrar for 932 registration under this section. The application for registration 933

of a motor vehicle owned or leased by a person with a disability

that limits or impairs the ability to walk shall be accompanied by 935 a signed statement from the applicant's health care provider 936 certifying that the applicant meets at least one of the criteria 937 contained in division (A)(1) of this section and that the 938 disability is expected to continue for more than six consecutive 939 months. The application for registration of a motor vehicle that 940 has been altered for the purpose of providing it with special 941 equipment for a person with a disability that limits or impairs 942 the ability to walk but is owned by someone other than such a 943 person shall be accompanied by such documentary evidence of 944 vehicle alterations as the registrar may require by rule. 945

(2) When an organization, a person with a disability that 946 limits or impairs the ability to walk, or a person who does not 947 have a disability that limits or impairs the ability to walk but 948 owns a motor vehicle that has been altered for the purpose of 949 providing it with special equipment for a person with a disability 950 that limits or impairs the ability to walk first submits an 951 application for registration of a motor vehicle under this section 952 and every fifth year thereafter, the organization or person shall 953 submit a signed statement from the applicant's health care 954 provider, a completed application, and any required documentary 955 evidence of vehicle alterations as provided in division (B)(1) of 956 this section, and also a power of attorney from the owner of the 957 motor vehicle if the applicant leases the vehicle. Upon submission 958 of these items, the registrar or deputy registrar shall issue to 959 the applicant appropriate vehicle registration and a set of 960 license plates and validation stickers, or validation stickers 961 alone when required by section 4503.191 of the Revised Code. In 962 addition to the letters and numbers ordinarily inscribed thereon, 963 the license plates shall be imprinted with the international 964 symbol of access. The license plates and validation stickers shall 965 be issued upon payment of the regular license fee as prescribed 966 under section 4503.04 of the Revised Code and any motor vehicle 967

999

tax levied under Chapter 4504. of the Revised Code, and the	968
payment of a service fee equal to the amount specified in division	969
(D) or (G) of section 4503.10 of the Revised Code.	970

(C)(1) A person with a disability that limits or impairs the 971 ability to walk may apply to the registrar of motor vehicles for a 972 removable windshield placard by completing and signing an 973 application provided by the registrar. The person shall include 974 with the application a prescription from the person's health care 975 provider prescribing such a placard for the person based upon a 976 determination that the person meets at least one of the criteria 977 contained in division (A)(1) of this section. The health care 978 provider shall state on the prescription the length of time the 979 health care provider expects the applicant to have the disability 980 that limits or impairs the person's ability to walk. 981

In addition to one placard or one or more sets of license 982 plates, a person with a disability that limits or impairs the 983 ability to walk is entitled to one additional placard, but only if 984 the person applies separately for the additional placard, states 985 the reasons why the additional placard is needed, and the 986 registrar, in the registrar's discretion determines that good and 987 justifiable cause exists to approve the request for the additional 988 placard. 989

- (2) An organization may apply to the registrar of motor 990 vehicles for a removable windshield placard by completing and 991 signing an application provided by the registrar. The organization 992 shall comply with any procedures the registrar establishes by 993 rule. The organization shall include with the application 994 documentary evidence that the registrar requires by rule showing 995 that the organization regularly transports persons with 996 disabilities that limit or impair the ability to walk. 997
- (3) Upon receipt of a completed and signed application for a removable windshield placard, the accompanying documents required

under division $(C)(1)$ or $(2)$ of this section, and payment of a	1000
service fee equal to the amount specified in division (D) or (G)	1001
of section 4503.10 of the Revised Code, the registrar or deputy	1002
registrar shall issue to the applicant a removable windshield	1003
placard, which shall bear the date of expiration on both sides of	1004
the placard and shall be valid until expired, revoked, or	1005
surrendered. Every removable windshield placard expires as	1006
described in division (C)(4) of this section, but in no case shall	1007
a removable windshield placard be valid for a period of less than	1008
sixty days. Removable windshield placards shall be renewable upon	1009
application as provided in division (C)(1) or (2) of this section	1010
and upon payment of a service fee equal to the amount specified in	1011
division (D) or (G) of section 4503.10 of the Revised Code for the	1012
renewal of a removable windshield placard. The registrar shall	1013
provide the application form and shall determine the information	1014
to be included thereon. The registrar also shall determine the	1015
form and size of the removable windshield placard, the material of	1016
which it is to be made, and any other information to be included	1017
thereon, and shall adopt rules relating to the issuance,	1018
expiration, revocation, surrender, and proper display of such	1019
placards. Any placard issued after October 14, 1999, shall be	1020
manufactured in a manner that allows the expiration date of the	1021
placard to be indicated on it through the punching, drilling,	1022
boring, or creation by any other means of holes in the placard.	1023

(4) At the time a removable windshield placard is issued to a 1024 person with a disability that limits or impairs the ability to 1025 walk, the registrar or deputy registrar shall enter into the 1026 records of the bureau of motor vehicles the last date on which the 1027 person will have that disability, as indicated on the accompanying 1028 prescription. Not less than thirty days prior to that date and all 1029 removable windshield placard renewal dates, the bureau shall send 1030 a renewal notice to that person at the person's last known address 1031 as shown in the records of the bureau, informing the person that 1032

#### Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

the person's removable windshield placard will expire on the	1033
indicated date not to exceed five years from the date of issuance,	1034
and that the person is required to renew the placard by submitting	1035
to the registrar or a deputy registrar another prescription, as	1036
described in division $(C)(1)$ or $(2)$ of this section, and by	1037
complying with the renewal provisions prescribed in division	1038
(C)(3) of this section. If such a prescription is not received by	1039
the registrar or a deputy registrar by that date, the placard	1040
issued to that person expires and no longer is valid, and this	1041
fact shall be recorded in the records of the bureau.	1042

(5) At least once every year, on a date determined by the 1043 registrar, the bureau shall examine the records of the office of 1044 vital statistics, located within the department of health, that 1045 pertain to deceased persons, and also the bureau's records of all 1046 persons who have been issued removable windshield placards and 1047 temporary removable windshield placards. If the records of the 1048 office of vital statistics indicate that a person to whom a 1049 removable windshield placard or temporary removable windshield 1050 placard has been issued is deceased, the bureau shall cancel that 1051 placard, and note the cancellation in its records. 1052

The office of vital statistics shall make available to the 1053 bureau all information necessary to enable the bureau to comply 1054 with division (C)(5) of this section. 1055

- (6) Nothing in this section shall be construed to require a 1056 person or organization to apply for a removable windshield placard 1057 or special license plates if the special license plates issued to 1058 the person or organization under prior law have not expired or 1059 been surrendered or revoked.
- (D)(1)(a) A person with a disability that limits or impairs 1061 the ability to walk may apply to the registrar or a deputy 1062 registrar for a temporary removable windshield placard. The 1063 application for a temporary removable windshield placard shall be 1064

accompanied by a prescription from the applicant's health care 1065 provider prescribing such a placard for the applicant, provided 1066 that the applicant meets at least one of the criteria contained in 1067 division (A)(1) of this section and that the disability is 1068 expected to continue for six consecutive months or less. The 1069 health care provider shall state on the prescription the length of 1070 time the health care provider expects the applicant to have the 1071 disability that limits or impairs the applicant's ability to walk, 1072 which cannot exceed six months from the date of the prescription. 1073 Upon receipt of an application for a temporary removable 1074 windshield placard, presentation of the prescription from the 1075 applicant's health care provider, and payment of a service fee 1076 equal to the amount specified in division (D) or (G) of section 1077 4503.10 of the Revised Code, the registrar or deputy registrar 1078 shall issue to the applicant a temporary removable windshield 1079 placard. 1080

(b) Any active-duty member of the armed forces of the United 1081 States, including the reserve components of the armed forces and 1082 the national guard, who has an illness or injury that limits or 1083 impairs the ability to walk may apply to the registrar or a deputy 1084 registrar for a temporary removable windshield placard. With the 1085 application, the person shall present evidence of the person's 1086 active-duty status and the illness or injury. Evidence of the 1087 illness or injury may include a current department of defense 1088 convalescent leave statement, any department of defense document 1089 indicating that the person currently has an ill or injured 1090 casualty status or has limited duties, or a prescription from any 1091 health care provider prescribing the placard for the applicant. 1092 Upon receipt of the application and the necessary evidence, the 1093 registrar or deputy registrar shall issue the applicant the 1094 temporary removable windshield placard without the payment of any 1095 service fee. 1096

- (2) The temporary removable windshield placard shall be of 1097 the same size and form as the removable windshield placard, shall 1098 be printed in white on a red-colored background, and shall bear 1099 the word "temporary" in letters of such size as the registrar 1100 shall prescribe. A temporary removable windshield placard also 1101 shall bear the date of expiration on the front and back of the 1102 placard, and shall be valid until expired, surrendered, or 1103 revoked, but in no case shall such a placard be valid for a period 1104 of less than sixty days. The registrar shall provide the 1105 application form and shall determine the information to be 1106 included on it, provided that the registrar shall not require a 1107 health care provider's prescription or certification for a person 1108 applying under division (D)(1)(b) of this section. The registrar 1109 also shall determine the material of which the temporary removable 1110 windshield placard is to be made and any other information to be 1111 included on the placard and shall adopt rules relating to the 1112 issuance, expiration, surrender, revocation, and proper display of 1113 those placards. Any temporary removable windshield placard issued 1114 after October 14, 1999, shall be manufactured in a manner that 1115 allows for the expiration date of the placard to be indicated on 1116 it through the punching, drilling, boring, or creation by any 1117 other means of holes in the placard. 1118
- (E) If an applicant for a removable windshield placard is a 1119 veteran of the armed forces of the United States whose disability, 1120 as defined in division (A)(1) of this section, is 1121 service-connected, the registrar or deputy registrar, upon receipt 1122 of the application, presentation of a signed statement from the 1123 applicant's health care provider certifying the applicant's 1124 disability, and presentation of such documentary evidence from the 1125 department of veterans affairs that the disability of the 1126 applicant meets at least one of the criteria identified in 1127 division (A)(1) of this section and is service-connected as the 1128 registrar may require by rule, but without the payment of any 1129

1133

1134

1135

1136

1137

1138

1139

service fee, shall issue the applicant a removable windshield 1130 placard that is valid until expired, surrendered, or revoked. 1131

(F) Upon a conviction of a violation of division (H) or (I) of this section, the court shall report the conviction, and send the placard, if available, to the registrar, who thereupon shall revoke the privilege of using the placard and send notice in writing to the placardholder at that holder's last known address as shown in the records of the bureau, and the placardholder shall return the placard if not previously surrendered to the court, to the registrar within ten days following mailing of the notice.

Whenever a person to whom a removable windshield placard has 1140 been issued moves to another state, the person shall surrender the 1141 placard to the registrar; and whenever an organization to which a 1142 placard has been issued changes its place of operation to another 1143 state, the organization shall surrender the placard to the 1144 registrar.

- (G) Subject to division (F) of section 4511.69 of the Revised 1146 Code, the operator of a motor vehicle displaying a removable 1147 windshield placard, temporary removable windshield placard, or the 1148 special license plates authorized by this section is entitled to 1149 park the motor vehicle in any special parking location reserved 1150 for persons with disabilities that limit or impair the ability to 1151 walk, also known as handicapped parking spaces or disability 1152 parking spaces. 1153
- (H) No person or organization that is not eligible for the 1154 issuance of license plates or any placard under this section shall 1155 willfully and falsely represent that the person or organization is 1156 so eligible.

No person or organization shall display license plates issued 1158 under this section unless the license plates have been issued for 1159 the vehicle on which they are displayed and are valid. 1160

(I) No person or organization to which a removable windshield 1161 placard or temporary removable windshield placard is issued shall 1162 do either of the following: 1163 (1) Display or permit the display of the placard on any motor 1164 vehicle when having reasonable cause to believe the motor vehicle 1165 is being used in connection with an activity that does not include 1166 providing transportation for persons with disabilities that limit 1167 or impair the ability to walk; 1168 (2) Refuse to return or surrender the placard, when required. 1169 (J) If a removable windshield placard, temporary removable 1170 windshield placard, or parking card is lost, destroyed, or 1171 mutilated, the placardholder or cardholder may obtain a duplicate 1172 by doing both of the following: 1173 (1) Furnishing suitable proof of the loss, destruction, or 1174 mutilation to the registrar; 1175 (2) Paying a service fee equal to the amount specified in 1176 division (D) or (G) of section 4503.10 of the Revised Code. 1177 Any placardholder or cardholder who loses a placard or card 1178 and, after obtaining a duplicate, finds the original, immediately 1179 shall surrender the original placard or card to the registrar. 1180 (K)(1) The registrar shall pay all fees received under this 1181 section for the issuance of removable windshield placards or 1182 temporary removable windshield placards or duplicate removable 1183 windshield placards or cards into the state treasury to the credit 1184 of the state bureau of motor vehicles fund created in section 1185 4501.25 of the Revised Code. 1186 (2) In addition to the fees collected under this section, the 1187 registrar or deputy registrar shall ask each person applying for a 1188 removable windshield placard or temporary removable windshield 1189

placard or duplicate removable windshield placard or license plate

issued under this section, whether the person wishes to make a	1191
two-dollar voluntary contribution to support rehabilitation	1192
employment services. The registrar shall transmit the	1193
contributions received under this division to the treasurer of	1194
state for deposit into the rehabilitation employment fund, which	1195
is hereby created in the state treasury. A deputy registrar shall	1196
transmit the contributions received under this division to the	1197
registrar in the time and manner prescribed by the registrar. The	1198
contributions in the fund shall be used by the opportunities for	1199
Ohioans with disabilities agency to purchase services related to	1200
vocational evaluation, work adjustment, personal adjustment, job	1201
placement, job coaching, and community-based assessment from	1202
accredited community rehabilitation program facilities.	1203

(L) For purposes of enforcing this section, every peace 1204 officer is deemed to be an agent of the registrar. Any peace 1205 officer or any authorized employee of the bureau of motor vehicles 1206 who, in the performance of duties authorized by law, becomes aware 1207 of a person whose placard or parking card has been revoked 1208 pursuant to this section, may confiscate that placard or parking 1209 card and return it to the registrar. The registrar shall prescribe 1210 any forms used by law enforcement agencies in administering this 1211 section. 1212

No peace officer, law enforcement agency employing a peace 1213 officer, or political subdivision or governmental agency employing 1214 a peace officer, and no employee of the bureau is liable in a 1215 civil action for damages or loss to persons arising out of the 1216 performance of any duty required or authorized by this section. As 1217 used in this division, "peace officer" has the same meaning as in 1218 division (B) of section 2935.01 of the Revised Code. 1219

(M) All applications for registration of motor vehicles,
 removable windshield placards, and temporary removable windshield
 placards issued under this section, all renewal notices for such
 1220

items, and all other publications issued by the bureau that relate	1223
to this section shall set forth the criminal penalties that may be	1224
imposed upon a person who violates any provision relating to	1225
special license plates issued under this section, the parking of	1226
vehicles displaying such license plates, and the issuance,	1227
procurement, use, and display of removable windshield placards and	1228
temporary removable windshield placards issued under this section.	1229
(N) Whoever violates this section is guilty of a misdemeanor	1230
of the fourth degree.	1231
Sec. 4723.01. As used in this chapter:	1232
(A) "Registered nurse" means an individual who holds a	1233
current, valid license issued under this chapter that authorizes	1234
the practice of nursing as a registered nurse.	1235
(B) "Practice of nursing as a registered nurse" means	1236
providing to individuals and groups nursing care requiring	1237
specialized knowledge, judgment, and skill derived from the	1238
principles of biological, physical, behavioral, social, and	1239
nursing sciences. Such nursing care includes:	1240
(1) Identifying patterns of human responses to actual or	1241
potential health problems amenable to a nursing regimen;	1242
(2) Executing a nursing regimen through the selection,	1243
performance, management, and evaluation of nursing actions;	1244
(3) Assessing health status for the purpose of providing	1245
nursing care;	1246
(4) Providing health counseling and health teaching;	1247
(5) Administering medications, treatments, and executing	1248
regimens authorized by an individual who is authorized to practice	1249
in this state and is acting within the course of the individual's	1250
professional practice;	1251

1312

authorized by an individual who is authorized to practice in this	1282
state and is acting within the course of the individual's	1283
professional practice, on the condition that the licensed	1284
practical nurse is authorized under section 4723.18 or 4723.181 of	1285
the Revised Code to perform intravenous therapy and performs	1286
intravenous therapy only in accordance with those sections;	1287
(5) Delegation of nursing tasks as directed by a registered	1288
nurse;	1289
(6) Teaching nursing tasks to licensed practical nurses and	1290
individuals to whom the licensed practical nurse is authorized to	1291
delegate nursing tasks as directed by a registered nurse.	1292
(G) "Certified registered nurse anesthetist" means a	1293
registered nurse who holds a valid certificate of authority issued	1294
under this chapter that authorizes the practice of nursing as a	1295
certified registered nurse anesthetist in accordance with section	1296
4723.43 of the Revised Code and rules adopted by the board of	1297
nursing.	1298
(H) "Clinical nurse specialist" means a registered nurse who	1299
holds a valid certificate of authority issued under this chapter	1300
that authorizes the practice of nursing as a clinical nurse	1301
specialist in accordance with section 4723.43 of the Revised Code	1302
and rules adopted by the board of nursing.	1303
(I) "Certified nurse-midwife" means a registered nurse who	1304
holds a valid certificate of authority issued under this chapter	1305
that authorizes the practice of nursing as a certified	1306
nurse-midwife in accordance with section 4723.43 of the Revised	1307
Code and rules adopted by the board of nursing.	1308
(J) "Certified nurse practitioner" means a registered nurse	1309
who holds a valid certificate of authority issued under this	1310

chapter that authorizes the practice of nursing as a certified

nurse practitioner in accordance with section 4723.43 of the

Revised Code and rules adopted by the board of nursing.	1313
(K) "Physician" means an individual authorized under Chapter	1314
4731. of the Revised Code to practice medicine and surgery or	1315
osteopathic medicine and surgery.	1316
(L) "Collaboration" or "collaborating" means the following:	1317
(1) In the case of a clinical nurse specialist, except as	1318
provided in division (L)(3) of this section, or a certified nurse	1319
practitioner, that one or more podiatrists acting within the scope	1320
of practice of podiatry in accordance with section 4731.51 of the	1321
Revised Code and with whom the nurse has entered into a standard	1322
care arrangement or one or more physicians with whom the nurse has	1323
entered into a standard care arrangement are continuously	1324
available to communicate with the clinical nurse specialist or	1325
certified nurse practitioner either in person or by radio,	1326
telephone, or other form of telecommunication;	1327
(2) In the case of a certified nurse-midwife, that one or	1328
more physicians with whom the certified nurse-midwife has entered	1329
into a standard care arrangement are continuously available to	1330
communicate with the certified nurse-midwife either in person or	1331
by radio, telephone, or other form of telecommunication;	1332
(3) In the case of a clinical nurse specialist who practices	1333
the nursing specialty of mental health or psychiatric mental	1334
health without being authorized to prescribe drugs and therapeutic	1335
devices, that one or more physicians are continuously available to	1336
communicate with the nurse either in person or by radio,	1337
telephone, or other form of telecommunication.	1338
(M) "Supervision," as it pertains to a certified registered	1339
nurse anesthetist, means that the certified registered nurse	1340
anesthetist is under the direction of a podiatrist acting within	1341
the podiatrist's scope of practice in accordance with section	1342

4731.51 of the Revised Code, a dentist acting within the dentist's

with section 4723.67 of the Revised Code.

scope of practice in accordance with Chapter 4715. of the Revised	1344
Code, or a physician, and, when administering anesthesia, the	1345
certified registered nurse anesthetist is in the immediate	1346
presence of the podiatrist, dentist, or physician.	1347
(N) "Standard care arrangement" means a written, formal guide	1348
for planning and evaluating a patient's health care that is	1349
developed by one or more collaborating physicians or podiatrists	1350
and a clinical nurse specialist, certified nurse-midwife, or	1351
certified nurse practitioner and meets the requirements of section	1352
4723.431 of the Revised Code.	1353
(0) "Advanced practice registered nurse" means a certified	1354
registered nurse anesthetist, clinical nurse specialist, certified	1355
nurse-midwife, or certified nurse practitioner.	1356
(P) "Dialysis care" means the care and procedures that a	1357
dialysis technician or dialysis technician intern is authorized to	1358
provide and perform, as specified in section 4723.72 of the	1359
Revised Code.	1360
(Q) "Dialysis technician" means an individual who holds a	1361
current, valid certificate to practice as a dialysis technician	1362
issued under section 4723.75 of the Revised Code.	1363
(R) "Dialysis technician intern" means an individual who	1364
holds a current, valid certificate to practice as a dialysis	1365
technician intern issued under section 4723.75 of the Revised	1366
Code.	1367
(S) "Certified community health worker" means an individual	1368
who holds a current, valid certificate as a community health	1369
worker issued under section 4723.85 of the Revised Code.	1370
(T) "Medication aide" means an individual who holds a	1371
current, valid certificate issued under this chapter that	1372
authorizes the individual to administer medication in accordance	1373

Sec. 4723.06. (A) The board of nursing shall:	1375
(1) Administer and enforce the provisions of this chapter,	1376
including the taking of disciplinary action for violations of	1377
section 4723.28 of the Revised Code, any other provisions of this	1378
chapter, or rules adopted under this chapter;	1379
(2) Develop criteria that an applicant must meet to be	1380
eligible to sit for the examination for licensure to practice as a	1381
registered nurse or as a licensed practical nurse;	1382
(3) Issue and renew nursing licenses, dialysis technician	1383
certificates, and community health worker certificates, as	1384
provided in this chapter;	1385
(4) Define the minimum standards for educational programs of	1386
the schools of registered nursing and schools of practical nursing	1387
in this state;	1388
(5) Survey, inspect, and grant full approval to prelicensure	1389
nursing education programs in this state that meet the standards	1390
established by rules adopted under section 4723.07 of the Revised	1391
Code. Prelicensure nursing education programs include, but are not	1392
limited to, diploma, associate degree, baccalaureate degree,	1393
master's degree, and doctor of nursing programs leading to initial	1394
licensure to practice nursing as a registered nurse and practical	1395
nurse programs leading to initial licensure to practice nursing as	1396
a licensed practical nurse.	1397
(6) Grant conditional approval, by a vote of a quorum of the	1398
board, to a new prelicensure nursing education program or a	1399
program that is being reestablished after having ceased to	1400
operate, if the program meets and maintains the minimum standards	1401
of the board established by rules adopted under section 4723.07 of	1402
the Revised Code. If the board does not grant conditional	1403
approval, it shall hold an adjudication under Chapter 119. of the	1404

Revised Code to consider conditional approval of the program. If	1405
the board grants conditional approval, at the first meeting	1406
following completion of the survey process required by division	1407
(A)(5) of this section, the board shall determine whether to grant	1408
full approval to the program. If the board does not grant full	1409
approval or if it appears that the program has failed to meet and	1410
maintain standards established by rules adopted under section	1411
4723.07 of the Revised Code, the board shall hold an adjudication	1412
under Chapter 119. of the Revised Code to consider the program.	1413
Based on results of the adjudication, the board may continue or	1414
withdraw conditional approval, or grant full approval.	1415
(7) Place on provisional approval, for a period of time	1416
specified by the board, a program that has ceased to meet and	1417
maintain the minimum standards of the board established by rules	1418
adopted under section 4723.07 of the Revised Code. Prior to or at	1419
the end of the period, the board shall reconsider whether the	1420
program meets the standards and shall grant full approval if it	1421
does. If it does not, the board may withdraw approval, pursuant to	1422
an adjudication under Chapter 119. of the Revised Code.	1423
(8) Approve continuing education programs and courses under	1424
standards established in rules adopted under sections 4723.07,	1425
4723.69, 4723.79, and 4723.88 of the Revised Code;	1426
(9) Establish a program for monitoring chemical dependency in	1427
accordance with section 4723.35 of the Revised Code;	1428
(10) Establish the practice intervention and improvement	1429
program in accordance with section 4723.282 of the Revised Code;	1430
(11) Issue and renew certificates of authority to practice	1431
nursing as a certified registered nurse anesthetist, clinical	1432
nurse specialist, certified nurse-midwife, or certified nurse	1433
practitioner;	1434

(12) Approve under section 4723.46 of the Revised Code

(c) A list of education and training programs approved by the

board.	1466
(19) Deny approval to a person who submits or causes to be	1467
submitted false, misleading, or deceptive statements, information,	1468
or documentation to the board in the process of applying for	1469
approval of a new education or training program. If the board	1470
proposes to deny approval of a new education or training program,	1471
it shall do so pursuant to an adjudication conducted under Chapter	1472
119. of the Revised Code.	1473
(B) The board may fulfill the requirement of division $(A)(8)$	1474
of this section by authorizing persons who meet the standards	1475
established in rules adopted under section 4723.07 of the Revised	1476
Code to approve continuing education programs and courses. Persons	1477
so authorized shall approve continuing education programs and	1478
courses in accordance with standards established in rules adopted	1479
under section 4723.07 of the Revised Code.	1480
Persons seeking authorization to approve continuing education	1481
programs and courses shall apply to the board and pay the	1482
appropriate fee established under section 4723.08 of the Revised	1483
Code. Authorizations to approve continuing education programs and	1484
courses shall expire, and may be renewed according to the schedule	1485
established in rules adopted under section 4723.07 of the Revised	1486
Code.	1487
In addition to approving continuing education programs under	1488
division (A)(8) of this section, the board may sponsor continuing	1489
education activities that are directly related to the statutes and	1490
rules the board enforces.	1491
Sec. 4723.07. In accordance with Chapter 119. of the Revised	1492
Code, the board of nursing shall adopt and may amend and rescind	1493
rules that establish all of the following:	1494

(A) Provisions for the board's government and control of its

actions and business affairs;	1496
(B) Minimum standards for nursing education programs that	1497
prepare graduates to be licensed under this chapter and procedures	1498
for granting, renewing, and withdrawing approval of those	1499
programs;	1500
(C) Criteria that applicants for licensure must meet to be	1501
eligible to take examinations for licensure;	1502
(D) Standards and procedures for renewal of the licenses and	1503
certificates issued by the board;	1504
(E) Standards for approval of continuing nursing education	1505
programs and courses for registered nurses, licensed practical	1506
nurses, certified registered nurse anesthetists, clinical nurse	1507
specialists, certified nurse-midwives, and certified nurse	1508
practitioners. The standards may provide for approval of	1509
continuing nursing education programs and courses that have been	1510
approved by other state boards of nursing or by national	1511
accreditation systems for nursing, including, but not limited to,	1512
the American nurses' credentialing center and the national	1513
association for practical nurse education and service.	1514
(F) Standards that persons must meet to be authorized by the	1515
board to approve continuing education programs and courses and a	1516
schedule by which that authorization expires and may be renewed;	1517
(G) Requirements, including continuing education	1518
requirements, for reactivating inactive licenses or certificates,	1519
and for reinstating licenses or certificates that have lapsed;	1520
(H) Conditions that may be imposed for reinstatement of a	1521
license or certificate following action taken under section	1522
3123.47, 4723.28, 4723.281, 4723.652, or 4723.86 of the Revised	1523
Code resulting in a license or certificate suspension;	1524
(I) Requirements for board approval of courses in medication	1525

administration by licensed practical nurses;	1526
(J) Criteria for evaluating the qualifications of an	1527
applicant for a license to practice nursing as a registered nurse,	1528
a license to practice nursing as a licensed practical nurse, or a	1529
certificate of authority issued under division (B) of section	1530
4723.41 of the Revised Code for the purpose of issuing the license	1531
or certificate by the board's endorsement of the applicant's	1532
authority to practice issued by the licensing agency of another	1533
state;	1534
(K) Universal and standard precautions that shall be used by	1535
each licensee or certificate holder. The rules shall define and	1536
establish requirements for universal and standard precautions that	1537
include the following:	1538
(1) Appropriate use of hand washing;	1539
(2) Disinfection and sterilization of equipment;	1540
(3) Handling and disposal of needles and other sharp	1541
instruments;	1542
(4) Wearing and disposal of gloves and other protective	1543
garments and devices.	1544
(L) Standards and procedures for approving certificates of	1545
authority to practice nursing as a certified registered nurse	1546
anesthetist, clinical nurse specialist, certified nurse-midwife,	1547
or certified nurse practitioner, and for renewal of those	1548
certificates;	1549
(M) Quality assurance standards for certified registered	1550
nurse anesthetists, clinical nurse specialists, certified	1551
nurse-midwives, or certified nurse practitioners;	1552
(N) Additional criteria for the standard care arrangement	1553
required by section 4723.431 of the Revised Code entered into by a	1554
clinical nurse specialist, certified nurse-midwife, or certified	1555

has requirements for intravenous therapy course approval that are

substantially similar to the requirements in division (B) of	1586
section 4723.19 of the Revised Code, as determined by the board.	1587
(4) The nurse has successfully completed a minimum of forty	1588
hours of training that includes all of the following:	1589
(a) The curriculum established by rules adopted by the board;	1590
(b) Training in the anatomy and physiology of the	1591
cardiovascular system, signs and symptoms of local and systemic	1592
complications in the administration of fluids and antibiotic	1593
additives, and guidelines for management of these complications;	1594
(c) Any other training or instruction the board considers	1595
appropriate;	1596
(d) A testing component that requires the nurse to perform a	1597
successful demonstration of the intravenous procedures, including	1598
all skills needed to perform them safely.	1599
(B) Except as provided in section 4723.181 of the Revised	1600
Code and subject to the restrictions in division (D) of this	1601
section, a licensed practical nurse may perform intravenous	1602
therapy on an adult patient only if authorized by the board	1603
pursuant to division (A) of this section and only at the direction	1604
of one of the following:	1605
(1) A <del>licensed</del> physician, <u>physician assistant</u> , dentist,	1606
optometrist, or podiatrist who is authorized to practice in this	1607
state and, except as provided in division (C)(2) of this section,	1608
is present and readily available at the facility where the	1609
intravenous therapy procedure is performed;	1610
(2) A registered nurse in accordance with division (C) of	1611
this section.	1612
(C)(1) Except as provided in division (C)(2) of this section	1613
and section 4723.181 of the Revised Code, when a licensed	1614
practical nurse authorized by the board to perform intravenous	1615

inserted central catheter;

therapy performs an intravenous therapy procedure at the direction	1616
of a registered nurse, the registered nurse or another registered	1617
nurse shall be readily available at the site where the intravenous	1618
therapy is performed, and before the licensed practical nurse	1619
initiates the intravenous therapy, the registered nurse shall	1620
personally perform an on-site assessment of the adult patient who	1621
is to receive the intravenous therapy.	1622
(2) When a licensed practical nurse authorized by the board	1623
to perform intravenous therapy performs an intravenous therapy	1624
procedure in a home as defined in section 3721.10 of the Revised	1625
Code, or in an intermediate care facility for individuals with	1626
intellectual disabilities as defined in section 5124.01 of the	1627
Revised Code, at the direction of a registered nurse or <del>licensed</del>	1628
physician, physician assistant, dentist, optometrist, or	1629
podiatrist who is authorized to practice in this state, a	1630
registered nurse shall be on the premises of the home or facility	1631
or accessible by some form of telecommunication.	1632
(D) No licensed practical nurse shall perform any of the	1633
following intravenous therapy procedures:	1634
(1) Initiating or maintaining any of the following:	1635
(a) Blood or blood components;	1636
(b) Solutions for total parenteral nutrition;	1637
(c) Any cancer therapeutic medication including, but not	1638
limited to, cancer chemotherapy or an anti-neoplastic agent;	1639
(d) Solutions administered through any central venous line or	1640
arterial line or any other line that does not terminate in a	1641
peripheral vein, except that a licensed practical nurse authorized	1642
by the board to perform intravenous therapy may maintain the	1643
solutions specified in division (D)(6)(a) of this section that are	1644
being administered through a central venous line or peripherally	1645

(e) Any investigational or experimental medication.	1647
(2) Initiating intravenous therapy in any vein, except that a	1648
licensed practical nurse authorized by the board to perform	1649
intravenous therapy may initiate intravenous therapy in accordance	1650
with this section in a vein of the hand, forearm, or antecubital	1651
fossa;	1652
(3) Discontinuing a central venous, arterial, or any other	1653
line that does not terminate in a peripheral vein;	1654
(4) Initiating or discontinuing a peripherally inserted	1655
central catheter;	1656
(5) Mixing, preparing, or reconstituting any medication for	1657
intravenous therapy, except that a licensed practical nurse	1658
authorized by the board to perform intravenous therapy may prepare	1659
or reconstitute an antibiotic additive;	1660
(6) Administering medication via the intravenous route,	1661
including all of the following activities:	1662
(a) Adding medication to an intravenous solution or to an	1663
existing infusion, except that a licensed practical nurse	1664
authorized by the board to perform intravenous therapy may do any	1665
of the following:	1666
(i) Initiate an intravenous infusion containing one or more	1667
of the following elements: dextrose 5%, normal saline, lactated	1668
ringers, sodium chloride .45%, sodium chloride 0.2%, sterile	1669
water;	1670
(ii) Hang subsequent containers of the intravenous solutions	1671
specified in division (D)(6)(a)(i) of this section that contain	1672
vitamins or electrolytes, if a registered nurse initiated the	1673
infusion of that same intravenous solution;	1674
(iii) Initiate or maintain an intravenous infusion containing	1675
an antibiotic additive.	1676

(b) Injecting medication via a direct intravenous route, 1677 except that a licensed practical nurse authorized by the board to 1678 perform intravenous therapy may inject heparin or normal saline to 1679 flush an intermittent infusion device or heparin lock including, 1680 but not limited to, bolus or push. 1681 (7) Changing tubing on any line including, but not limited 1682 to, an arterial line or a central venous line, except that a 1683 licensed practical nurse authorized by the board to perform 1684 intravenous therapy may change tubing on an intravenous line that 1685 terminates in a peripheral vein; 1686 (8) Programming or setting any function of a patient 1687 controlled infusion pump. 1688 (E) Notwithstanding divisions (A) and (D) of this section, at 1689 the direction of a physician or a registered nurse, a licensed 1690 practical nurse authorized by the board to perform intravenous 1691 therapy may perform the following activities for the purpose of 1692 performing dialysis: 1693 (1) The routine administration and regulation of saline 1694 solution for the purpose of maintaining an established fluid plan; 1695 (2) The administration of a heparin dose intravenously; 1696 (3) The administration of a heparin dose peripherally via a 1697 fistula needle; 1698 (4) The loading and activation of a constant infusion pump; 1699 (5) The intermittent injection of a dose of medication that 1700 is administered via the hemodialysis blood circuit and through the 1701 patient's venous access. 1702 (F) No person shall employ or direct a licensed practical 1703 nurse to perform an intravenous therapy procedure without first 1704 verifying that the licensed practical nurse is authorized by the 1705 board to perform intravenous therapy. 1706

## Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

Sec. 4723.181. (A) A licensed practical nurse may perform on	1707
any person any of the intravenous therapy procedures specified in	1708
division (B) of this section without receiving authorization to	1709
perform intravenous therapy from the board of nursing under	1710
section 4723.18 of the Revised Code, if both of the following	1711
apply:	1712
(1) The licensed practical nurse acts at the direction of a	1713
registered nurse or a <del>licensed</del> physician, physician assistant,	1714
dentist, optometrist, or podiatrist who is authorized to practice	1715
in this state and the registered nurse, physician, physician	1716
assistant, dentist, optometrist, or podiatrist is on the premises	1717
where the procedure is to be performed or accessible by some form	1718
of telecommunication.	1719
(2) The licensed practical nurse can demonstrate the	1720
knowledge, skills, and ability to perform the procedure safely.	1721
(B) The intravenous therapy procedures that a licensed	1722
practical nurse may perform pursuant to division (A) of this	1723
section are limited to the following:	1724
(1) Verification of the type of peripheral intravenous	1725
solution being administered;	1726
(2) Examination of a peripheral infusion site and the	1727
extremity for possible infiltration;	1728
(3) Regulation of a peripheral intravenous infusion according	1729
to the prescribed flow rate;	1730
(4) Discontinuation of a peripheral intravenous device at the	1731
appropriate time;	1732
(5) Performance of routine dressing changes at the insertion	1733
site of a peripheral venous or arterial infusion, peripherally	1734
inserted central catheter infusion, or central venous pressure	1735
subclavian infusion.	1736

Sec. 4723.48. (A) A clinical nurse specialist, certified	1737
nurse-midwife, or certified nurse practitioner seeking authority	1738
to prescribe drugs and therapeutic devices shall file with the	1739
board of nursing a written application for a certificate to	1740
prescribe. The board of nursing shall issue a certificate to	1741
prescribe to each applicant who meets the requirements specified	1742
in section 4723.482 or 4723.485 of the Revised Code.	1743

Except as provided in division (B) of this section, the 1744 initial certificate to prescribe that the board issues to an 1745 applicant shall be issued as an externship certificate. Under an 1746 externship certificate, the nurse may obtain experience in 1747 prescribing drugs and therapeutic devices by participating in an 1748 externship that evaluates the nurse's competence, knowledge, and 1749 skill in pharmacokinetic principles and their clinical application 1750 to the specialty being practiced. During the externship, the nurse 1751 may prescribe drugs and therapeutic devices only when one or more 1752 physicians are providing supervision in accordance with rules 1753 adopted under section 4723.50 of the Revised Code. 1754

After completing the externship, the holder of an externship 1755 certificate may apply for a new certificate to prescribe. On 1756 receipt of the new certificate, the nurse may prescribe drugs and 1757 therapeutic devices in collaboration with one or more physicians 1758 or podiatrists.

(B) In the case of an applicant who meets the requirements of division (C) of section 4723.482 of the Revised Code, the initial 1761 certificate to prescribe that the board issues to the applicant 1762 under this section shall not be an externship certificate. The 1763 applicant shall be issued a certificate to prescribe that permits 1764 the recipient to prescribe drugs and therapeutic devices in 1765 collaboration with one or more physicians or podiatrists. 1766

(C)(1) The holder of a certificate issued under this section

may delegate to a person not otherwise authorized to administer	1768
drugs the authority to administer a drug, other than a controlled	1769
substance, listed in the formulary established under division	1770
(B)(1) of section 4723.50 of the Revised Code to a specified	1771
patient. The delegation shall be in accordance with division	1772
(C)(2) of this section and standards and procedures established in	1773
rules adopted under division (0) of section 4723.07 of the Revised	1774
Code.	1775
(2) Prior to delegating authority, the certificate holder	1776
shall do both of the following:	1777
(a) Assess the patient and determine that the drug is	1778
appropriate for the patient;	1779
(b) Determine that the person to whom the authority will be	1780
delegated has met the conditions specified in division (D) of	1781
section 4723.489 of the Revised Code.	1782
Sec. 4723.482. (A) Except as provided in divisions (C) and	1783
(D) of this section, an applicant shall include with the	1784
application submitted under section 4723.48 of the Revised Code	1785
all of the following:	1786
(1) Evidence of holding a current, valid certificate of	1787
authority to practice as a clinical nurse specialist, certified	1788
nurse-midwife, or certified nurse practitioner that was issued by	1789
meeting the requirements of division (A) of section 4723.41 of the	1790
Revised Code;	1791
(2) Evidence of successfully completing the course of study	1792
in advanced pharmacology and related topics in accordance with the	1793
requirements specified in division (B) of this section;	1794
(3) The fee required by section 4723.08 of the Revised Code	1795
for a certificate to prescribe;	1796
(4) Any additional information the board of nursing requires	1797

(i) Indications for the use of schedule II controlled	1828
substances in drug therapies;	1829
(ii) The most recent guidelines for pain management	1830
therapies, as established by state and national organizations such	1831
as the Ohio pain initiative and the American pain society;	1832
(iii) Fiscal and ethical implications of prescribing schedule	1833
II controlled substances;	1834
(iv) State and federal laws that apply to the authority to	1835
prescribe schedule II controlled substances;	1836
(v) Prevention of abuse and diversion of schedule II	1837
controlled substances, including identification of the risk of	1838
abuse and diversion, recognition of abuse and diversion, types of	1839
assistance available for prevention of abuse and diversion, and	1840
methods of establishing safeguards against abuse and diversion.	1841
(e) Any additional instruction required pursuant to rules	1842
adopted under section 4723.50 of the Revised Code.	1843
(C) An applicant who practiced or is practicing as a clinical	1844
nurse specialist, certified nurse-midwife, or certified nurse	1845
practitioner in another jurisdiction or as an employee of the	1846
United States government, and is not seeking authority to	1847
prescribe drugs and therapeutic devices by meeting the	1848
requirements of division (A) or (D) of this section, shall include	1849
with the application submitted under section 4723.48 of the	1850
Revised Code all of the following:	1851
(1) Evidence of holding a current, valid certificate of	1852
authority issued under this chapter to practice as a clinical	1853
nurse specialist, certified nurse-midwife, or certified nurse	1854
practitioner;	1855
(2) The fee required by section 4723.08 of the Revised Code	1856
for a certificate to prescribe;	1857

for a certificate to prescribe;

1888

(3) Either of the following: 1858 (a) Evidence of having held, for a continuous period of at 1859 least one year during the three years immediately preceding the 1860 date of application, valid authority issued by another 1861 jurisdiction to prescribe therapeutic devices and drugs, including 1862 at least some controlled substances; 1863 (b) Evidence of having been employed by the United States 1864 government and authorized, for a continuous period of at least one 1865 year during the three years immediately preceding the date of 1866 application, to prescribe therapeutic devices and drugs, including 1867 at least some controlled substances, in conjunction with that 1868 employment. 1869 (4) Evidence of having completed a two-hour course of 1870 instruction approved by the board in the laws of this state that 1871 govern drugs and prescriptive authority; 1872 (5) Any additional information the board requires pursuant to 1873 rules adopted under section 4723.50 of the Revised Code. 1874 (D) An applicant who practiced or is practicing as a clinical 1875 nurse specialist, certified nurse-midwife, or certified nurse 1876 practitioner in another jurisdiction or as an employee of the 1877 United States government, and is not seeking authority to 1878 prescribe drugs and therapeutic devices by meeting the 1879 requirements of division (A) or (C) of this section, shall include 1880 with the application submitted under section 4723.48 of the 1881 Revised Code all of the following: 1882 (1) Evidence of holding a current, valid certificate of 1883 authority issued under this chapter to practice as a clinical 1884 nurse specialist, certified nurse-midwife, or certified nurse 1885 practitioner; 1886 (2) The fee required by section 4723.08 of the Revised Code 1887

(3) Either of the following:	1889
(a) Evidence of having held, for a continuous period of at	1890
least one year during the three years immediately preceding the	1891
date of application, valid authority issued by another	1892
jurisdiction to prescribe therapeutic devices and drugs, excluding	1893
controlled substances;	1894
(b) Evidence of having been employed by the United States	1895
government and authorized, for a continuous period of at least one	1896
year during the three years immediately preceding the date of	1897
application, to prescribe therapeutic devices and drugs, excluding	1898
controlled substances, in conjunction with that employment.	1899
(4) Any additional information the board requires pursuant to	1900
rules adopted under section 4723.50 of the Revised Code.	1901
(E) In the case of an applicant who meets the requirements of	1902
division (C) or (D) of this section other than the requirements of	1903
division (C)(3) or (D)(3) of this section and is seeking authority	1904
to prescribe drugs and therapeutic devices by meeting the	1905
requirements of division (A) of this section, the applicant may	1906
complete the instruction that is specific to schedule II	1907
controlled substances, as required by division (B)(5)(d) of this	1908
section, through an internet based course of study in lieu of	1909
completing the instruction through a course of study consisting of	1910
planned classroom and clinical instruction.	1911
Sec. 4723.489. A person not otherwise authorized to	1912
administer drugs may administer a drug to a specified patient if	1913
all of the following conditions are met:	1914
(A) The authority to administer the drug is delegated to the	1915
person by an advanced practice registered nurse who is a clinical	1916
nurse specialist, certified nurse-midwife, or certified nurse	1917
practitioner and holds a certificate to prescribe issued under	1918

Revised Code. After reviewing a recommendation submitted by the

Page 64

1948

Sub. H. B. No. 412

1979

committee, the board may either adopt the recommendation as a rule	1949
or ask the committee to reconsider and resubmit the	1950
recommendation. The board shall not adopt any rule that does not	1951
conform to a recommendation made by the committee.	1952
(B) The board shall adopt rules under this section that do	1953
all of the following:	1954
(1) Establish a formulary listing the types of drugs and	1955
therapeutic devices that may be prescribed by a clinical nurse	1956
specialist, certified nurse-midwife, or certified nurse	1957
practitioner. The formulary may include controlled substances, as	1958
defined in section 3719.01 of the Revised Code. The formulary	1959
shall not permit the prescribing of any drug or device to perform	1960
or induce an abortion.	1961
(2) Establish safety standards to be followed by a clinical	1962
nurse specialist, certified nurse-midwife, or certified nurse	1963
practitioner when personally furnishing to patients complete or	1964
partial supplies of antibiotics, antifungals, scabicides,	1965
contraceptives, prenatal vitamins, antihypertensives, drugs and	1966
devices used in the treatment of diabetes, drugs and devices used	1967
in the treatment of asthma, and drugs used in the treatment of	1968
dyslipidemia;	1969
(3) Establish criteria for the components of the standard	1970
care arrangements described in section 4723.431 of the Revised	1971
Code that apply to the authority to prescribe, including the	1972
components that apply to the authority to prescribe schedule II	1973
controlled substances. The rules shall be consistent with that	1974
section and include all of the following:	1975
(a) Quality assurance standards;	1976
(b) Standards for periodic review by a collaborating	1977

physician or podiatrist of the records of patients treated by the

clinical nurse specialist, certified nurse-midwife, or certified

nurse practitioner;	1980
(c) Acceptable travel time between the location at which the	1981
clinical nurse specialist, certified nurse-midwife, or certified	1982
nurse practitioner is engaging in the prescribing components of	1983
the nurse's practice and the location of the nurse's collaborating	1984
physician or podiatrist;	1985
(d) Any other criteria recommended by the committee on	1986
prescriptive governance.	1987
(4) Establish standards and procedures for issuance and	1988
renewal of a certificate to prescribe, including specification of	1989
any additional information the board may require under division	1990
(A)(4), (C)(5), or (D) $\overline{(5)}$ $\underline{(4)}$ of section 4723.482 $\underline{\text{or}}$ , division	1991
(B)(3) of section 4723.485, or division (B)(3) of section 4723.486	1992
of the Revised Code;	1993
(5) Establish standards for board approval of the course of	1994
study in advanced pharmacology and related topics required by	1995
section 4723.482 of the Revised Code;	1996
(6) Establish requirements for board approval of the two-hour	1997
course of instruction in the laws of this state as required under	1998
division (C)(4) of section 4723.482 of the Revised Code and	1999
division (B)(2) of section 4723.484 of the Revised Code;	2000
(7) Establish standards and procedures for the appropriate	2001
conduct of an externship as described in section 4723.484 of the	2002
Revised Code, including the following:	2003
(a) Standards and procedures to be used in evaluating an	2004
individual's participation in an externship;	2005
(b) Standards and procedures for the supervision that a	2006
physician must provide during an externship, including supervision	2007
provided by working with the participant and supervision provided	2008
by making timely reviews of the records of patients treated by the	2009

participant. The manner in which supervision must be provided may	2010
vary according to the location where the participant is practicing	2011
and with the participant's level of experience.	2012
Sec. 4729.01. As used in this chapter:	2013
(A) "Pharmacy," except when used in a context that refers to	2014
the practice of pharmacy, means any area, room, rooms, place of	2015
business, department, or portion of any of the foregoing where the	2016
practice of pharmacy is conducted.	2017
(B) "Practice of pharmacy" means providing pharmacist care	2018
requiring specialized knowledge, judgment, and skill derived from	2019
the principles of biological, chemical, behavioral, social,	2020
pharmaceutical, and clinical sciences. As used in this division,	2021
"pharmacist care" includes the following:	2022
(1) Interpreting prescriptions;	2023
(2) Dispensing drugs and drug therapy related devices;	2024
(3) Compounding drugs;	2025
(4) Counseling individuals with regard to their drug therapy,	2026
recommending drug therapy related devices, and assisting in the	2027
selection of drugs and appliances for treatment of common diseases	2028
and injuries and providing instruction in the proper use of the	2029
drugs and appliances;	2030
(5) Performing drug regimen reviews with individuals by	2031
discussing all of the drugs that the individual is taking and	2032
explaining the interactions of the drugs;	2033
(6) Performing drug utilization reviews with licensed health	2034
professionals authorized to prescribe drugs when the pharmacist	2035
determines that an individual with a prescription has a drug	2036
regimen that warrants additional discussion with the prescriber;	2037

(7) Advising an individual and the health care professionals

(b) A limited quantity of the drug is compounded and provided	2069
to the professional.	2070
(c) The drug is compounded and provided to the professional	2071
as an occasional exception to the normal practice of dispensing	2072
drugs pursuant to patient-specific prescriptions.	2073
(D) "Consult agreement" means an agreement to manage an	2074
individual's drug therapy that has been entered into by a	2075
pharmacist and a physician authorized under Chapter 4731. of the	2076
Revised Code to practice medicine and surgery or osteopathic	2077
medicine and surgery.	2078
(E) "Drug" means:	2079
(1) Any article recognized in the United States pharmacopoeia	2080
and national formulary, or any supplement to them, intended for	2081
use in the diagnosis, cure, mitigation, treatment, or prevention	2082
of disease in humans or animals;	2083
(2) Any other article intended for use in the diagnosis,	2084
cure, mitigation, treatment, or prevention of disease in humans or	2085
animals;	2086
(3) Any article, other than food, intended to affect the	2087
structure or any function of the body of humans or animals;	2088
(4) Any article intended for use as a component of any	2089
article specified in division $(E)(1)$ , $(2)$ , or $(3)$ of this section;	2090
but does not include devices or their components, parts, or	2091
accessories.	2092
(F) "Dangerous drug" means any of the following:	2093
(1) Any drug to which either of the following applies:	2094
(a) Under the "Federal Food, Drug, and Cosmetic Act," 52	2095
Stat. 1040 (1938), 21 U.S.C.A. 301, as amended, the drug is	
	2096
required to bear a label containing the legend "Caution: Federal	2096 2097

(4) A physician authorized under Chapter 4731. of the Revised	2129
Code to practice medicine and surgery, osteopathic medicine and	2130
surgery, or podiatric medicine and surgery;	2131
(5) A physician assistant who holds a <del>certificate to</del>	2132
prescribe valid prescriber number issued under Chapter 4730. of	2133
the Revised Code by the state medical board and has been granted	2134
<pre>physician-delegated prescriptive authority;</pre>	2135
(6) A veterinarian licensed under Chapter 4741. of the	2136
Revised Code.	2137
(J) "Sale" and "sell" include delivery, transfer, barter,	2138
exchange, or gift, or offer therefor, and each such transaction	2139
made by any person, whether as principal proprietor, agent, or	2140
employee.	2141
(K) "Wholesale sale" and "sale at wholesale" mean any sale in	2142
which the purpose of the purchaser is to resell the article	2143
purchased or received by the purchaser.	2144
(L) "Retail sale" and "sale at retail" mean any sale other	2145
than a wholesale sale or sale at wholesale.	2146
(M) "Retail seller" means any person that sells any dangerous	2147
drug to consumers without assuming control over and responsibility	2148
for its administration. Mere advice or instructions regarding	2149
administration do not constitute control or establish	2150
responsibility.	2151
(N) "Price information" means the price charged for a	2152
prescription for a particular drug product and, in an easily	2153
understandable manner, all of the following:	2154
(1) The proprietary name of the drug product;	2155
(2) The established (generic) name of the drug product;	2156
(3) The strength of the drug product if the product contains	2157
a single active ingredient or if the drug product contains more	2158

than one active ingredient and a relevant strength can be	2159
associated with the product without indicating each active	2160
ingredient. The established name and quantity of each active	2161
ingredient are required if such a relevant strength cannot be so	2162
associated with a drug product containing more than one	2163
ingredient.	2164

- (4) The dosage form;
- (5) The price charged for a specific quantity of the drug 2166 product. The stated price shall include all charges to the 2167 consumer, including, but not limited to, the cost of the drug 2168 product, professional fees, handling fees, if any, and a statement 2169 identifying professional services routinely furnished by the 2170 pharmacy. Any mailing fees and delivery fees may be stated 2171 separately without repetition. The information shall not be false 2172 or misleading. 2173
- (O) "Wholesale distributor of dangerous drugs" means a person 2174 engaged in the sale of dangerous drugs at wholesale and includes 2175 any agent or employee of such a person authorized by the person to 2176 engage in the sale of dangerous drugs at wholesale. 2177
- (P) "Manufacturer of dangerous drugs" means a person, other 2178 than a pharmacist, who manufactures dangerous drugs and who is 2179 engaged in the sale of those dangerous drugs within this state. 2180
- (0) "Terminal distributor of dangerous drugs" means a person 2181 who is engaged in the sale of dangerous drugs at retail, or any 2182 person, other than a wholesale distributor or a pharmacist, who 2183 has possession, custody, or control of dangerous drugs for any 2184 purpose other than for that person's own use and consumption, and 2185 includes pharmacies, hospitals, nursing homes, and laboratories 2186 and all other persons who procure dangerous drugs for sale or 2187 other distribution by or under the supervision of a pharmacist or 2188 licensed health professional authorized to prescribe drugs. 2189

(R) "Promote to the public" means disseminating a	2190
representation to the public in any manner or by any means, other	2191
than by labeling, for the purpose of inducing, or that is likely	2192
to induce, directly or indirectly, the purchase of a dangerous	2193
drug at retail.	2194
(S) "Person" includes any individual, partnership,	2195
association, limited liability company, or corporation, the state,	2196
any political subdivision of the state, and any district,	2197
department, or agency of the state or its political subdivisions.	2198
(T) "Finished dosage form" has the same meaning as in section	2199
3715.01 of the Revised Code.	2200
(U) "Generically equivalent drug" has the same meaning as in	2201
section 3715.01 of the Revised Code.	2202
(V) "Animal shelter" means a facility operated by a humane	2203
society or any society organized under Chapter 1717. of the	2204
Revised Code or a dog pound operated pursuant to Chapter 955. of	2205
the Revised Code.	2206
(W) "Food" has the same meaning as in section $3715.01$ of the	2207
Revised Code.	2208
(X) "Pain management clinic" has the same meaning as in	2209
section 4731.054 of the Revised Code.	2210
Sec. 4730.01. As used in this chapter:	2211
- -	
(A) <del>"Physician assistant" means a skilled person qualified by</del>	2212
academic and clinical training to provide services to patients as	2213
a physician assistant under the supervision, control, and	2214
direction of one or more physicians who are responsible for the	2215
physician assistant's performance.	2216
(B) "Physician" means an individual who is authorized under	2217
Chapter 4731. of the Revised Code to practice medicine and	2218
surgery, osteopathic medicine and surgery, or podiatric medicine	2219

having entered into a supervision agreement that has been approved

by the state medical board with a supervising physician under

section 4730.19 of the Revised Code.

2247

2248

(1) In active service in the army, navy, coast guard, marine

corps, air force, public health service, or marine hospital

2277

2278

2279

following:

service of the United States while so serving;	2280
(2) Employed by the veterans administration of the United	2281
States while so employed÷.	2282
(B) Prevent any person from performing any of the services a	2283
physician assistant may be authorized to perform, if the person's	2284
professional scope of practice established under any other chapter	2285
of the Revised Code authorizes the person to perform the services;	2286
(C) Prohibit a physician from delegating responsibilities to	2287
any nurse or other qualified person who does not hold a	2288
certificate license to practice as a physician assistant, provided	2289
that the individual does not hold the individual out to be a	2290
physician assistant;	2291
(D) Be construed as authorizing a physician assistant	2292
independently to order or direct the execution of procedures or	2293
techniques by a registered nurse or licensed practical nurse in	2294
the care and treatment of a person in any setting, except to the	2295
extent that the physician assistant is authorized to do so by the	2296
physician supervisory plan approved under section 4730.17 of the	2297
Revised Code for the $\underline{a}$ physician who is responsible for	2298
supervising the physician assistant or and, if applicable, the	2299
policies of the health care facility in which the physician	2300
assistant is practicing;	2301
(E) Authorize a physician assistant to engage in the practice	2302
of optometry, except to the extent that the physician assistant is	2303
authorized by a supervising physician acting in accordance with	2304
this chapter to perform routine visual screening, provide medical	2305
care prior to or following eye surgery, or assist in the care of	2306
diseases of the eye;	2307
(F) Be construed as authorizing a physician assistant to	2308
prescribe any drug or device to perform or induce an abortion, or	2309
as otherwise authorizing a physician assistant to perform or	2310

Sub. H. B. No. 412

Sub. H. B. No. 412

approval;	2370
(8) Any issue the board asks the committee to consider.	2371
(B) In addition to the matters that are required to be	2372
reviewed under division (A) of this section, the committee may	2373
review, and may submit to the board recommendations concerning,	2374
either or both of the following:	2375
(1) Quality quality assurance activities to be performed by a	2376
supervising physician and physician assistant under a quality	2377
assurance system established pursuant to division (F) of section	2378
4730.21 of the Revised Code÷	2379
(2) The development and approval of one or more model	2380
physician supervisory plans and one or more models for a special	2381
services portion of the one or more model physician supervisory	2382
plans. The committee may submit recommendations for model plans	2383
that reflect various medical specialties.	2384
(C) The board shall take into consideration all	2385
recommendations submitted by the committee. Not later than ninety	2386
days after receiving a recommendation from the committee, the	2387
board shall approve or disapprove the recommendation and notify	2388
the committee of its decision. If a recommendation is disapproved,	2389
the board shall inform the committee of its reasons for making	2390
that decision. The committee may resubmit the recommendation after	2391
addressing the concerns expressed by the board and modifying the	2392
disapproved recommendation accordingly. Not later than ninety days	2393
after receiving a resubmitted recommendation, the board shall	2394
approve or disapprove the recommendation. There is no limit on the	2395
number of times the committee may resubmit a recommendation for	2396
consideration by the board.	2397
(D)(1) Except as provided in division (D)(2) of this section,	2398
the board may not take action regarding a matter that is subject	2399
to the committee's review under division (A) or (B) of this	2400

other provisions of this chapter pertaining to the practice of a

(A)(4)(a) of this section, an applicant shall meet either of the 2490 following educational requirements: 2491 (1) The applicant shall hold a master's or higher degree 2492 obtained from a program accredited by the accreditation review 2493 commission on education for the physician assistant or a 2494 predecessor or successor organization recognized by the board. 2495 (2) The applicant shall hold both of the following degrees: 2496 (a) A degree other than a master's or higher degree obtained 2497 from a program accredited by the accreditation review commission 2498 on education for the physician assistant or a predecessor or 2499 successor organization recognized by the board; 2500 (b) A master's or higher degree in a course of study with 2501 clinical relevance to the practice of physician assistants and 2502 obtained from a program accredited by a regional or specialized 2503 and professional accrediting agency recognized by the council for 2504 higher education accreditation. 2505 (C) For purposes of division (A)(4)(b) of this section, an 2506 applicant shall present evidence satisfactory to the board of 2507 meeting one of the following requirements in lieu of meeting the 2508 educational requirements specified in division (B)(1) or (2) of 2509 this section: 2510 (1) The applicant shall hold a current, valid license or 2511 other form of authority to practice as a physician assistant 2512 issued by another jurisdiction prior to January 1, 2008 and have 2513 been in active practice in any jurisdiction throughout the 2514 three-year period immediately preceding the date of application. 2515 (2) The applicant shall hold a degree obtained as a result of 2516 being enrolled on January 1, 2008, in a program in this state that 2517 was accredited by the accreditation review commission on education 2518 for the physician assistant but did not grant a master's or higher 2519

degree to individuals enrolled in the program on that date, and

Sub. H. B. No. 412

As Re-reported by the Senate Rules Committee

division (B)(1) or (2) of this section became effective January 1,	2552
2008;	2553
$\frac{(2)(b)}{(b)}$ By meeting the educational or other applicable	2554
requirements specified in division $(C)(1)$ , $(2)$ , or $(3)$ of this	2555
section.	2556
(2) A license described in division (E)(1) of this section	2557
authorizes the license holder to exercise physician-delegated	2558
prescriptive authority if, on the effective date of this	2559
amendment, the license holder held a valid certificate to	2560
prescribe issued under former section 4730.44 of the Revised Code,	2561
as it existed immediately prior to the effective date of this	2562
amendment.	2563
(3) On application of an individual who received a license	2564
without having first obtained a master's or higher degree and is	2565
not authorized under division (E)(2) of this section to exercise	2566
physician-delegated prescriptive authority, the board shall grant	2567
the individual the authority to exercise physician-delegated	2568
prescriptive authority if the individual provides evidence	2569
satisfactory to the board of having obtained a master's or higher	2570
degree from either of the following:	2571
(a) A program accredited by the accreditation review	2572
commission on education for the physician assistant or a	2573
predecessor or successor organization recognized by the board;	2574
(b) A program accredited by a regional or specialized and	2575
professional accrediting agency recognized by the council for	2576
higher education accreditation, if the degree is in a course of	2577
study with clinical relevance to the practice of physician	2578
assistants.	2579
Sec. 4730.111. A physician assistant whose certification by	2580
the national commission on certification of physician assistants	2500

or a successor organization recognized by the state medical board	2582
is suspended or revoked shall give notice of that occurrence to	2583
the board not later than fourteen days after the physician	2584
assistant receives notice of the change in certification status. A	2585
physician assistant who fails to renew the certification shall	2586
notify the board not later than fourteen days after the	2587
certification expires.	2588
Sec. 4730.12. (A) The state medical board shall review all	2589
applications each application received under section 4730.10 of	2590
the Revised Code for <del>certificates</del> <u>a license</u> to practice as a	2591
physician assistant. Not later than sixty days after receiving a	2592
complete application, the board shall determine whether an	2593
applicant meets the requirements to receive a <del>certificate</del> <u>license</u>	2594
to practice, as specified in section 4730.11 of the Revised Code.	2595
An affirmative vote of not fewer than six members of the board is	2596
required to determine that an applicant meets the requirements to	2597
receive a <del>certificate</del> <u>license</u> to practice as a physician	2598
assistant.	2599
(B) If the board determines that an applicant meets the	2600
requirements to receive the <del>certificate</del> <u>license</u> , the secretary of	2601
the board shall register the applicant as a physician assistant	2602
and issue to the applicant a <del>certificate</del> <u>license</u> to practice as a	2603
physician assistant.	2604
(C)(1) During the first five hundred hours of the first one	2605
thousand hours of a physician assistant's exercise of	2606
physician-delegated prescriptive authority, the physician	2607
assistant shall exercise that authority only under the on-site	2608
supervision of a supervising physician.	2609
(2) A physician assistant shall be excused from the	2610
requirement established in division (C)(1) of this section if	2611

prior to application the physician assistant held a prescriber

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.

2623

2624

2625

2626

2627

2628

2629

Sec. 4730.14. (A) A certificate license to practice as a 2630 physician assistant shall expire biennially and may be renewed in 2631 accordance with this section. A person seeking to renew a 2632 certificate license to practice as a physician assistant shall, on 2633 or before the thirty-first day of January of each even-numbered 2634 year, apply for renewal of the certificate license. The state 2635 medical board shall send renewal notices at least one month prior 2636 to the expiration date. 2637

Applications shall be submitted to the board on forms the 2638 board shall prescribe and furnish. Each application shall be 2639 accompanied by a biennial renewal fee of one two hundred dollars. 2640 The board shall deposit the fees in accordance with section 2641 4731.24 of the Revised Code.

2673

The applicant shall report any criminal offense that	2643
constitutes grounds for refusing to issue a certificate license to	2644
practice under section 4730.25 of the Revised Code to which the	2645
applicant has pleaded guilty, of which the applicant has been	2646
found guilty, or for which the applicant has been found eligible	2647
for intervention in lieu of conviction, since last signing an	2648
application for a <del>certificate</del> <u>license</u> to practice as a physician	2649
assistant.	2650
(B) To be eligible for renewal of a license, a physician	2651
assistant shall certify to the board both an applicant is subject	2652
to all of the following:	2653
(1) That the physician assistant The applicant shall certify	2654
to the board that the applicant has maintained certification by	2655
the national commission on certification of physician assistants	2656
or a successor organization that is recognized by the board by	2657
meeting the standards to hold current certification from the	2658
commission or its successor, including completion of continuing	2659
medical education requirements and passing periodic	2660
recertification examinations $\div$ .	2661
(2) Except as provided in division (F) of this section and	2662
section 5903.12 of the Revised Code, the applicant shall certify	2663
to the board that the physician assistant applicant has completed	2664
during the current <del>certification</del> <u>licensure</u> period not less than	2665
one hundred hours of continuing medical education acceptable to	2666
the board.	2667
(3) The applicant shall comply with the renewal eligibility	2668
requirements established under section 4730.49 of the Revised Code	2669
that pertain to the applicant.	2670
(C) The board shall adopt rules in accordance with Chapter	2671

119. of the Revised Code specifying the types of continuing

medical education that must be completed to fulfill the board's

## Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

requirements under division (B)(2) of this section. Except when 2674 additional continuing medical education is required to renew a 2675 certificate to prescribe, as specified in section 4730.49 of the 2676 Revised Code, the board shall not adopt rules that require a 2677 physician assistant to complete in any <del>certification</del> <u>licensure</u> 2678 period more than one hundred hours of continuing medical education 2679 acceptable to the board. In fulfilling the board's requirements, a 2680 physician assistant may use continuing medical education courses 2681 or programs completed to maintain certification by the national 2682 commission on certification of physician assistants or a successor 2683 organization that is recognized by the board if the standards for 2684 acceptable courses and programs of the commission or its successor 2685 are at least equivalent to the standards established by the board. 2686

- (D) If an applicant submits a complete renewal application 2687 and qualifies for renewal pursuant to division (B) of this 2688 section, the board shall issue to the applicant a renewed 2689 certificate license to practice as a physician assistant. 2690
- (E) The board may require a random sample of physician 2691 assistants to submit materials documenting certification by the 2692 national commission on certification of physician assistants or a 2693 successor organization that is recognized by the board and 2694 completion of the required number of hours of continuing medical 2695 education.
- (F) The board shall provide for pro rata reductions by month
  of the number of hours of continuing education that must be
  completed for individuals who are in their first certification
  licensure period, who have been disabled due to illness or
  accident, or who have been absent from the country. The board
  shall adopt rules, in accordance with Chapter 119. of the Revised
  Code, as necessary to implement this division.
- (G)(1) A <u>certificate license</u> to practice that is not renewed 2704 on or before its expiration date is automatically suspended on its 2705

expiration date. Continued practice after suspension of the	2706
certificate license shall be considered as practicing in violation	2707
of division (A) of section 4730.02 of the Revised Code.	2708
(2) If a certificate license has been suspended pursuant to	2709
division $(G)(1)$ of this section for two years or less, it may be	2710
reinstated. The board shall reinstate a <del>certificate</del> <u>license</u>	2711
suspended for failure to renew upon an applicant's submission of a	2712
renewal application, the biennial renewal fee, and any applicable	2713
monetary penalty.	2714
If a certificate license has been suspended pursuant to	2715
division $(G)(1)$ of this <u>division</u> <u>section</u> for more than two years,	2716
it may be restored. In accordance with section 4730.28 of the	2717
Revised Code, the board may restore a <del>certificate</del> <u>license</u>	2718
suspended for failure to renew upon an applicant's submission of a	2719
restoration application, the biennial renewal fee, and any	2720
applicable monetary penalty and compliance with sections 4776.01	2721
to 4776.04 of the Revised Code. The board shall not restore to an	2722
applicant a <del>certificate</del> <u>license</u> to practice as a physician	2723
assistant unless the board, in its discretion, decides that the	2724
results of the criminal records check do not make the applicant	2725
ineligible for a <del>certificate</del> <u>license</u> issued pursuant to section	2726
4730.12 of the Revised Code.	2727
The penalty for reinstatement shall be fifty dollars and the	2728
penalty for restoration shall be one hundred dollars. The board	2729
shall deposit penalties in accordance with section 4731.24 of the	2730
Revised Code.	2731

(H) If an individual certifies that the individual has

2732

completed the number of hours and type of continuing medical

2733

education required for renewal or reinstatement of a certificate

2734

license to practice as a physician assistant, and the board finds

2735

through a random sample conducted under division (E) of this

2736

section or through any other means that the individual did not

2737

to practice as a physician assistant.

complete the requisite continuing medical education, the board may	2738
impose a civil penalty of not more than five thousand dollars. The	2739
board's finding shall be made pursuant to an adjudication under	2740
Chapter 119. of the Revised Code and by an affirmative vote of not	2741
fewer than six members.	2742
A civil penalty imposed under this division may be in	2743
addition to or in lieu of any other action the board may take	2744
under section 4730.25 of the Revised Code. The board shall deposit	2745
civil penalties in accordance with section 4731.24 of the Revised	2746
Code.	2747
Sec. 4730.19. (A) For a supervision agreement to be approved	2748
by the board, all of the following apply:	2749
(1) Before initiating supervision of one or more physician	2750
assistants licensed under this chapter, a physician shall enter	2751
into a supervision agreement with each physician assistant who	2752
will be supervised. A supervision agreement may apply to one or	2753
more physician assistants, but, except as provided in division	2754
(B)(2)(e) of this section, may apply to not more than one	2755
physician. The supervision agreement shall specify that the	2756
physician agrees to supervise the physician assistant and the	2757
physician assistant agrees to practice in accordance with the	2758
conditions specified in the physician supervisory plan approved	2759
for that physician or the policies of the health care facility in	2760
which the supervising physician and physician assistant are	2761
practicing under that physician's supervision.	2762
(2) The agreement shall clearly state that the supervising	2763
physician is legally responsible and assumes legal liability for	2764
the services provided by the physician assistant. The agreement	2765
shall be signed by the physician and the physician assistant.	2766
(3) The physician assistant shall hold a current certificate	2767

(4) If a physician supervisory plan applies to the physician	2769
assistant's practice, the physician shall hold an approved	2770
<del>physician supervisory plan.</del>	2771
(5) If the physician intends to grant physician-delegated	2772
prescriptive authority to a physician assistant, the physician	2773
assistant shall hold a certificate to prescribe issued under this	2774
<del>chapter.</del>	2775
(6) If the physician holds approval of more than one	2776
physician supervisory plan, the agreement shall specify the plan	2777
under which the physician assistant will practice.	2778
(B) The board shall review each application received. If the	2779
board finds that the requirements specified in division (A) of	2780
this section have been met and the applicant has paid the fee	2781
specified in section 4730.18 of the Revised Code, the board shall	2782
approve the supervision agreement and notify the supervising	2783
physician of the board's approval. If physician delegated	2784
prescriptive authority will be granted to more than one physician	2785
assistant under the supervision agreement, the board shall specify	2786
in the notice that its approval is specific to each physician	2787
assistant. The board shall provide notice of its approval of a	2788
supervision agreement not later than thirty days after the board	2789
receives a complete application for approval. A supervision	2790
agreement shall include either or both of the following:	2791
(1) If a physician assistant will practice within a health	2792
care facility, the agreement shall include terms that require the	2793
physician assistant to practice in accordance with the policies of	2794
the health care facility.	2795
(2) If a physician assistant will practice outside a health	2796
care facility, the agreement shall include terms that specify all	2797
of the following:	2798
(a) The responsibilities to be fulfilled by the physician in	2799

supervising the physician assistant;	2800
(b) The responsibilities to be fulfilled by the physician	2801
assistant when performing services under the physician's	2802
supervision;	2803
(c) Any limitations on the responsibilities to be fulfilled	2804
by the physician assistant;	2805
(d) The circumstances under which the physician assistant is	2806
required to refer a patient to the supervising physician;	2807
(e) If the supervising physician chooses to designate	2808
physicians to act as alternate supervising physicians, the names,	2809
business addresses, and business telephone numbers of the	2810
physicians who have agreed to act in that capacity.	2811
(C) After a supervision agreement is approved, a physician	2812
may apply to the board for approval to initiate supervision of a	2813
physician assistant who is not listed on the agreement. There is	2814
no fee for applying for the addition of a physician assistant to a	2815
supervision agreement.	2816
To receive the board's approval of the addition to the	2817
supervision agreement, the physician assistant shall hold a	2818
current certificate to practice as a physician assistant. If the	2819
physician intends to grant physician delegated prescriptive	2820
authority to the physician assistant, the physician assistant	2821
shall hold a current certificate to prescribe. If these	2822
requirements are met, the board shall notify the physician of its	2823
approval of the addition to the supervision agreement. The board	2824
shall provide notice of its approval not later than thirty days	2825
after the board receives a complete application for approval (1)	2826
The supervising physician shall submit a copy of each supervision	2827
agreement to the board. The board may review the supervision	2828
agreement at any time for compliance with this section and for	2829
verification of licensure of the supervising physician and the	2830

(D) A supervision agreement shall be kept in the records

Sub. H. B. No. 412

section 4730.202 of the Revised Code;	2891
(6) Assisting in surgery;	2892
(7) If the physician assistant holds a valid prescriber	2893
number issued by the state medical board and has been granted	2894
physician-delegated prescriptive authority, ordering, prescribing,	2895
personally furnishing, and administering drugs and medical	2896
devices;	2897
(8) Any other services that are part of the supervising	2898
physician's normal course of practice and expertise.	2899
(B) The services a physician assistant may provide under the	2900
policies of a health care facility are limited to the services the	2901
facility authorizes the physician assistant to provide for the	2902
facility. A facility shall not authorize a physician assistant to	2903
perform a service that is prohibited under this chapter. A	2904
physician who is supervising a physician assistant within a health	2905
care facility may impose limitations on the physician assistant's	2906
practice that are in addition to any limitations applicable under	2907
the policies of the facility.	2908
Sec. 4730.091 4730.201. (A) As used in this section, "local	2909
anesthesia" means the injection of a drug or combination of drugs	2910
to stop or prevent a painful sensation in a circumscribed area of	2911
the body where a painful procedure is to be performed. "Local	2912
anesthesia" includes only local infiltration anesthesia, digital	2913
blocks, and pudendal blocks.	2914
(B) A physician assistant may administer, monitor, or	2915
maintain local anesthesia as a component of a procedure the	2916
physician assistant is performing or as a separate service when	2917
the procedure requiring local anesthesia is to be performed by the	2918
physician assistant's supervising physician or another person. A	2919
physician assistant shall not administer, monitor, or maintain any	2920

Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee	Page 97
other form of anesthesia, including regional anesthesia or any	2921
systemic sedation, regardless of whether the physician assistant	2922
is practicing under a physician supervisory plan or the policies	2923
of a health care facility.	2924
Sec. 4730.092 4730.202. (A) A physician assistant may	2925
determine and pronounce an individual's death, but only if the	2926
individual's respiratory and circulatory functions are not being	2927
artificially sustained and, at the time the determination and	2928
pronouncement of death is made, either or both of the following	2929
apply:	2930
(1) The individual was receiving care in one of the	2931
following:	2932
(a) A nursing home licensed under section 3721.02 of the	2933
Revised Code or by a political subdivision under section 3721.09	2934
of the Revised Code;	2935
(b) A residential care facility or home for the aging	2936
licensed under Chapter 3721. of the Revised Code;	2937
(c) A county home or district home operated pursuant to	2938
Chapter 5155. of the Revised Code;	2939
(d) A residential facility licensed under section 5123.19 of	2940
the Revised Code.	2941
(2) The physician assistant is providing or supervising the	2942
individual's care through a hospice care program licensed under	2943
Chapter 3712. of the Revised Code or any other entity that	2944
provides palliative care.	2945
(B) If a physician assistant determines and pronounces an	2946
individual's death, the physician assistant shall comply with both	2947
of the following:	2948
(1) The physician assistant shall not complete any portion of	2949
the individual's death certificate.	2950

(2) The physician assistant shall notify the individual's	2951
attending physician of the determination and pronouncement of	2952
death in order for the physician to fulfill the physician's duties	2953
under section 3705.16 of the Revised Code. The physician assistant	2954
shall provide the notification within a period of time that is	2955
reasonable but not later than twenty-four hours following the	2956
determination and pronouncement of the individual's death.	2957
Sec. 4730.203. (A) Acting pursuant to a supervision	2958
agreement, a physician assistant may delegate performance of a	2959
task to implement a patient's plan of care or, if the conditions	2960
in division (C) of this section are met, may delegate	2961
administration of a drug. Delegation may be to a person who has	2962
successfully completed a training and competency evaluation	2963
program approved by the director of health under section 3721.31	2964
of the Revised Code or, subject to division (D) of section 4730.03	2965
of the Revised Code, any other person. The physician assistant	2966
must be physically present at the location where the task is	2967
performed or the drug administered.	2968
(B) Prior to delegating a task or administration of a drug, a	2969
physician assistant shall determine that the task or drug is	2970
appropriate for the patient and the person to whom the delegation	2971
is to be made may safely perform the task or administer the drug.	2972
(C) A physician assistant may delegate administration of a	2973
drug only if all of the following conditions are met:	2974
(1) The physician assistant has physician-delegated	2975
prescriptive authority.	2976
(2) The drug is included in the formulary established under	2977
division (A) of section 4730.39 of the Revised Code.	2978
(3) The drug is not a controlled substance.	2979
(4) The drug will not be administered intravenously.	2980

(5) The drug will not be administered in a hospital inpatient	2981
care unit, as defined in section 3727.50 of the Revised Code; a	2982
hospital emergency department; a freestanding emergency	2983
department; or an ambulatory surgical facility licensed under	2984
section 3702.30 of the Revised Code.	2985
(D) A person not otherwise authorized to administer a drug or	2986
perform a specific task may do so in accordance with a physician	2987
assistant's delegation under this section.	2988
Sec. 4730.21. (A) The supervising physician of a physician	2989
assistant exercises supervision, control, and direction of the	2990
physician assistant. <del>In</del> <u>A physician assistant may practice in any</u>	2991
setting within which the supervising physician has supervision,	2992
control, and direction of the physician assistant.	2993
In supervising a physician assistant, all of the following	2994
apply:	2995
apply:  (1) Except when the on-site supervision requirements	2995 2996
(1) Except when the on-site supervision requirements	2996
(1) Except when the on-site supervision requirements specified in section 4730.45 of the Revised Code are applicable,	2996 2997
(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	2996 2997 2998
(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 direct communication with the physician assistant by either of the	2996 2997 2998 2999
(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 direct communication with the physician assistant by either of the following means:	2996 2997 2998 2999 3000
(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 direct communication with the physician assistant by either of the following means:  (a) Being physically present at the location where the	2996 2997 2998 2999 3000 3001
<pre>(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 direct communication with the physician assistant by either of the following means:     (a) Being physically present at the location where the physician assistant is practicing;</pre>	2996 2997 2998 2999 3000 3001 3002
<pre>(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 direct communication with the physician assistant by either of the following means:     (a) Being physically present at the location where the physician assistant is practicing;     (b) Being readily available to the physician assistant</pre>	2996 2997 2998 2999 3000 3001 3002
(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 direct communication with the physician assistant by either of the following means:  (a) Being physically present at the location where the physician assistant is practicing;  (b) Being readily available to the physician assistant through some means of telecommunication and being in a location	2996 2997 2998 2999 3000 3001 3002 3003 3004
(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 direct communication with the physician assistant by either of the following means:  (a) Being physically present at the location where the physician assistant is practicing;  (b) Being readily available to the physician assistant through some means of telecommunication and being in a location that under normal conditions is not more than sixty minutes travel	2996 2997 2998 2999 3000 3001 3002 3003 3004 3005
(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 direct communication with the physician assistant by either of the following means:  (a) Being physically present at the location where the physician assistant is practicing;  (b) Being readily available to the physician assistant through some means of telecommunication and being in a location that under normal conditions is not more than sixty minutes travel time away a distance from the location where the physician	2996 2997 2998 2999 3000 3001 3002 3003 3004 3005 3006
(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 direct communication with the physician assistant by either of the following means:  (a) Being physically present at the location where the physician assistant is practicing;  (b) Being readily available to the physician assistant through some means of telecommunication and being in a location that under normal conditions is not more than sixty minutes travel time away a distance from the location where the physician assistant is practicing that reasonably allows the physician to	2996 2997 2998 2999 3000 3001 3002 3003 3004 3005 3006 3007

(3) The supervising physician shall regularly review the 3011 condition of the patients treated by the physician assistant. 3012 (4) The supervising physician shall ensure that the quality 3013 assurance system established pursuant to division (F) of this 3014 section is implemented and maintained. 3015  $\frac{(5)(4)}{(5)}$  The supervising physician shall regularly perform any 3016 other reviews of the physician assistant that the supervising 3017 physician considers necessary. 3018 (B) A physician may enter into supervision agreements with 3019 any number of physician assistants, but the physician may not 3020 supervise more than two three physician assistants at any one 3021 time. A physician assistant may enter into supervision agreements 3022 with any number of supervising physicians, but when practicing 3023 under the supervision of a particular physician, the physician 3024 assistant's scope of practice is subject to the limitations of the 3025 physician supervisory plan that has been approved under section 3026 4730.17 of the Revised Code for that physician or the policies of 3027 the health care facility in which the physician and physician 3028 assistant are practicing. 3029 (C) A supervising physician may authorize a physician 3030 assistant to perform a service only if the service is authorized 3031 under the physician supervisory plan approved for that physician 3032 or the policies of the health care facility in which the physician 3033 and physician assistant are practicing. A supervising physician 3034 may authorize a physician assistant to perform a service only if 3035 the physician is satisfied that the physician assistant is capable 3036 of competently performing the service. A supervising physician 3037 shall not authorize a physician assistant to perform any service 3038 that is beyond the physician's or the physician assistant's normal 3039 course of practice and expertise. 3040

(D)(1) A supervising physician may authorize a physician

assistant to practice in any setting within which the supervising	3042
physician routinely practices.	3043
(2) In the case of a health care facility with an emergency	3044
department, if the supervising physician routinely practices in	3045
the facility's emergency department, the supervising physician	3046
shall provide on-site supervision of the physician assistant when	3047
the physician assistant practices in the emergency department. If	3048
the supervising physician does not routinely practice in the	3049
facility's emergency department, the supervising physician may, on	3050
occasion, send the physician assistant to the facility's emergency	3051
department to assess and manage a patient. In supervising the	3052
physician assistant's assessment and management of the patient,	3053
the supervising physician shall determine the appropriate level of	3054
supervision in compliance with the requirements of divisions (A)	3055
to (C) of this section, except that the supervising physician must	3056
be available to go to the emergency department to personally	3057
evaluate the patient and, at the request of an emergency	3058
department physician, the supervising physician shall go to the	3059
emergency department to personally evaluate the patient.	3060
(E) Each time a physician assistant writes a medical order,	3061
including prescriptions written in the exercise of	3062
physician-delegated prescriptive authority, the physician	3063
assistant shall sign the form on which the order is written and	3064
record on the form the time and date that the order is written.	3065
When writing a medical order, the physician assistant shall	3066
clearly identify the physician under whose supervision the	3067
physician assistant is authorized to write the order.	3068
(F)(1) The supervising physician of a physician assistant	3069
shall establish a quality assurance system to be used in	3070
supervising the physician assistant. All or part of the system may	3071
be applied to other physician assistants who are supervised by the	3072

supervising physician. The system shall be developed in

consultation with each physician assistant to be supervised by the	3074
physician.	3075
(2) In establishing the quality assurance system, the	3076
supervising physician shall describe a process to be used for all	3077
of the following:	3078
(a) Routine review by the physician of selected patient	3079
record entries made by the physician assistant and selected	3080
medical orders issued by the physician assistant;	3081
(b) Discussion of complex cases;	3082
(c) Discussion of new medical developments relevant to the	3083
practice of the physician and physician assistant;	3084
(d) Performance of any quality assurance activities required	3085
in rules adopted by state medical board pursuant to any	3086
recommendations made by the physician assistant policy committee	3087
under section 4730.06 of the Revised Code;	3088
(e) Performance of any other quality assurance activities	3089
that the supervising physician considers to be appropriate.	3090
(3) The supervising physician and physician assistant shall	3091
keep records of their quality assurance activities. On request,	3092
the records shall be made available to the board and any health	3093
care professional working with the supervising physician and	3094
<del>physician assistant</del> .	3095
400000 (2) 2 77	2006
Sec. 4730.22. (A) A When performing authorized services, a	3096
physician assistant acts as the agent of the physician assistant's	3097
supervising physician. The supervising physician is legally	3098
responsible and assumes legal liability for the services provided	3099
by the physician assistant.	3100
The physician is not responsible or liable for any services	3101
provided by the physician assistant after their supervision	3102
agreement <u>expires or</u> is terminated.	3103

## Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

(B) When a health care facility permits physician assistants	3104
to practice within that facility or any other health care facility	3105
under its control, the health care facility shall make reasonable	3106
efforts to explain to each individual who may work with a	3107
particular physician assistant the scope of that physician	3108
assistant's practice within the facility. The appropriate	3109
credentialing body within the health care facility shall provide,	3110
on request of an individual practicing in the facility with a	3111
physician assistant, a copy of the facility's policies on the	3112
practice of physician assistants within the facility and a copy of	3113
each <del>physician supervisory plan and</del> supervision agreement	3114
applicable to the physician assistant.	3115

An individual who follows the orders of a physician assistant 3116 practicing in a health care facility is not subject to 3117 disciplinary action by any administrative agency that governs that 3118 individual's conduct and is not liable in damages in a civil 3119 action for injury, death, or loss to person or property resulting 3120 from the individual's acts or omissions in the performance of any 3121 procedure, treatment, or other health care service if the 3122 individual reasonably believed that the physician assistant was 3123 acting within the proper scope of practice or was relaying medical 3124 orders from a supervising physician, unless the act or omission 3125 constitutes willful or wanton misconduct. 3126

sec. 4730.25. (A) The state medical board, by an affirmative 3127 vote of not fewer than six members, may revoke or may refuse to 3128 grant a <u>certificate license</u> to practice as a physician assistant 3129 or a <u>certificate to prescribe</u> to a person found by the board to 3130 have committed fraud, misrepresentation, or deception in applying 3131 for or securing the <u>certificate license</u>. 3132

(B) The board, by an affirmative vote of not fewer than six 3133 members, shall, to the extent permitted by law, limit, revoke, or 3134

physician assistant or certificate to prescribe prescriber number, refuse to issue a certificate license to an applicant, refuse to 313' reinstate a certificate license, or reprimand or place on 313' probation the holder of a certificate license for any of the 313' following reasons: 314'  (1) Failure to practice in accordance with the conditions 314' under which the supervising physician's supervision agreement with the physician assistant was approved, including the requirement 314' that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or. 314' including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing; 314' (2) Failure to comply with the requirements of this chapter, 315' (2) Failure to comply with the requirements of this chapter, 315' (3) Violating or attempting to violate, directly or 315' indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this chapter, Chapter 315' (4) Inability to practice according to acceptable and 316' (4) Inability to practice according to acceptable and 316' physical illness, including physical deterioration that adversely affects cognitive, motor, or perceptive skills; 316' (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 316'		
refuse to issue a certificate license to an applicant, refuse to reinstate a certificate license, or reprimand or place on probation the holder of a certificate license for any of the following reasons:  (1) Failure to practice in accordance with the conditions under which the supervising physician's supervision agreement with the physician assistant was approved, including the requirement that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;  (2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 316:	suspend an individual's <del>certificate</del> <u>license</u> to practice as a	3135
reinstate a certificate license, or reprimand or place on probation the holder of a certificate license for any of the following reasons:  (1) Failure to practice in accordance with the conditions 314: under which the supervising physician's supervision agreement with 314: the physician assistant was approved, including the requirement 314: that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, 314: including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing; 314: (2) Failure to comply with the requirements of this chapter, 315: (5) That a supervision of this chapter, 315: (3) Violating or attempting to violate, directly or 315: (3) Violating or attempting to violate, directly or 315: (4) Inability to practice according to acceptable and 315: (4) Inability to practice according to acceptable and 315: (5) Impairment of ability to practice according to acceptable 316: and prevailing standards of care by reason of mental illness or 316: 316: 316: 316: 316: 316: 316: 316:	physician assistant or <del>certificate to prescribe</del> <u>prescriber number</u> ,	3136
probation the holder of a certificate license for any of the following reasons:  (1) Failure to practice in accordance with the conditions under which the supervising physician's supervision agreement with the physician assistant was approved, including the requirement that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;  (2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	refuse to issue a <del>certificate</del> <u>license</u> to an applicant, refuse to	3137
(1) Failure to practice in accordance with the conditions  (1) Failure to practice in accordance with the conditions  under which the supervising physician's supervision agreement with the physician assistant was approved, including the requirement that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;  (2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 316	reinstate a <del>certificate</del> <u>license</u> , or reprimand or place on	3138
(1) Failure to practice in accordance with the conditions under which the supervising physician's supervision agreement with the physician assistant was approved, including the requirement that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing; (2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board; (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; (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; (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 316:	probation the holder of a <del>certificate</del> <u>license</u> for any of the	3139
under which the supervising physician's supervision agreement with the physician assistant was approved, including the requirement that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;  (2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	following reasons:	3140
the physician assistant was approved, including the requirement that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing; (2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board; (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; (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; (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	(1) Failure to practice in accordance with the conditions	3141
that when practicing under a particular supervising physician, the physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;  (2) Failure to comply with the requirements of this chapter, 3150 (2) Failure to comply with the requirements of this chapter, 3150 (3) Violating or attempting to violate, directly or 3150 indirectly, or assisting in or abetting the violation of, or 3150 conspiring to violate, any provision of this chapter, Chapter 3150 (4) Inability to practice according to acceptable and 3150 prevailing standards of care by reason of mental illness or 3150 physical illness, including physical deterioration that adversely 3150 and prevailing standards of care because of habitual or excessive 3160 and prevailing standards of care because of habitual or excessive 3160 and prevailing standards of care because of habitual or excessive 3160 and prevailing standards of care because of habitual or excessive 3160 and 3160 a	under which the supervising physician's supervision agreement with	3142
physician assistant must practice only according to the physician supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;  (2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	the physician assistant was approved, including the requirement	3143
supervisory plan the board approved for that physician or, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;  (2) Failure to comply with the requirements of this chapter, 3150 (Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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 3150 (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	that when practicing under a particular supervising physician, the	3144
including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;  (2) Failure to comply with the requirements of this chapter,  (2) Failure to comply with the requirements of this chapter,  (3) Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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 3159  4731. of the Revised Code, or the rules adopted by the board;  (4) Inability to practice according to acceptable and prevailing standards of care by reason of mental illness or 3159  physical illness, including physical deterioration that adversely affects cognitive, motor, or perceptive skills;  (5) Impairment of ability to practice according to acceptable 3169  and prevailing standards of care because of habitual or excessive 3169	physician assistant must practice only according to the physician	3145
in which the supervising physician and physician assistant are  practicing;  (2) Failure to comply with the requirements of this chapter,  Chapter 4731. of the Revised Code, or any rules adopted by the  board;  (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;  (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;  (5) Impairment of ability to practice according to acceptable  and prevailing standards of care because of habitual or excessive  3163	supervisory plan the board approved for that physician or,	3146
(2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	including, if applicable, the policies of the health care facility	3147
(2) Failure to comply with the requirements of this chapter, Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive	in which the supervising physician and physician assistant are	3148
Chapter 4731. of the Revised Code, or any rules adopted by the board;  (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 3159 4731. of the Revised Code, or the rules adopted by the board;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	practicing;	3149
board;  (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; (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; (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	(2) Failure to comply with the requirements of this chapter,	3150
(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; (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; (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3153	Chapter 4731. of the Revised Code, or any rules adopted by the	3151
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;  (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;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	board;	3152
conspiring to violate, any provision of this chapter, Chapter  4731. of the Revised Code, or the rules adopted by the board;  (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;  (5) Impairment of ability to practice according to acceptable  and prevailing standards of care because of habitual or excessive  3153	(3) Violating or attempting to violate, directly or	3153
4731. of the Revised Code, or the rules adopted by the board;  (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;  (5) Impairment of ability to practice according to acceptable  and prevailing standards of care because of habitual or excessive  3156  3167	indirectly, or assisting in or abetting the violation of, or	3154
(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;  (5) Impairment of ability to practice according to acceptable  and prevailing standards of care because of habitual or excessive  3157	conspiring to violate, any provision of this chapter, Chapter	3155
prevailing standards of care by reason of mental illness or  physical illness, including physical deterioration that adversely affects cognitive, motor, or perceptive skills;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive  3158 3168	4731. of the Revised Code, or the rules adopted by the board;	3156
physical illness, including physical deterioration that adversely affects cognitive, motor, or perceptive skills;  (5) Impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive 3163	(4) Inability to practice according to acceptable and	3157
affects cognitive, motor, or perceptive skills;  (5) Impairment of ability to practice according to acceptable  and prevailing standards of care because of habitual or excessive  3162	prevailing standards of care by reason of mental illness or	3158
(5) Impairment of ability to practice according to acceptable 3162 and prevailing standards of care because of habitual or excessive 3162	physical illness, including physical deterioration that adversely	3159
and prevailing standards of care because of habitual or excessive 3162	affects cognitive, motor, or perceptive skills;	3160
	(5) Impairment of ability to practice according to acceptable	3161
use or abuse of drugs, alcohol, or other substances that impair 3163	and prevailing standards of care because of habitual or excessive	3162
	use or abuse of drugs, alcohol, or other substances that impair	3163
ability to practice; 3164	ability to practice;	3164
(6) Administering drugs for purposes other than those 3169	(6) Administering drugs for purposes other than those	3165

committed;

authorized under this chapter;	3166
(7) Willfully betraying a professional confidence;	3167
(8) Making a false, fraudulent, deceptive, or misleading	3168
statement in soliciting or advertising for employment as a	3169
physician assistant; in connection with any solicitation or	3170
advertisement for patients; in relation to the practice of	3171
medicine as it pertains to physician assistants; or in securing or	3172
attempting to secure a <del>certificate</del> <u>license</u> to practice as a	3173
physician assistant <del>, a certificate to prescribe, or approval of a</del>	3174
supervision agreement.	3175
As used in this division, "false, fraudulent, deceptive, or	3176
misleading statement" means a statement that includes a	3177
misrepresentation of fact, is likely to mislead or deceive because	3178
of a failure to disclose material facts, is intended or is likely	3179
to create false or unjustified expectations of favorable results,	3180
or includes representations or implications that in reasonable	3181
probability will cause an ordinarily prudent person to	3182
misunderstand or be deceived.	3183
(9) Representing, with the purpose of obtaining compensation	3184
or other advantage personally or for any other person, that an	3185
incurable disease or injury, or other incurable condition, can be	3186
permanently cured;	3187
(10) The obtaining of, or attempting to obtain, money or	3188
anything of value by fraudulent misrepresentations in the course	3189
of practice;	3190
(11) A plea of guilty to, a judicial finding of guilt of, or	3191
a judicial finding of eligibility for intervention in lieu of	3192
conviction for, a felony;	3193
(12) Commission of an act that constitutes a felony in this	3194
state, regardless of the jurisdiction in which the act was	3195

Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

(13) A plea of guilty to, a judicial finding of guilt of, or	3197
a judicial finding of eligibility for intervention in lieu of	3198
conviction for, a misdemeanor committed in the course of practice;	3199
(14) A plea of guilty to, a judicial finding of guilt of, or	3200
a judicial finding of eligibility for intervention in lieu of	3201
conviction for, a misdemeanor involving moral turpitude;	3202
(15) Commission of an act in the course of practice that	3203
constitutes a misdemeanor in this state, regardless of the	3204
jurisdiction in which the act was committed;	3205
(16) Commission of an act involving moral turpitude that	3206
constitutes a misdemeanor in this state, regardless of the	3207
jurisdiction in which the act was committed;	3208
(17) A plea of guilty to, a judicial finding of guilt of, or	3209
a judicial finding of eligibility for intervention in lieu of	3210
conviction for violating any state or federal law regulating the	3211
possession, distribution, or use of any drug, including	3212
trafficking in drugs;	3213
(18) Any of the following actions taken by the state agency	3214
responsible for regulating the practice of physician assistants in	3215
another state, for any reason other than the nonpayment of fees:	3216
the limitation, revocation, or suspension of an individual's	3217
license to practice; acceptance of an individual's license	3218
surrender; denial of a license; refusal to renew or reinstate a	3219
license; imposition of probation; or issuance of an order of	3220
censure or other reprimand;	3221
(19) A departure from, or failure to conform to, minimal	3222
standards of care of similar physician assistants under the same	3223
or similar circumstances, regardless of whether actual injury to a	3224
patient is established;	3225
(20) Violation of the conditions placed by the board on a	3226

certificate <u>license</u> to practice as a physician assistant, a

certificate to prescribe, a physician supervisory plan, or	3228
<pre>supervision agreement;</pre>	3229
(21) Failure to use universal blood and body fluid	3230
precautions established by rules adopted under section 4731.051 of	3231
the Revised Code;	3232
(22) Failure to cooperate in an investigation conducted by	3233
the board under section 4730.26 of the Revised Code, including	3234
failure to comply with a subpoena or order issued by the board or	3235
failure to answer truthfully a question presented by the board at	3236
a deposition or in written interrogatories, except that failure to	3237
cooperate with an investigation shall not constitute grounds for	3238
discipline under this section if a court of competent jurisdiction	3239
has issued an order that either quashes a subpoena or permits the	3240
individual to withhold the testimony or evidence in issue;	3241
(23) Assisting suicide, as defined in section 3795.01 of the	3242
Revised Code;	3243
(24) Prescribing any drug or device to perform or induce an	3244
abortion, or otherwise performing or inducing an abortion;	3245
(25) Failure to comply with the requirements in section	3246
3719.061 of the Revised Code before issuing $\frac{1}{100}$ for a minor a	3247
prescription for a controlled substance containing an opioid:	3248
(26) Having certification by the national commission on	3249
certification of physician assistants or a successor organization	3250
expire, lapse, or be suspended or revoked.	3251
(C) Disciplinary actions taken by the board under divisions	3252
(A) and (B) of this section shall be taken pursuant to an	3253
adjudication under Chapter 119. of the Revised Code, except that	3254
in lieu of an adjudication, the board may enter into a consent	3255
agreement with a physician assistant or applicant to resolve an	3256
allegation of a violation of this chapter or any rule adopted	3257
under it. A consent agreement, when ratified by an affirmative	3258

vote of not fewer than six members of the board, shall constitute	3259
the findings and order of the board with respect to the matter	3260
addressed in the agreement. If the board refuses to ratify a	3261
consent agreement, the admissions and findings contained in the	3262
consent agreement shall be of no force or effect.	3263

- (D) For purposes of divisions (B)(12), (15), and (16) of this 3264 section, the commission of the act may be established by a finding 3265 by the board, pursuant to an adjudication under Chapter 119. of 3266 the Revised Code, that the applicant or certificate license holder 3267 committed the act in question. The board shall have no 3268 jurisdiction under these divisions in cases where the trial court 3269 renders a final judgment in the certificate license holder's favor 3270 and that judgment is based upon an adjudication on the merits. The 3271 board shall have jurisdiction under these divisions in cases where 3272 the trial court issues an order of dismissal upon technical or 3273 procedural grounds. 3274
- (E) The sealing of conviction records by any court shall have 3275 no effect upon a prior board order entered under the provisions of 3276 this section or upon the board's jurisdiction to take action under 3277 the provisions of this section if, based upon a plea of guilty, a 3278 judicial finding of guilt, or a judicial finding of eligibility 3279 for intervention in lieu of conviction, the board issued a notice 3280 of opportunity for a hearing prior to the court's order to seal 3281 the records. The board shall not be required to seal, destroy, 3282 redact, or otherwise modify its records to reflect the court's 3283 sealing of conviction records. 3284
- (F) For purposes of this division, any individual who holds a 3285 certificate license issued under this chapter, or applies for a 3286 certificate license issued under this chapter, shall be deemed to 3287 have given consent to submit to a mental or physical examination 3288 when directed to do so in writing by the board and to have waived 3289 all objections to the admissibility of testimony or examination 3290

reports that constitute a privileged communication.

(1) In enforcing division (B)(4) of this section, the board, 3292 upon a showing of a possible violation, may compel any individual 3293 who holds a certificate license issued under this chapter or who 3294 has applied for a certificate license pursuant to this chapter to 3295 submit to a mental examination, physical examination, including an 3296 HIV test, or both a mental and physical examination. The expense 3297 of the examination is the responsibility of the individual 3298 compelled to be examined. Failure to submit to a mental or 3299 physical examination or consent to an HIV test ordered by the 3300 board constitutes an admission of the allegations against the 3301 individual unless the failure is due to circumstances beyond the 3302 individual's control, and a default and final order may be entered 3303 without the taking of testimony or presentation of evidence. If 3304 the board finds a physician assistant unable to practice because 3305 of the reasons set forth in division (B)(4) of this section, the 3306 board shall require the physician assistant to submit to care, 3307 counseling, or treatment by physicians approved or designated by 3308 the board, as a condition for an initial, continued, reinstated, 3309 or renewed certificate license. An individual affected under this 3310 division shall be afforded an opportunity to demonstrate to the 3311 board the ability to resume practicing in compliance with 3312 acceptable and prevailing standards of care. 3313

(2) For purposes of division (B)(5) of this section, if the 3314 board has reason to believe that any individual who holds a 3315 certificate license issued under this chapter or any applicant for 3316 a certificate license suffers such impairment, the board may 3317 compel the individual to submit to a mental or physical 3318 examination, or both. The expense of the examination is the 3319 responsibility of the individual compelled to be examined. Any 3320 mental or physical examination required under this division shall 3321 be undertaken by a treatment provider or physician qualified to 3322

Sub. H. B. No. 412	
As Re-reported by the Se	enate Rules Committee

conduct such examination and chosen by the board.	3323
Failure to submit to a mental or physical examination ordered	3324
by the board constitutes an admission of the allegations against	3325
the individual unless the failure is due to circumstances beyond	3326
the individual's control, and a default and final order may be	3327
entered without the taking of testimony or presentation of	3328
evidence. If the board determines that the individual's ability to	3329
practice is impaired, the board shall suspend the individual's	3330
certificate license or deny the individual's application and shall	3331
require the individual, as a condition for initial, continued,	3332
reinstated, or renewed <del>certification</del> <u>licensure</u> to practice or	3333
authority to prescribe, to submit to treatment.	3334
Before being eligible to apply for reinstatement of a	3335
certificate license suspended under this division, the physician	3336
assistant shall demonstrate to the board the ability to resume	3337
practice or prescribing in compliance with acceptable and	3338
prevailing standards of care. The demonstration shall include the	3339
following:	3340
(a) Certification from a treatment provider approved under	3341
section 4731.25 of the Revised Code that the individual has	3342
successfully completed any required inpatient treatment;	3343
(b) Evidence of continuing full compliance with an aftercare	3344
contract or consent agreement;	3345
(c) Two written reports indicating that the individual's	3346
ability to practice has been assessed and that the individual has	3347
been found capable of practicing according to acceptable and	3348
prevailing standards of care. The reports shall be made by	3349
individuals or providers approved by the board for making such	3350
assessments and shall describe the basis for their determination.	3351
The board may reinstate a certificate license suspended under	3352
this division after such demonstration and after the individual	3353

has	entered	into	a writt	en consent	agreement.	3354	:
-----	---------	------	---------	------------	------------	------	---

When the impaired physician assistant resumes practice or 3355 prescribing, the board shall require continued monitoring of the 3356 physician assistant. The monitoring shall include compliance with 3357 the written consent agreement entered into before reinstatement or 3358 with conditions imposed by board order after a hearing, and, upon 3359 termination of the consent agreement, submission to the board for 3360 at least two years of annual written progress reports made under 3361 penalty of falsification stating whether the physician assistant 3362 has maintained sobriety. 3363

(G) If the secretary and supervising member determine that 3364 there is clear and convincing evidence that a physician assistant 3365 has violated division (B) of this section and that the 3366 individual's continued practice or prescribing presents a danger 3367 of immediate and serious harm to the public, they may recommend 3368 that the board suspend the individual's certificate license to 3369 practice or <u>authority to</u> prescribe without a prior hearing. 3370 Written allegations shall be prepared for consideration by the 3371 board. 3372

The board, upon review of those allegations and by an 3373 affirmative vote of not fewer than six of its members, excluding 3374 the secretary and supervising member, may suspend a certificate 3375 license without a prior hearing. A telephone conference call may 3376 be utilized for reviewing the allegations and taking the vote on 3377 the summary suspension. 3378

The board shall issue a written order of suspension by

certified mail or in person in accordance with section 119.07 of

3380

the Revised Code. The order shall not be subject to suspension by

the court during pendency of any appeal filed under section 119.12

of the Revised Code. If the physician assistant requests an

3383

adjudicatory hearing by the board, the date set for the hearing

3384

shall be within fifteen days, but not earlier than seven days,

3379

after the physician assistant requests the hearing, unless	3386
otherwise agreed to by both the board and the <b>certificate</b> <u>license</u>	3387
holder.	3388

A summary suspension imposed under this division shall remain 3389 in effect, unless reversed on appeal, until a final adjudicative 3390 order issued by the board pursuant to this section and Chapter 3391 119. of the Revised Code becomes effective. The board shall issue 3392 its final adjudicative order within sixty days after completion of 3393 its hearing. Failure to issue the order within sixty days shall 3394 result in dissolution of the summary suspension order, but shall 3395 not invalidate any subsequent, final adjudicative order. 3396

- (H) If the board takes action under division (B)(11), (13), 3397 or (14) of this section, and the judicial finding of quilt, quilty 3398 plea, or judicial finding of eligibility for intervention in lieu 3399 of conviction is overturned on appeal, upon exhaustion of the 3400 criminal appeal, a petition for reconsideration of the order may 3401 be filed with the board along with appropriate court documents. 3402 Upon receipt of a petition and supporting court documents, the 3403 board shall reinstate the certificate license to practice or 3404 prescribe. The board may then hold an adjudication under Chapter 3405 119. of the Revised Code to determine whether the individual 3406 committed the act in question. Notice of opportunity for hearing 3407 shall be given in accordance with Chapter 119. of the Revised 3408 Code. If the board finds, pursuant to an adjudication held under 3409 this division, that the individual committed the act, or if no 3410 hearing is requested, it may order any of the sanctions identified 3411 under division (B) of this section. 3412
- (I) The certificate license to practice issued to a physician 3413 assistant and the physician assistant's practice in this state are 3414 automatically suspended as of the date the physician assistant 3415 pleads guilty to, is found by a judge or jury to be guilty of, or 3416 is subject to a judicial finding of eligibility for intervention 3417

in lieu of conviction in this state or treatment or intervention	3418
in lieu of conviction in another state for any of the following	3419
criminal offenses in this state or a substantially equivalent	3420
criminal offense in another jurisdiction: aggravated murder,	3421
murder, voluntary manslaughter, felonious assault, kidnapping,	3422
rape, sexual battery, gross sexual imposition, aggravated arson,	3423
aggravated robbery, or aggravated burglary. Continued practice	3424
after the suspension shall be considered practicing without a	3425
certificate license.	3426

The board shall notify the individual subject to the

3427
suspension by certified mail or in person in accordance with

3428
section 119.07 of the Revised Code. If an individual whose

3429
certificate license is suspended under this division fails to make

3430
a timely request for an adjudication under Chapter 119. of the

3431
Revised Code, the board shall enter a final order permanently

3432
revoking the individual's certificate license to practice.

3433

- (J) In any instance in which the board is required by Chapter 3434 119. of the Revised Code to give notice of opportunity for hearing 3435 and the individual subject to the notice does not timely request a 3436 hearing in accordance with section 119.07 of the Revised Code, the 3437 board is not required to hold a hearing, but may adopt, by an 3438 affirmative vote of not fewer than six of its members, a final 3439 order that contains the board's findings. In that final order, the 3440 board may order any of the sanctions identified under division (A) 3441 or (B) of this section. 3442
- (K) Any action taken by the board under division (B) of this 3443 section resulting in a suspension shall be accompanied by a 3444 written statement of the conditions under which the physician 3445 assistant's certificate license may be reinstated. The board shall 3446 adopt rules in accordance with Chapter 119. of the Revised Code 3447 governing conditions to be imposed for reinstatement. 3448 Reinstatement of a certificate license suspended pursuant to 3449

division (B) of this section requires an affirmative vote of not	3450
fewer than six members of the board.	3451
(L) When the board refuses to grant to an applicant a	3452
certificate license to practice as a physician assistant or a	3453
certificate to prescribe, revokes an individual's certificate	3454
<u>license</u> , refuses to issue a <del>certificate</del> <u>license</u> , or refuses to	3455
reinstate an individual's certificate license, the board may	3456
specify that its action is permanent. An individual subject to a	3457
permanent action taken by the board is forever thereafter	3458
ineligible to hold the certificate license and the board shall not	3459
accept an application for reinstatement of the certificate license	3460
or for issuance of a new <del>certificate</del> <u>license</u> .	3461
(M) Notwithstanding any other provision of the Revised Code,	3462
all of the following apply:	3463
(1) The surrender of a <del>certificate</del> <u>license</u> issued under this	3464
chapter is not effective unless or until accepted by the board.	3465
Reinstatement of a <del>certificate</del> <u>license</u> surrendered to the board	3466
requires an affirmative vote of not fewer than six members of the	3467
board.	3468
(2) An application made under this chapter for a certificate,	3469
approval of a physician supervisory plan, or approval of a	3470
supervision agreement license may not be withdrawn without	3471
approval of the board.	3472
(3) Failure by an individual to renew a certificate license	3473
in accordance with section 4730.14 or section 4730.48 of the	3474
Revised Code shall not remove or limit the board's jurisdiction to	3475
take disciplinary action under this section against the	3476
individual.	3477
Sec. 4730.251. On receipt of a notice pursuant to section	3478
3123.43 of the Revised Code, the state medical board shall comply	3479

3508

3509

with sections 3123.41 to 3123.50 of the Revised Code and any	3480
applicable rules adopted under section 3123.63 of the Revised Code	3481
with respect to a <del>certificate</del> <u>license to practice as a physician</u>	3482
assistant issued pursuant to this chapter.	3483
Sec. 4730.27. If the state medical board has reason to	3484
believe that any person who has been granted a <b>certificate</b> <u>license</u>	3485
under this chapter to practice as a physician assistant is	3486
mentally ill or mentally incompetent, it may file in the probate	3487
court of the county in which such person has a legal residence an	3488
affidavit in the form prescribed in section 5122.11 of the Revised	3489
Code and signed by the board secretary or a member of the	3490
secretary's staff, whereupon the same proceedings shall be had as	3491
provided in Chapter 5122. of the Revised Code. The attorney	3492
general may represent the board in any proceeding commenced under	3493
this section.	3494
If a physician assistant is adjudged by a probate court to be	3495
mentally ill or mentally incompetent, the individual's certificate	3496
license shall be automatically suspended until the individual has	3497
filed with the board a certified copy of an adjudication by a	3498
probate court of being restored to competency or has submitted to	3499
the board proof, satisfactory to the board, of having been	3500
discharged as being restored to competency in the manner and form	3501
provided in section 5122.38 of the Revised Code. The judge of the	3502
court shall immediately notify the board of an adjudication of	3503
incompetence and note any suspension of a certificate license in	3504
the margin of the court's record of the certificate license.	3505
Sec. 4730.28. (A) An individual whose certificate license to	3506

practice as a physician assistant <u>issued under this chapter</u> has

been suspended or is in an inactive state for any cause for more

than two years may apply to the state medical board to have the

## certificate license restored. 3510 (B)(1) The board shall not restore a certificate license 3511 under this section unless the applicant complies with sections 3512 4776.01 to 4776.04 of the Revised Code. The board shall determine 3513 the applicant's present fitness to resume practice. The board 3514 shall consider the moral background and the activities of the 3515 applicant during the period of suspension or inactivity. 3516 (2) When restoring a certificate license, the board may 3517 impose terms and conditions, including the following: 3518 (a) Requiring the applicant to obtain additional training and 3519 pass an examination upon completion of the training; 3520 (b) Restricting or limiting the extent, scope, or type of 3521 practice as a physician assistant that the individual may resume. 3522 Sec. 4730.31. (A) As used in this section, "prosecutor" has 3523 the same meaning as in section 2935.01 of the Revised Code. 3524 (B) Whenever any person holding a valid certificate license 3525 to practice as a physician assistant issued pursuant to this 3526 chapter pleads guilty to, is subject to a judicial finding of 3527 guilt of, or is subject to a judicial finding of eligibility for 3528 intervention in lieu of conviction for a violation of Chapter 3529 2907., 2925., or 3719. of the Revised Code or of any substantively 3530 comparable ordinance of a municipal corporation in connection with 3531 practicing as a physician assistant, the prosecutor in the case 3532 shall, on forms prescribed and provided by the state medical 3533 board, promptly notify the board of the conviction. Within thirty 3534 days of receipt of such information, the board shall initiate 3535 action in accordance with Chapter 119. of the Revised Code to 3536 determine whether to suspend or revoke the certificate license 3537 under section 4730.25 of the Revised Code. 3538

(C) The prosecutor in any case against any person holding a

valid <del>certificate</del> <u>license</u> issued pursuant to this chapter shall,	3540
on forms prescribed and provided by the state medical board,	3541
notify the board of any of the following:	3542
(1) A plea of guilty to, a judicial finding of guilt of, or	3543
judicial finding of eligibility for intervention in lieu of	3544
conviction for a felony, or a case where the trial court issues an	3545
order of dismissal upon technical or procedural grounds of a	3546
felony charge;	3547
(2) A plea of guilty to, a judicial finding of guilt of, or	3548
judicial finding or eligibility for intervention in lieu of	3549
conviction for a misdemeanor committed in the course of practice,	3550
or a case where the trial court issues an order of dismissal upon	3551
technical or procedural grounds of a charge of a misdemeanor, if	3552
the alleged act was committed in the course of practice;	3553
(3) A plea of guilty to, a judicial finding of guilt of, or	3554
judicial finding of eligibility for intervention in lieu of	3555
conviction for a misdemeanor involving moral turpitude, or a case	3556
where the trial court issues an order of dismissal upon technical	3557
or procedural grounds of a charge of a misdemeanor involving moral	3558
turpitude.	3559
The report shall include the name and address of the	3560
certificate <u>license</u> holder, the nature of the offense for which	3561
the action was taken, and the certified court documents recording	3562
the action.	3563
Sec. 4730.32. (A) Within sixty days after the imposition of	3564
any formal disciplinary action taken by a health care facility	3565
against any individual holding a valid <del>certificate</del> <u>license</u> to	3566
practice as a physician assistant <u>issued under this chapter</u> , the	3567
chief administrator or executive officer of the facility shall	3568
report to the state medical board the name of the individual, the	3569
- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

action taken by the facility, and a summary of the underlying

facts leading to the action taken. Upon request, the board shall	3571
be provided certified copies of the patient records that were the	3572
basis for the facility's action. Prior to release to the board,	3573
the summary shall be approved by the peer review committee that	3574
reviewed the case or by the governing board of the facility.	3575

The filing of a report with the board or decision not to file 3576 a report, investigation by the board, or any disciplinary action 3577 taken by the board, does not preclude a health care facility from 3578 taking disciplinary action against a physician assistant. 3579

In the absence of fraud or bad faith, no individual or entity 3580 that provides patient records to the board shall be liable in 3581 damages to any person as a result of providing the records. 3582

(B) A physician assistant, professional association or 3583 society of physician assistants, physician, or professional 3584 association or society of physicians that believes a violation of 3585 any provision of this chapter, Chapter 4731. of the Revised Code, 3586 or rule of the board has occurred shall report to the board the 3587 information upon which the belief is based. This division does not 3588 require any treatment provider approved by the board under section 3589 4731.25 of the Revised Code or any employee, agent, or 3590 representative of such a provider to make reports with respect to 3591 a physician assistant participating in treatment or aftercare for 3592 substance abuse as long as the physician assistant maintains 3593 participation in accordance with the requirements of section 3594 4731.25 of the Revised Code and the treatment provider or 3595 employee, agent, or representative of the provider has no reason 3596 to believe that the physician assistant has violated any provision 3597 of this chapter or rule adopted under it, other than being 3598 impaired by alcohol, drugs, or other substances. This division 3599 does not require reporting by any member of an impaired 3600 practitioner committee established by a health care facility or by 3601 any representative or agent of a committee or program sponsored by 3602

3603
3604
3605
3606
3607
3608
3609
3610
3611
3612
3613
3614
3615

(C) Any professional association or society composed 3616 primarily of physician assistants that suspends or revokes an 3617 individual's membership for violations of professional ethics, or 3618 for reasons of professional incompetence or professional 3619 malpractice, within sixty days after a final decision, shall 3620 report to the board, on forms prescribed and provided by the 3621 board, the name of the individual, the action taken by the 3622 professional organization, and a summary of the underlying facts 3623 leading to the action taken. 3624

The filing or nonfiling of a report with the board, 3625 investigation by the board, or any disciplinary action taken by 3626 the board, shall not preclude a professional organization from 3627 taking disciplinary action against a physician assistant. 3628

(D) Any insurer providing professional liability insurance to 3629 any person holding a valid certificate license to practice as a 3630 physician assistant issued under this chapter or any other entity 3631 that seeks to indemnify the professional liability of a physician 3632 assistant shall notify the board within thirty days after the 3633 final disposition of any written claim for damages where such 3634

a board action or order.

3665

disposition results in a payment exceeding twenty-five thousand	3635
dollars. The notice shall contain the following information:	3636
(1) The name and address of the person submitting the	3637
notification;	3638
(2) The name and address of the insured who is the subject of	3639
the claim;	3640
(3) The name of the person filing the written claim;	3641
(3) The name of the person fifting the written traim,	3041
(4) The date of final disposition;	3642
(5) If applicable, the identity of the court in which the	3643
final disposition of the claim took place.	3644
(E) The board may investigate possible violations of this	3645
chapter or the rules adopted under it that are brought to its	3646
attention as a result of the reporting requirements of this	3647
section, except that the board shall conduct an investigation if a	3648
possible violation involves repeated malpractice. As used in this	3649
division, "repeated malpractice" means three or more claims for	3650
malpractice within the previous five-year period, each resulting	3651
in a judgment or settlement in excess of twenty-five thousand	3652
dollars in favor of the claimant, and each involving negligent	3653
conduct by the physician assistant.	3654
(F) All summaries, reports, and records received and	3655
maintained by the board pursuant to this section shall be held in	3656
confidence and shall not be subject to discovery or introduction	3657
in evidence in any federal or state civil action involving a	3658
physician assistant, supervising physician, or health care	3659
facility arising out of matters that are the subject of the	3660
reporting required by this section. The board may use the	3661
information obtained only as the basis for an investigation, as	3662
evidence in a disciplinary hearing against a physician assistant	3663
or supervising physician, or in any subsequent trial or appeal of	3664
	2665

The board may disclose the summaries and reports it receives 3666 under this section only to health care facility committees within 3667 or outside this state that are involved in credentialing or 3668 recredentialing a physician assistant or supervising physician or 3669 reviewing their privilege to practice within a particular 3670 facility. The board shall indicate whether or not the information 3671 has been verified. Information transmitted by the board shall be 3672 subject to the same confidentiality provisions as when maintained 3673 by the board. 3674

- (G) Except for reports filed by an individual pursuant to 3675 division (B) of this section, the board shall send a copy of any 3676 reports or summaries it receives pursuant to this section to the 3677 physician assistant. The physician assistant shall have the right 3678 to file a statement with the board concerning the correctness or 3679 relevance of the information. The statement shall at all times 3680 accompany that part of the record in contention.
- (H) An individual or entity that reports to the board or 3682 refers an impaired physician assistant to a treatment provider 3683 approved by the board under section 4731.25 of the Revised Code 3684 shall not be subject to suit for civil damages as a result of the report, referral, or provision of the information. 3686
- (I) In the absence of fraud or bad faith, a professional 3687 association or society of physician assistants that sponsors a 3688 committee or program to provide peer assistance to a physician 3689 assistant with substance abuse problems, a representative or agent 3690 of such a committee or program, and a member of the state medical 3691 board shall not be held liable in damages to any person by reason 3692 of actions taken to refer a physician assistant to a treatment 3693 provider approved under section 4731.25 of the Revised Code for 3694 examination or treatment. 3695

3727

## Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

enforce the laws relating to the practice of physician assistants.	3697
If the secretary has knowledge or notice of a violation of this	3698
chapter or the rules adopted under it, the secretary shall	3699
investigate the matter, and, upon probable cause appearing, file a	3700
complaint and prosecute the offender. When requested by the	3701
secretary, the prosecuting attorney of the proper county shall	3702
take charge of and conduct such prosecution.	3703
In the prosecution of any person for violation of division	3704
(A) of section 4730.02 of the Revised Code it shall not be	3705
necessary to allege or prove want of a valid <del>certificate</del> <u>license</u>	3706
to practice as a physician assistant, but such matters shall be a	3707
matter of defense to be established by the accused.	3708
Sec. 4730.38. (A) Except as provided in division (B) of this	3709
section, the physician assistant policy committee of the state	3710
medical board shall, at such times the committee determines to be	3711
necessary, submit to the board recommendations regarding	3712
physician-delegated prescriptive authority for physician	3713
assistants. The committee's recommendations shall address both of	3714
the following:	3715
(1) Policy and procedures regarding physician-delegated	3716
prescriptive authority, including the issuance of certificates to	3717
prescribe under this chapter;	3718
(2) Any issue the committee considers necessary to assist the	3719
board in fulfilling its duty to adopt rules governing	3720
physician-delegated prescriptive authority, including the issuance	3721
of certificates to prescribe.	3722
(B) Not less than every six months beginning on the first day	3723
of June following the effective date of this amendment March 22,	3724
2013, the committee shall review the physician assistant formulary	3725
the board adopts purguent to division $(N)(1)$ of section 4720 20 of	2726

the board adopts pursuant to division (A)(1) of section 4730.39 of

the Revised Code and, to the extent it determines to be necessary,

submit recommendations proposing changes to the formulary.	3728
(C) Recommendations submitted under this section are subject	3729
to the procedures and time frames specified in division (C) of	3730
section 4730.06 of the Revised Code.	3731
Sec. 4730.39. (A) The state medical board shall do $\frac{\text{both}}{\text{all}}$	3732
of the following:	3733
(1) Adopt a formulary listing the drugs and therapeutic	3734
devices by class and specific generic nomenclature that a	3735
physician may include in the physician-delegated prescriptive	3736
authority granted to a physician assistant who holds a <del>certificate</del>	3737
to prescribe under this chapter valid prescriber number issued by	3738
the state medical board;	3739
(2) Adopt rules governing physician-delegated prescriptive	3740
authority for physician assistants, including the issuance of	3741
certificates to prescribe under this chapter;	3742
(3) Establish standards and procedures for delegation under	3743
division (A) of section 4730.203 of the Revised Code of the	3744
authority to administer drugs.	3745
(B) The board's rules governing physician-delegated	3746
prescriptive authority adopted pursuant to division (A)(2) of this	3747
section shall be adopted in accordance with Chapter 119. of the	3748
Revised Code and shall establish all of the following:	3749
(1) Requirements regarding the pharmacology courses that a	3750
physician assistant is required to complete to receive a	3751
certificate to prescribe;	3752
(2) Standards and procedures for the issuance and renewal of	3753
certificates to prescribe to physician assistants;	3754
(3) Standards and procedures for the appropriate conduct of	3755
the provisional period that a physician assistant is required to	3756
complete pursuant to section 4730.45 of the Revised Code and for	3757

Page 124

Sub. H. B. No. 412

(1) The physician assistant shall exercise	3788
physician-delegated prescriptive authority only to the extent that	3789
the physician supervising the physician assistant has granted that	3790
authority.	3791
(2) The physician assistant shall comply with all conditions	3792
placed on the physician-delegated prescriptive authority, as	3793
specified by the supervising physician who is supervising the	3794
physician assistant in the exercise of physician-delegated	3795
prescriptive authority.	3796
(3) If the physician assistant possesses physician-delegated	3797
prescriptive authority for controlled substances, the physician	3798
assistant shall register with the federal drug enforcement	3799
administration.	3800
(4) If the physician assistant possesses physician-delegated	3801
prescriptive authority for schedule II controlled substances, the	3802
physician assistant shall comply with section 4730.411 of the	3803
Revised Code.	3804
(5) If the physician assistant possesses physician-delegated	3805
prescriptive authority to prescribe for a minor, as defined in	3806
section 3719.061 of the Revised Code, a compound that is a	3807
controlled substance containing an opioid, the physician assistant	3808
shall comply with section 3719.061 of the Revised Code.	3809
Sec. 4730.42. (A) In granting physician-delegated	3810
prescriptive authority to a particular physician assistant who	3811
holds a <del>certificate to prescribe</del> <u>valid prescriber number</u> issued	3812
under this chapter by the state medical board, the supervising	3813
physician is subject to all of the following:	3814
(1) The supervising physician shall not grant	3815
physician-delegated prescriptive authority for any drug or	3816
therapeutic device that is not listed on the physician assistant	3817

formulary adopted under section 4730.39 of the Revised Code as a	3818
drug or therapeutic device that may be included in the	3819
physician-delegated prescriptive authority granted to a physician	3820
assistant.	3821
(2) The supervising physician shall not grant	3822
physician-delegated prescriptive authority for any drug or device	3823
that may be used to perform or induce an abortion.	3824
(3) The supervising physician shall not grant	3825
physician-delegated prescriptive authority in a manner that	3826
exceeds the supervising physician's prescriptive authority,	3827
including the physician's authority to treat chronic pain with	3828
controlled substances and products containing tramadol as	3829
described in section 4731.052 of the Revised Code.	3830
(4) The supervising physician shall supervise the physician	3831
assistant in accordance with all both of the following:	3832
(a) The supervision requirements specified in section 4730.21	3833
of the Revised Code and, in the case of supervision provided	3834
during a provisional period of physician delegated prescriptive	3835
authority, the supervision requirements specified in section	3836
4730.45 of the Revised Code;	3837
(b) The physician supervisory plan approved for the	3838
supervising physician or supervision agreement entered into with	3839
the physician assistant under section 4730.19 of the Revised Code,	3840
including, if applicable, the policies of the health care facility	3841
in which the physician and physician assistant are practicing $\dot{ au}$	3842
(c) The supervision agreement approved under section 4730.19	3843
of the Revised Code that applies to the supervising physician and	3844
the physician assistant.	3845
(B)(1) The supervising physician of a physician assistant may	3846
place conditions on the physician-delegated prescriptive authority	3847

granted to the physician assistant. If conditions are placed on

that authority, the supervising physician shall maintain a written	3849
record of the conditions and make the record available to the	3850
state medical board on request.	3851
(2) The conditions that a supervising physician may place on	3852
the physician-delegated prescriptive authority granted to a	3853
physician assistant include the following:	3854
(a) Identification by class and specific generic nomenclature	3855
of drugs and therapeutic devices that the physician chooses not to	3856
permit the physician assistant to prescribe;	3857
(b) Limitations on the dosage units or refills that the	3858
physician assistant is authorized to prescribe;	3859
(c) Specification of circumstances under which the physician	3860
assistant is required to refer patients to the supervising	3861
physician or another physician when exercising physician-delegated	3862
prescriptive authority;	3863
(d) Responsibilities to be fulfilled by the physician in	3864
supervising the physician assistant that are not otherwise	3865
specified in the <del>physician supervisory plan</del> supervision agreement	3866
or otherwise required by this chapter.	3867
Sec. 4730.43. (A) A physician assistant who holds a	3868
<del>certificate to prescribe</del> valid prescriber number issued <del>under this</del>	3869
<del>chapter</del> by the state medical board and has been granted	3870
physician-delegated prescriptive authority <del>by a supervising</del>	3871
physician may personally furnish to a patient samples of drugs and	3872
therapeutic devices that are included in the physician assistant's	3873
physician-delegated prescriptive authority, subject to all of the	3874
following:	3875
(1) The amount of the sample furnished shall not exceed a	3876
seventy-two-hour supply, except when the minimum available	3877
quantity of the sample is packaged in an amount that is greater	3878

than a seventy-two-hour supply, in which case the physician	3879
assistant may furnish the sample in the package amount.	3880
(2) No charge may be imposed for the sample or for furnishing	3881
it.	3882
(3) Samples of controlled substances may not be personally	3883
furnished.	3884
(B) A physician assistant who holds a <del>certificate to</del>	3885
prescribe valid prescriber number issued under this chapter by the	3886
board and has been granted physician-delegated prescriptive	3887
authority <del>by a supervising physician</del> may personally furnish to a	3888
patient a complete or partial supply of the drugs and therapeutic	3889
devices that are included in the physician assistant's	3890
physician-delegated prescriptive authority, subject to all of the	3891
following:	3892
(1) The physician assistant shall personally furnish only	3893
antibiotics, antifungals, scabicides, contraceptives, prenatal	3894
vitamins, antihypertensives, drugs and devices used in the	
vicamins, and inspectensives, drugs and devices used in the	3895
treatment of diabetes, drugs and devices used in the treatment of	3895 3896
treatment of diabetes, drugs and devices used in the treatment of	3896
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.	3896 3897
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.  (2) The physician assistant shall not furnish the drugs and	3896 3897 3898
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.  (2) The physician assistant shall not furnish the drugs and devices in locations other than a health department operated by	3896 3897 3898 3899
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.  (2) The physician assistant shall not furnish the drugs and devices in locations other than a health department operated by the board of health of a city or general health district or the	3896 3897 3898 3899 3900
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.  (2) The physician assistant shall not furnish the drugs and devices in locations other than a health department operated by the board of health of a city or general health district or the authority having the duties of a board of health under section	3896 3897 3898 3899 3900 3901
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.  (2) The physician assistant shall not furnish the drugs and devices in locations other than a health department operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code, a federally funded comprehensive	3896 3897 3898 3899 3900 3901 3902
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.  (2) The physician assistant shall not furnish the drugs and devices in locations other than a health department operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code, a federally funded comprehensive primary care clinic, or a nonprofit health care clinic or program.	3896 3897 3898 3899 3900 3901 3902 3903
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.  (2) The physician assistant shall not furnish the drugs and devices in locations other than a health department operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code, a federally funded comprehensive primary care clinic, or a nonprofit health care clinic or program.  (3) The physician assistant shall comply with all standards	3896 3897 3898 3899 3900 3901 3902 3903
treatment of diabetes, drugs and devices used in the treatment of asthma, and drugs used in the treatment of dyslipidemia.  (2) The physician assistant shall not furnish the drugs and devices in locations other than a health department operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code, a federally funded comprehensive primary care clinic, or a nonprofit health care clinic or program.  (3) The physician assistant shall comply with all standards and procedures for personally furnishing supplies of drugs and	3896 3897 3898 3899 3900 3901 3902 3903 3904 3905

Sec. 4730.431. (A) Notwithstanding any provision of this

chapter or rule adopted by the state medical board, a physician	3909
assistant who holds a <del>certificate to prescribe</del> <u>valid prescriber</u>	3910
number issued under this chapter by the board may personally	3911
furnish a supply of naloxone, or issue a prescription for	3912
naloxone, without having examined the individual to whom it may be	3913
administered if all of the following conditions are met:	3914
(1) The naloxone supply is furnished to, or the prescription	3915
is issued to and in the name of, a family member, friend, or other	3916
individual in a position to assist an individual who there is	3917
reason to believe is at risk of experiencing an opioid-related	3918
overdose.	3919
(2) The physician assistant instructs the individual	3920
receiving the naloxone supply or prescription to summon emergency	3921
services either immediately before or immediately after	3922
administering naloxone to an individual apparently experiencing an	3923
opioid-related overdose.	3924
(3) The naloxone is personally furnished or prescribed in	3925
such a manner that it may be administered by only either of the	3926
following routes:	3927
(a) Using a device manufactured for the intranasal	3928
administration of liquid drugs;	3929
(b) Using an autoinjector in a manufactured dosage form.	3930
(B) A physician assistant who under division (A) of this	3931
section in good faith furnishes a supply of naloxone or issues a	3932
prescription for naloxone is not liable for or subject to any of	3933
the following for any action or omission of the individual to whom	3934
the naloxone is furnished or the prescription is issued: damages	3935
in any civil action, prosecution in any criminal proceeding, or	3936
professional disciplinary action.	3937

Sec. 4730.49. (A) To be eligible for renewal of a certificate

to prescribe license to practice as a physician assistant, an	3939
applicant who has been granted physician-delegated prescriptive	3940
authority is subject to both of the following:	3941
(1) The applicant shall complete every two years at least	3942
twelve hours of continuing education in pharmacology from an	3943
accredited institution recognized by the state medical board.	3944
Except as provided in division (B) of this section and in section	3945
5903.12 of the Revised Code, the continuing education shall be	3946
completed not later than the thirty-first day of January of each	3947
even-numbered year.	3948
(2)(a) Except as provided in division (A)(2)(b) of this	3949
section, in the case of an applicant who prescribes opioid	3950
analgesics or benzodiazepines, the applicant shall certify to the	3951
board whether the applicant has been granted access to the drug	3952
database established and maintained by the state board of pharmacy	3953
pursuant to section 4729.75 of the Revised Code.	3954
(b) The requirement in division (A)(2)(a) of this section	3955
does not apply if either of the following is the case:	3956
(i) The state board of pharmacy notifies the state medical	3957
board pursuant to section 4729.861 of the Revised Code that the	3958
applicant has been restricted from obtaining further information	3959
from the drug database.	3960
(ii) The state board of pharmacy no longer maintains the drug	3961
<u>database</u> .	3962
(c) If an applicant certifies to the state medical board that	3963
the applicant has been granted access to the drug database and the	3964
board finds through an audit or other means that the applicant has	3965
not been granted access, the board may take action under section	3966
4730.25 of the Revised Code.	3967
(B) The state medical board shall provide for pro rata	3968

## Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

reductions by month of the number of hours of continuing education	3969
in pharmacology that is required to be completed for physician	3970
assistants who are in their first <del>certification</del> <u>licensure</u> period	3971
after completing the provisional period of supervision required	3972
under section $4730.45$ $4730.12$ of the Revised Code, who have been	3973
disabled due to illness or accident, or who have been absent from	3974
the country. The board shall adopt rules, in accordance with	3975
Chapter 119. of the Revised Code, as necessary to implement this	3976
division.	3977
(C) The continuing education required by this section is in	3978
addition to the continuing education required under section	3979
4730.14 of the Revised Code.	3980
Sec. 4730.51. In the information the board maintains on the	3981
its internet web site, the state medical board shall include the	3982
following:	3983
(A) The name of each physician assistant who holds a	3984
certificate to prescribe license under this chapter;	3985
(B) For each physician assistant who holds a <del>certificate to</del>	3986
prescribe valid prescriber number issued by the state medical	3987
<u>board</u> , the name of each supervising physician who has authority to	3988
grant physician-delegated prescriptive authority to the physician	3989
assistant.	3990
Sec. 4730.53. (A) As used in this section, "drug database"	3991
means the database established and maintained by the state board	3992
of pharmacy pursuant to section 4729.75 of the Revised Code.	3993
(B) The <u>state</u> medical board shall adopt rules in accordance	3994
with Chapter 119. of the Revised Code that establish standards and	3995
procedures to be followed by a physician assistant who holds a	
	3996
certificate to prescribe issued licensed under this chapter who	3996 3997
certificate to prescribe issued <u>licensed</u> under this chapter <u>who</u> has been granted physician-delegated prescriptive authority	

regarding the review of patient information available through the	3999
drug database under division (A)(5) of section 4729.80 of the	4000
Revised Code.	4001
(C) This section and the rules adopted under it do not apply	4002
if the state board of pharmacy no longer maintains the drug	4003
database.	4004
Sec. 4731.07. (A) The state medical board shall keep a record	4005
of its proceedings. The minutes of a meeting of the board shall,	4006
on approval by the board, constitute an official record of its	4007
proceedings.	4008
(B) The board shall keep a register of applicants for	4009
certificates of registration and certificates to practice issued	4010
under this chapter and Chapters 4730., 4760., 4762., and 4774. of	4011
the Revised Code and licenses issued under Chapter Chapters 4730.	4012
and 4778. of the Revised Code. The register shall show the name of	4013
the applicant and whether the applicant was granted or refused a	4014
certificate or license. With respect to applicants to practice	4015
medicine and surgery or osteopathic medicine and surgery, the	4016
register shall show the name of the institution that granted the	4017
applicant the degree of doctor of medicine or osteopathic	4018
medicine. The books and records of the board shall be prima-facie	4019
evidence of matters therein contained.	4020
Sec. 4761.01. As used in this chapter:	4021
(A) "Respiratory care" means rendering or offering to render	4022
to individuals, groups, organizations, or the public any service	4023
involving the evaluation of cardiopulmonary function, the	4024
treatment of cardiopulmonary impairment, the assessment of	4025
treatment effectiveness, and the care of patients with	4026
deficiencies and abnormalities associated with the cardiopulmonary	4027
system. The practice of respiratory care includes:	4028

**Page 133** 

4058

standards of section 3727.02 of the Revised Code.

- (F) "Nursing facility" has the same meaning as in section5165.01 of the Revised Code.(G) "Certified hyperbaric technologist" means a person who
- administers hyperbaric oxygen therapy and is certified as a 4062 hyperbaric technologist by the national board of diving and 4063 hyperbaric medical technology or its successor organization. 4064
- (H) "Hyperbaric oxygen therapy" means the administration of 4065pure oxygen in a pressurized room or chamber, except that it does 4066not include ventilator management. 4067
- (I) "Advanced practice registered nurse" has the same meaning 4068 as in section 4723.01 of the Revised Code. 4069
- (J) "Physician assistant" means an individual who holds a 4070 valid <u>certificate license</u> to practice issued under Chapter 4730. 4071 of the Revised Code authorizing the individual to provide services 4072 as a physician assistant to patients under the supervision, 4073 control, and direction of one or more physicians. 4074
- Sec. 4761.17. All of the following apply to the practice of 4075 respiratory care by a person who holds a license or limited permit 4076 issued under this chapter: 4077
- (A) The person shall practice only pursuant to a prescription 4078 or other order for respiratory care issued by a any of the 4079 following:

## (1) A physician or by a;

- (2) A registered nurse who holds a certificate of authority 4082 issued under Chapter 4723. of the Revised Code to practice as a 4083 certified nurse practitioner or clinical nurse specialist and has 4084 entered into a standard care arrangement with a physician that 4085 allows the nurse to prescribe or order respiratory care services; 4086
- (3) A physician assistant who has been granted 4087

  physician-delegated prescriptive authority that allows the 4088

physician assistant to prescribe or order respiratory care	4089
services.	4090
(B) The person shall practice only under the supervision of $\frac{1}{4}$	4091
any of the following:	4092
<u> </u>	2022
(1) A physician <del>or under the supervision of a</del> ;	4093
(2) A certified nurse practitioner or clinical nurse	4094
specialist who is authorized to prescribe or order respiratory	4095
care services as provided in division (A) $(2)$ of this section:	4096
(3) A physician assistant who is authorized to prescribe or	4097
order respiratory care services as provided in division (A)(3) of	4098
this section.	4099
(C) When practicing under the prescription or order of a	4100
certified nurse practitioner or clinical nurse specialist or under	4101
the supervision of such a nurse, the person's administration of	4102
medication that requires a prescription is limited to the drugs	4103
that the nurse is authorized to prescribe pursuant to the nurse's	4104
certificate to prescribe issued under section 4723.48 of the	4105
Revised Code.	4106
(D) When practicing under the prescription or order of a	4107
physician assistant or under the supervision of a physician	4108
assistant, the person's administration of medication that requires	4109
a prescription is limited to the drugs that the physician	4110
assistant is authorized to prescribe pursuant to the physician	4111
assistant's physician-delegated prescriptive authority.	4112
Sec. 4765.01. As used in this chapter:	4113
(A) "First responder" means an individual who holds a	4114
current, valid certificate issued under section 4765.30 of the	4115
Revised Code to practice as a first responder.	4116
(B) "Emergency medical technician-basic" or "EMT-basic" means	4117
an individual who holds a current, valid certificate issued under	4118
all livery radge with though a carrette, varia contributed insuce and allight	1110

section 4765.30 of the Revised Code to practice as an emergency	4119
medical technician-basic.	4120
(C) "Emergency medical technician-intermediate" or "EMT-I"	4121
means an individual who holds a current, valid certificate issued	4122
under section 4765.30 of the Revised Code to practice as an	4123
emergency medical technician-intermediate.	4124
(D) "Emergency medical technician-paramedic" or "paramedic"	4125
means an individual who holds a current, valid certificate issued	4126
under section 4765.30 of the Revised Code to practice as an	4127
emergency medical technician-paramedic.	4128
(E) "Ambulance" means any motor vehicle that is used, or is	4129
intended to be used, for the purpose of responding to emergency	4130
medical situations, transporting emergency patients, and	4131
administering emergency medical service to patients before,	4132
during, or after transportation.	4133
(F) "Cardiac monitoring" means a procedure used for the	4134
purpose of observing and documenting the rate and rhythm of a	4135
patient's heart by attaching electrical leads from an	4136
electrocardiograph monitor to certain points on the patient's body	4137
surface.	4138
(G) "Emergency medical service" means any of the services	4139
described in sections 4765.35, 4765.37, 4765.38, and 4765.39 of	4140
the Revised Code that are performed by first responders, emergency	4141
medical technicians-basic, emergency medical	4142
technicians-intermediate, and paramedics. "Emergency medical	4143
service" includes such services performed before or during any	4144
transport of a patient, including transports between hospitals and	4145
transports to and from helicopters.	4146
(H) "Emergency medical service organization" means a public	4147
or private organization using first responders, EMTs-basic,	4148
EMTs-I, or paramedics, or a combination of first responders,	4149

(a) Blunt or penetrating injury;	4179
(b) Exposure to electromagnetic, chemical, or radioactive	4180
energy;	4181
(c) Drowning, suffocation, or strangulation;	4182
(d) A deficit or excess of heat.	4183
(0) "Trauma victim" or "trauma patient" means a person who	4184
has sustained a traumatic injury.	4185
(P) "Trauma care" means the assessment, diagnosis,	4186
transportation, treatment, or rehabilitation of a trauma victim by	4187
emergency medical service personnel or by a physician, nurse,	4188
physician assistant, respiratory therapist, physical therapist,	4189
chiropractor, occupational therapist, speech-language pathologist,	4190
audiologist, or psychologist licensed to practice as such in this	4191
state or another jurisdiction.	4192
(Q) "Trauma center" means all of the following:	4193
(1) Any hospital that is verified by the American college of	4194
surgeons as an adult or pediatric trauma center;	4195
(2) Any hospital that is operating as an adult or pediatric	4196
trauma center under provisional status pursuant to section	4197
3727.101 of the Revised Code;	4198
(3) Until December 31, 2004, any hospital in this state that	4199
is designated by the director of health as a level II pediatric	4200
trauma center under section 3727.081 of the Revised Code;	4201
(4) Any hospital in another state that is licensed or	4202
designated under the laws of that state as capable of providing	4203
specialized trauma care appropriate to the medical needs of the	4204
trauma patient.	4205
(R) "Pediatric" means involving a patient who is less than	4206
sixteen years of age	4207

(S) "Adult" means involving a patient who is not a pediatric	4208
patient.	4209
(T) "Geriatric" means involving a patient who is at least	4210
seventy years old or exhibits significant anatomical or	4211
physiological characteristics associated with advanced aging.	4212
(U) "Air medical organization" means an organization that	4213
provides emergency medical services, or transports emergency	4214
victims, by means of fixed or rotary wing aircraft.	4215
(V) "Emergency care" and "emergency facility" have the same	4216
meanings as in section 3727.01 of the Revised Code.	4217
(W) "Stabilize," except as it is used in division (B) of	4218
section 4765.35 of the Revised Code with respect to the manual	4219
stabilization of fractures, has the same meaning as in section	4220
1753.28 of the Revised Code.	4221
(X) "Transfer" has the same meaning as in section 1753.28 of	4222
the Revised Code.	4223
(Y) "Firefighter" means any member of a fire department as	4224
defined in section 742.01 of the Revised Code.	4225
(Z) "Volunteer firefighter" has the same meaning as in	4226
section 146.01 of the Revised Code.	4227
(AA) "Part-time paid firefighter" means a person who provides	4228
firefighting services on less than a full-time basis, is routinely	4229
scheduled to be present on site at a fire station or other	4230
designated location for purposes of responding to a fire or other	4231
emergency, and receives more than nominal compensation for the	4232
provision of firefighting services.	4233
(BB) "Physician assistant" means an individual who holds a	4234
current, valid certificate license to practice as a physician	4235
assistant issued under Chapter 4730. of the Revised Code.	4236

4256

4257

4258

Code.

Sec. 4765.51. Nothing in this chapter prevents or restricts	4237		
the practice, services, or activities of any registered nurse			
practicing within the scope of the registered nurse's practice.	4239		
Nothing in this chapter prevents or restricts the practice,	4240		
services, or activities of any physician assistant practicing in	4241		
accordance with a physician supervisory plan approved supervision	4242		
agreement entered into under section 4730.17 4730.19 of the	4243		
Revised Code or, including, if applicable, the policies of the	4244		
health care facility in which the physician assistant is	4245		
practicing.	4246		
Sec. 5122.11. Proceedings for a mentally ill person subject	4247		
Sec. 5122.11. Proceedings for a mentally ill person subject to court order pursuant to sections 5122.11 to 5122.15 of the	4247 4248		
to court order pursuant to sections 5122.11 to 5122.15 of the	4248		
to court order pursuant to sections 5122.11 to 5122.15 of the Revised Code shall be commenced by the filing of an affidavit in	4248 4249		
to court order pursuant to sections 5122.11 to 5122.15 of the Revised Code shall be commenced by the filing of an affidavit in the manner prescribed by the department of mental health and	4248 4249 4250		
to court order pursuant to sections 5122.11 to 5122.15 of the Revised Code shall be commenced by the filing of an affidavit in the manner prescribed by the department of mental health and addiction services and in a form prescribed in section 5122.111 of	4248 4249 4250 4251		

The affidavit shall contain an allegation setting forth the 4259 specific category or categories under division (B) of section 4260 5122.01 of the Revised Code upon which the jurisdiction of the 4261 court is based and a statement of alleged facts sufficient to 4262 indicate probable cause to believe that the person is a mentally 4263 ill person subject to court order. The affidavit may be 4264 accompanied, or the court may require that the affidavit be 4265 accompanied, by a certificate of a psychiatrist, or a certificate 4266 signed by a licensed clinical psychologist and a certificate 4267

whichever is determined to be proper by the court. This section

does not apply to the hospitalization of a person pursuant to

section 2945.39, 2945.40, 2945.401, or 2945.402 of the Revised

AFFIDAVIT OF MENTAL ILLNESS

4298

signed by a licensed physician stating that the person who issued	4268			
the certificate has examined the person and is of the opinion that	4269			
the person is a mentally ill person subject to court order, or	4270			
shall be accompanied by a written statement by the applicant,				
under oath, that the person has refused to submit to an				
examination by a psychiatrist, or by a licensed clinical				
psychologist and licensed physician.	4274			
Upon receipt of the affidavit, if a judge of the court or a	4275			
referee who is an attorney at law appointed by the court has	4276			
probable cause to believe that the person named in the affidavit	4277			
is a mentally ill person subject to court order, the judge or	4278			
referee may issue a temporary order of detention ordering any	4279			
health or police officer or sheriff to take into custody and	4280			
transport the person to a hospital or other place designated in	4281			
section 5122.17 of the Revised Code, or may set the matter for	4282			
further hearing. If a temporary order of detention is issued and	4283			
the person is transported to a hospital or other designated place,	4284			
the court that issued the order shall retain jurisdiction over the	4285			
case as it relates to the person's outpatient treatment,	4286			
notwithstanding that the hospital or other designated place to	4287			
which the person is transported is outside the territorial	4288			
jurisdiction of the court.	4289			
The person may be observed and treated until the hearing	4290			
provided for in section 5122.141 of the Revised Code. If no such	4291			
hearing is held, the person may be observed and treated until the	4292			
hearing provided for in section 5122.15 of the Revised Code.	4293			
Sec. 5122.111. To initiate proceedings for court-ordered	4294			
treatment of a person under section 5122.11 of the Revised Code, a	4295			
person or persons shall file an affidavit with the probate court	4296			
that is identical in form and content to the following:	4297			

(a) The person is unlikely to survive safely in the community	4329
without supervision, based on a clinical determination.	4330
(b) The person has a history of lack of compliance with treatment	4331
for mental illness and one of the following applies:	4332
(i) At least twice within the thirty-six months prior to the	4333
filing of an affidavit seeking court-ordered treatment of the	4334
person under section 5122.111 of the Revised Code, the lack of	4335
compliance has been a significant factor in necessitating	4336
hospitalization in a hospital or receipt of services in a forensic	4337
or other mental health unit of a correctional facility, provided	4338
that the thirty-six-month period shall be extended by the length	4339
of any hospitalization or incarceration of the person that	4340
occurred within the thirty-six-month period.	4341
(ii) Within the forty-eight months prior to the filing of an	4342
affidavit seeking court-ordered treatment of the person under	4343
section 5122.111 of the Revised Code, the lack of compliance	4344
resulted in one or more acts of serious violent behavior toward	4345
self or others or threats of, or attempts at, serious physical	4346
harm to self or others, provided that the forty-eight-month period	4347
shall be extended by the length of any hospitalization or	4348
incarceration of the person that occurred within the	4349
forty-eight-month period.	4350
(c) The person, as a result of mental illness, is unlikely to	4351
voluntarily participate in necessary treatment.	4352
(d) In view of the person's treatment history and current	4353
behavior, the person is in need of treatment in order to prevent a	4354
relapse or deterioration that would be likely to result in	4355
substantial risk of serious harm to the person or others.	4356
	4357
(Name of the party filing the affidavit) further says that the	4358
facts supporting this belief are as follows:	

Sub. H. B. No. 412 As Re-reported by the Se	enate Rules Committee		Page 144	
			4359	
These facts being sufficient to indicate probable cause that the				
above said person is a mentally ill person subject to			4366	
court order.			4367	
Name of Patient's	Last Physician or Licensed	Clinical Psychologist	4368	
Address of Patient Psychologist	's Last Physician or Licens	ed Clinical	4370	
			4371	
			4372	
The name and addre	ss of respondent's legal gu	ardian, spouse, and	4373	
adult next of kin	are:		4374	
Name	Kinship	Address	4375	
			4376	
	Legal Guardian	• • • • • • • • • • • • • • • • • • • •	. 4377	
		• • • • • • • • • • • • • • • • • • • •	. 4378	
			4379	
	Spouse		. 4380	
			. 4381	
			4382	
	Adult Next of Kin		. 4383	
			. 4384	

Adult Next of Kin 4386	Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee	ee	Page 145
The following constitutes additional information that may be necessary for the purpose of determining residence: 4389 4399 4399 4399 4399 4399 4399 4399			4385
The following constitutes additional information that may be necessary for the purpose of determining residence: 4389 4390 4391 4392 4393 4394 Dated this day of , 20 4395 Signature of the party filing the affidavit  Sworn to before me and signed in my presence on the day and year 4396 above dated. 4396 Signature of Probate Judge 4400	Adult Next	of Kin	. 4386
1886   1897   1898   1899			. 4387
	The following constitutes addition	onal information that may be	4388
	necessary for the purpose of dete	ermining residence:	4389
			4390
			4391
Dated this			4392
Dated this			4393
Signature of the party filing the affidavit  Sworn to before me and signed in my presence on the day and year 4398 above dated.  4400  Signature of Probate Judge 4400  Signature of, Deputy Clerk, or 4400			4394
Signature of the party filing the affidavit  Sworn to before me and signed in my presence on the day and year 4398 above dated.  4400  Signature of Probate Judge 4400  Signature of, Deputy Clerk, or 4403	Dated this day of	20	4395
affidavit  Sworn to before me and signed in my presence on the day and year 4398 above dated.  4399			. 4396
above dated. 4399			e 4397
Signature of Probate Judge 4401		my presence on the day and year	4398 4399
Signature of Deputy Clerk, or 4403		Signature of Probate Judge	. 4400
		Signature of Deputy Clerk or	<del>.</del> 4402
			1100

WAIVER 4404

daughter, grandparent, aunt, uncle, cousin, or guardian of the	4430
individual with mental retardation or a developmental disability	4431
if the individual with mental retardation or developmental	4432
disabilities lives with the person and is dependent on the person	4433
to the extent that, if the supports were withdrawn, another living	4434
arrangement would have to be found.	4435
(5) "Health care professional" means any of the following:	4436
(a) A dentist who holds a valid license issued under Chapter	4437
4715. of the Revised Code;	4438
(b) A registered or licensed practical nurse who holds a	4439
valid license issued under Chapter 4723. of the Revised Code;	4440
(c) An optometrist who holds a valid license issued under	4441
Chapter 4725. of the Revised Code;	4442
(d) A pharmacist who holds a valid license issued under	4443
Chapter 4729. of the Revised Code;	4444
(e) A person who holds a valid certificate issued under	4445
Chapter 4731. of the Revised Code to practice medicine and	4446
surgery, osteopathic medicine and surgery, podiatric medicine and	4447
surgery, or a limited brand of medicine;	4448
(f) A physician assistant who holds a valid certificate	4449
<u>license</u> issued under Chapter 4730. of the Revised Code;	4450
(g) An occupational therapist or occupational therapy	4451
assistant or a physical therapist or physical therapist assistant	4452
who holds a valid license issued under Chapter 4755. of the	4453
Revised Code;	4454
(h) A respiratory care professional who holds a valid license	4455
issued under Chapter 4761. of the Revised Code.	4456
(6) "Health care task" means a task that is prescribed,	4457
ordered, delegated, or otherwise directed by a health care	4458
professional acting within the scope of the professional's	4459

practice.	4460
(B) Except as provided in division (E) of this section, a	4461
family member of an individual with mental retardation or a	4462
developmental disability may authorize an unlicensed in-home care	4463
worker to administer oral and topical prescribed medications or	4464
perform other health care tasks as part of the in-home care the	4465
worker provides to the individual, if all of the following apply:	4466
(1) The family member is the primary supervisor of the care.	4467
(2) The unlicensed in-home care worker has been selected by	4468
the family member or the individual receiving care and is under	4469
the direct supervision of the family member.	4470
(3) The unlicensed in-home care worker is providing the care	4471
through an employment or other arrangement entered into directly	4472
with the family member and is not otherwise employed by or under	4473
contract with a person or government entity to provide services to	4474
individuals with mental retardation and developmental	4475
disabilities.	4476
(C) A family member shall obtain a prescription, if	4477
applicable, and written instructions from a health care	4478
professional for the care to be provided to the individual. The	4479
family member shall authorize the unlicensed in-home care worker	4480
to provide the care by preparing a written document granting the	4481
authority. The family member shall provide the unlicensed in-home	4482
care worker with appropriate training and written instructions in	4483
accordance with the instructions obtained from the health care	4484
professional.	4485
(D) A family member who authorizes an unlicensed in-home care	4486
worker to administer oral and topical prescribed medications or	4487
perform other health care tasks retains full responsibility for	4488
the health and safety of the individual receiving the care and for	4489

ensuring that the worker provides the care appropriately and

safely. No entity that funds or monitors the provision of in-home	4491
care may be held liable for the results of the care provided under	4492
this section by an unlicensed in-home care worker, including such	4493
entities as the county board of developmental disabilities and the	4494
department of developmental disabilities.	4495

An unlicensed in-home care worker who is authorized under
this section by a family member to provide care to an individual
4497
may not be held liable for any injury caused in providing the
care, unless the worker provides the care in a manner that is not
4499
in accordance with the training and instructions received or the
worker acts in a manner that constitutes wanton or reckless
4501
misconduct.

(E) A county board of developmental disabilities may evaluate 4503 the authority granted by a family member under this section to an 4504 unlicensed in-home care worker at any time it considers necessary 4505 and shall evaluate the authority on receipt of a complaint. If the 4506 board determines that a family member has acted in a manner that 4507 is inappropriate for the health and safety of the individual 4508 receiving the care, the authorization granted by the family member 4509 to an unlicensed in-home care worker is void, and the family 4510 member may not authorize other unlicensed in-home care workers to 4511 provide the care. In making such a determination, the board shall 4512 use appropriately licensed health care professionals and shall 4513 provide the family member an opportunity to file a complaint under 4514 section 5126.06 of the Revised Code. 4515

section 2. That existing sections 1.64, 2133.211, 2151.3515 4516
2305.113, 2925.61, 3701.92, 3727.06, 3729.05, 4123.01, 4123.026, 4517
4123.46, 4503.44, 4723.01, 4723.06, 4723.07, 4723.18, 4723.181, 4518
4723.48, 4723.482, 4723.50, 4729.01, 4730.01, 4730.02, 4730.03, 4519
4730.04, 4730.06, 4730.08, 4730.091, 4730.10, 4730.101, 4730.11, 4520
4730.12, 4730.13, 4730.14, 4730.19, 4730.21, 4730.22, 4730.25, 4521

4730.251, 4730.27, 4730.28, 4730.31, 4730.32, 4730.33, 4730.38,	4522
4730.39, 4730.41, 4730.42, 4730.43, 4730.431, 4730.49, 4730.51,	4523
4730.53, 4731.07, 4761.01, 4761.17, 4765.01, 4765.51, 5122.11,	4524
5122.111, and 5123.47 and sections 4730.081, 4730.09, 4730.15,	4525
4730.16, 4730.17, 4730.18, 4730.20, 4730.44, 4730.45, 4730.46,	4526
4730.47, 4730.48, 4730.50, and 4730.52 of the Revised Code are	4527
hereby repealed.	4528
Section 3. That the versions of sections 4730.25 and 4730.53	4529
of the Revised Code that are scheduled to take effect April 1,	4530
2015, be amended to read as follows:	4531
Sec. 4730.25. (A) The state medical board, by an affirmative	4532
vote of not fewer than six members, may revoke or may refuse to	4533
grant a <del>certificate</del> <u>license</u> to practice as a physician assistant	4534
or a certificate to prescribe to a person found by the board to	4535
have committed fraud, misrepresentation, or deception in applying	4536
for or securing the <del>certificate</del> <u>license</u> .	4537
(B) The board, by an affirmative vote of not fewer than six	4538
members, shall, to the extent permitted by law, limit, revoke, or	4539
suspend an individual's <del>certificate</del> <u>license</u> to practice as a	4540
physician assistant or <del>certificate to prescribe</del> <u>prescriber number</u> ,	4541
refuse to issue a <del>certificate</del> <u>license</u> to an applicant, refuse to	4542
reinstate a <del>certificate</del> <u>license</u> , or reprimand or place on	4543
probation the holder of a <del>certificate</del> <u>license</u> for any of the	4544
following reasons:	4545
(1) Failure to practice in accordance with the conditions	4546
under which the supervising physician's supervision agreement with	4547
the physician assistant was approved, including the requirement	4548
that when practicing under a particular supervising physician, the	4549
physician assistant must practice only according to the physician	4550

supervisory plan the board approved for that physician or,

<u>including</u> , <u>if applicable</u> , the policies of the health care facility	4552
in which the supervising physician and physician assistant are	4553
practicing;	4554
(2) Failure to comply with the requirements of this chapter,	4555
Chapter 4731. of the Revised Code, or any rules adopted by the	4556
board;	4557
(3) Violating or attempting to violate, directly or	4558
indirectly, or assisting in or abetting the violation of, or	4559
conspiring to violate, any provision of this chapter, Chapter	4560
4731. of the Revised Code, or the rules adopted by the board;	4561
(4) Inability to practice according to acceptable and	4562
prevailing standards of care by reason of mental illness or	4563
physical illness, including physical deterioration that adversely	4564
affects cognitive, motor, or perceptive skills;	4565
(5) Impairment of ability to practice according to acceptable	4566
and prevailing standards of care because of habitual or excessive	4567
use or abuse of drugs, alcohol, or other substances that impair	4568
ability to practice;	4569
(6) Administering drugs for purposes other than those	4570
authorized under this chapter;	4571
(7) Willfully betraying a professional confidence;	4572
(8) Making a false, fraudulent, deceptive, or misleading	4573
statement in soliciting or advertising for employment as a	4574
physician assistant; in connection with any solicitation or	4575
advertisement for patients; in relation to the practice of	4576
medicine as it pertains to physician assistants; or in securing or	4577
attempting to secure a <del>certificate</del> <u>license</u> to practice as a	4578
physician assistant, a certificate to prescribe, or approval of a	4579
supervision agreement.	4580
As used in this division "false fraudulent decentive or	4501

misleading statement" means a statement that includes a	4582
misrepresentation of fact, is likely to mislead or deceive because	4583
of a failure to disclose material facts, is intended or is likely	4584
to create false or unjustified expectations of favorable results,	4585
or includes representations or implications that in reasonable	4586
probability will cause an ordinarily prudent person to	4587
misunderstand or be deceived.	4588
(9) Representing, with the purpose of obtaining compensation	4589
or other advantage personally or for any other person, that an	4590
incurable disease or injury, or other incurable condition, can be	4591
permanently cured;	4592
(10) The obtaining of, or attempting to obtain, money or	4593
anything of value by fraudulent misrepresentations in the course	4594
of practice;	4595
(11) A plea of guilty to, a judicial finding of guilt of, or	4596
a judicial finding of eligibility for intervention in lieu of	4597
conviction for, a felony;	4598
(12) Commission of an act that constitutes a felony in this	4599
state, regardless of the jurisdiction in which the act was	4600
committed;	4601
(13) A plea of guilty to, a judicial finding of guilt of, or	4602
a judicial finding of eligibility for intervention in lieu of	4603
conviction for, a misdemeanor committed in the course of practice;	4604
(14) A plea of guilty to, a judicial finding of guilt of, or	4605
a judicial finding of eligibility for intervention in lieu of	4606
conviction for, a misdemeanor involving moral turpitude;	4607
(15) Commission of an act in the course of practice that	4608
constitutes a misdemeanor in this state, regardless of the	4609
jurisdiction in which the act was committed;	4610
(16) Commission of an act involving moral turpitude that	4611

constitutes a misdemeanor in this state, regardless of the	4612
jurisdiction in which the act was committed;	4613
(17) A plea of guilty to, a judicial finding of guilt of, or	4614
a judicial finding of eligibility for intervention in lieu of	4615
conviction for violating any state or federal law regulating the	4616
possession, distribution, or use of any drug, including	4617
trafficking in drugs;	4618
(18) Any of the following actions taken by the state agency	4619
responsible for regulating the practice of physician assistants in	4620
another state, for any reason other than the nonpayment of fees:	4621
the limitation, revocation, or suspension of an individual's	4622
license to practice; acceptance of an individual's license	4623
surrender; denial of a license; refusal to renew or reinstate a	4624
license; imposition of probation; or issuance of an order of	4625
censure or other reprimand;	4626
(19) A departure from, or failure to conform to, minimal	4627
standards of care of similar physician assistants under the same	4628
or similar circumstances, regardless of whether actual injury to a	4629
patient is established;	4630
(20) Violation of the conditions placed by the board on a	4631
<del>certificate</del> <u>license</u> to practice as a physician assistant <del>, a</del>	4632
certificate to prescribe, a physician supervisory plan, or	4633
<pre>supervision agreement;</pre>	4634
(21) Failure to use universal blood and body fluid	4635
precautions established by rules adopted under section 4731.051 of	4636
the Revised Code;	4637
(22) Failure to cooperate in an investigation conducted by	4638
the board under section 4730.26 of the Revised Code, including	4639
failure to comply with a subpoena or order issued by the board or	4640
failure to answer truthfully a question presented by the board at	4641
a deposition or in written interrogatories, except that failure to	4642

## Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

cooperate with an investigation shall not constitute grounds for	4643
discipline under this section if a court of competent jurisdiction	4644
has issued an order that either quashes a subpoena or permits the	4645
individual to withhold the testimony or evidence in issue;	4646
(23) Assisting suicide, as defined in section 3795.01 of the	4647
Revised Code;	4648
(24) Prescribing any drug or device to perform or induce an	4649
abortion, or otherwise performing or inducing an abortion;	4650
(25) Failure to comply with section 4730.53 of the Revised	4651
Code, unless the board no longer maintains a drug database	4652
pursuant to section 4729.75 of the Revised Code:	4653
$\frac{(25)(26)}{(26)}$ Failure to comply with the requirements in section	4654
3719.061 of the Revised Code before issuing $\frac{1}{100}$ to $\frac{1}{100}$ a minor a	4655
prescription for a controlled substance containing an opioid:	4656
(27) Having certification by the national commission on	4657
certification of physician assistants or a successor organization	4658
expire, lapse, or be suspended or revoked.	4659
(C) Disciplinary actions taken by the board under divisions	4660
(A) and (B) of this section shall be taken pursuant to an	4661
adjudication under Chapter 119. of the Revised Code, except that	4662
in lieu of an adjudication, the board may enter into a consent	4663
agreement with a physician assistant or applicant to resolve an	4664
allegation of a violation of this chapter or any rule adopted	4665
under it. A consent agreement, when ratified by an affirmative	4666
vote of not fewer than six members of the board, shall constitute	4667
the findings and order of the board with respect to the matter	4668
addressed in the agreement. If the board refuses to ratify a	4669
consent agreement, the admissions and findings contained in the	4670
consent agreement shall be of no force or effect.	4671
(D) For purposes of divisions (B)(12), (15), and (16) of this	4672

section, the commission of the act may be established by a finding

by the board, pursuant to an adjudication under Chapter 119. of 4674 the Revised Code, that the applicant or certificate license holder 4675 committed the act in question. The board shall have no 4676 jurisdiction under these divisions in cases where the trial court 4677 renders a final judgment in the certificate license holder's favor 4678 and that judgment is based upon an adjudication on the merits. The 4679 board shall have jurisdiction under these divisions in cases where 4680 the trial court issues an order of dismissal upon technical or 4681 procedural grounds. 4682

- (E) The sealing of conviction records by any court shall have 4683 no effect upon a prior board order entered under the provisions of 4684 this section or upon the board's jurisdiction to take action under 4685 the provisions of this section if, based upon a plea of guilty, a 4686 judicial finding of guilt, or a judicial finding of eligibility 4687 for intervention in lieu of conviction, the board issued a notice 4688 of opportunity for a hearing prior to the court's order to seal 4689 the records. The board shall not be required to seal, destroy, 4690 redact, or otherwise modify its records to reflect the court's 4691 sealing of conviction records. 4692
- (F) For purposes of this division, any individual who holds a 4693 certificate license issued under this chapter, or applies for a 4694 certificate license issued under this chapter, shall be deemed to 4695 have given consent to submit to a mental or physical examination 4696 when directed to do so in writing by the board and to have waived 4697 all objections to the admissibility of testimony or examination 4698 reports that constitute a privileged communication.
- (1) In enforcing division (B)(4) of this section, the board, 4700 upon a showing of a possible violation, may compel any individual 4701 who holds a <u>certificate license</u> issued under this chapter or who 4702 has applied for a <u>certificate license</u> pursuant to this chapter to 4703 submit to a mental examination, physical examination, including an 4704 HIV test, or both a mental and physical examination. The expense 4705

of the examination is the responsibility of the individual	4706
compelled to be examined. Failure to submit to a mental or	4707
physical examination or consent to an HIV test ordered by the	4708
board constitutes an admission of the allegations against the	4709
individual unless the failure is due to circumstances beyond the	4710
individual's control, and a default and final order may be entered	4711
without the taking of testimony or presentation of evidence. If	4712
the board finds a physician assistant unable to practice because	4713
of the reasons set forth in division $(B)(4)$ of this section, the	4714
board shall require the physician assistant to submit to care,	4715
counseling, or treatment by physicians approved or designated by	4716
the board, as a condition for an initial, continued, reinstated,	4717
or renewed <del>certificate</del> <u>license</u> . An individual affected under this	4718
division shall be afforded an opportunity to demonstrate to the	4719
board the ability to resume practicing in compliance with	4720
acceptable and prevailing standards of care.	4721

(2) For purposes of division (B)(5) of this section, if the 4722 board has reason to believe that any individual who holds a 4723 certificate license issued under this chapter or any applicant for 4724 a certificate license suffers such impairment, the board may 4725 compel the individual to submit to a mental or physical 4726 examination, or both. The expense of the examination is the 4727 responsibility of the individual compelled to be examined. Any 4728 mental or physical examination required under this division shall 4729 be undertaken by a treatment provider or physician qualified to 4730 conduct such examination and chosen by the board. 4731

Failure to submit to a mental or physical examination ordered

4732

by the board constitutes an admission of the allegations against

4733

the individual unless the failure is due to circumstances beyond

4734

the individual's control, and a default and final order may be

4735

entered without the taking of testimony or presentation of

4736

evidence. If the board determines that the individual's ability to

4737

## Sub. H. B. No. 412 As Re-reported by the Senate Rules Committee

practice is impaired, the board shall suspend the individual's	4738
certificate license or deny the individual's application and shall	4739
require the individual, as a condition for initial, continued,	4740
reinstated, or renewed <del>certification</del> <u>licensure</u> to practice or	4741
authority to prescribe, to submit to treatment.	4742
Before being eligible to apply for reinstatement of a	4743
certificate license suspended under this division, the physician	4744
assistant shall demonstrate to the board the ability to resume	4745
practice or prescribing in compliance with acceptable and	4746
prevailing standards of care. The demonstration shall include the	4747
following:	4748
(a) Certification from a treatment provider approved under	4749
section 4731.25 of the Revised Code that the individual has	4750
successfully completed any required inpatient treatment;	4751
(b) Evidence of continuing full compliance with an aftercare	4752
contract or consent agreement;	4753
(c) Two written reports indicating that the individual's	4754
ability to practice has been assessed and that the individual has	4755
been found capable of practicing according to acceptable and	4756
prevailing standards of care. The reports shall be made by	4757
individuals or providers approved by the board for making such	4758
assessments and shall describe the basis for their determination.	4759
The board may reinstate a certificate license suspended under	4760
this division after such demonstration and after the individual	4761
has entered into a written consent agreement.	4762
When the impaired physician assistant resumes practice or	4763
prescribing, the board shall require continued monitoring of the	4764
physician assistant. The monitoring shall include compliance with	4765
the written consent agreement entered into before reinstatement or	4766
with conditions imposed by board order after a hearing, and, upon	4767

termination of the consent agreement, submission to the board for

at least two years of annual written progress reports made under	4769
penalty of falsification stating whether the physician assistant	4770
has maintained sobriety.	4771

(G) If the secretary and supervising member determine that 4772 there is clear and convincing evidence that a physician assistant 4773 has violated division (B) of this section and that the 4774 individual's continued practice or prescribing presents a danger 4775 of immediate and serious harm to the public, they may recommend 4776 that the board suspend the individual's certificate license to 4777 practice or <u>authority to</u> prescribe without a prior hearing. 4778 Written allegations shall be prepared for consideration by the 4779 board. 4780

The board, upon review of those allegations and by an 4781 affirmative vote of not fewer than six of its members, excluding 4782 the secretary and supervising member, may suspend a certificate 4783 license without a prior hearing. A telephone conference call may 4784 be utilized for reviewing the allegations and taking the vote on 4785 the summary suspension.

The board shall issue a written order of suspension by 4787 certified mail or in person in accordance with section 119.07 of 4788 the Revised Code. The order shall not be subject to suspension by 4789 the court during pendency of any appeal filed under section 119.12 4790 of the Revised Code. If the physician assistant requests an 4791 adjudicatory hearing by the board, the date set for the hearing 4792 shall be within fifteen days, but not earlier than seven days, 4793 after the physician assistant requests the hearing, unless 4794 otherwise agreed to by both the board and the certificate license 4795 holder. 4796

A summary suspension imposed under this division shall remain 4797 in effect, unless reversed on appeal, until a final adjudicative 4798 order issued by the board pursuant to this section and Chapter 4799 119. of the Revised Code becomes effective. The board shall issue 4800

its final adjudicative order within sixty days after completion of 4801 its hearing. Failure to issue the order within sixty days shall 4802 result in dissolution of the summary suspension order, but shall 4803 not invalidate any subsequent, final adjudicative order. 4804

- (H) If the board takes action under division (B)(11), (13), 4805 or (14) of this section, and the judicial finding of guilt, guilty 4806 plea, or judicial finding of eligibility for intervention in lieu 4807 of conviction is overturned on appeal, upon exhaustion of the 4808 criminal appeal, a petition for reconsideration of the order may 4809 be filed with the board along with appropriate court documents. 4810 Upon receipt of a petition and supporting court documents, the 4811 board shall reinstate the certificate license to practice or 4812 prescribe. The board may then hold an adjudication under Chapter 4813 119. of the Revised Code to determine whether the individual 4814 committed the act in question. Notice of opportunity for hearing 4815 shall be given in accordance with Chapter 119. of the Revised 4816 Code. If the board finds, pursuant to an adjudication held under 4817 this division, that the individual committed the act, or if no 4818 hearing is requested, it may order any of the sanctions identified 4819 under division (B) of this section. 4820
- (I) The **certificate** <u>license</u> to practice issued to a physician 4821 assistant and the physician assistant's practice in this state are 4822 automatically suspended as of the date the physician assistant 4823 pleads guilty to, is found by a judge or jury to be guilty of, or 4824 is subject to a judicial finding of eligibility for intervention 4825 in lieu of conviction in this state or treatment or intervention 4826 in lieu of conviction in another state for any of the following 4827 criminal offenses in this state or a substantially equivalent 4828 criminal offense in another jurisdiction: aggravated murder, 4829 murder, voluntary manslaughter, felonious assault, kidnapping, 4830 rape, sexual battery, gross sexual imposition, aggravated arson, 4831 aggravated robbery, or aggravated burglary. Continued practice 4832

after the suspension shall be considered practicing without a	4833
certificate license.	4834
The board shall notify the individual subject to the	4835
suspension by certified mail or in person in accordance with	4836
section 119.07 of the Revised Code. If an individual whose	4837
certificate license is suspended under this division fails to make	4838
a timely request for an adjudication under Chapter 119. of the	4839
Revised Code, the board shall enter a final order permanently	4840
revoking the individual's <del>certificate</del> <u>license</u> to practice.	4841
(J) In any instance in which the board is required by Chapter	4842
119. of the Revised Code to give notice of opportunity for hearing	4843
and the individual subject to the notice does not timely request a	4844
hearing in accordance with section 119.07 of the Revised Code, the	4845
board is not required to hold a hearing, but may adopt, by an	4846
affirmative vote of not fewer than six of its members, a final	4847
order that contains the board's findings. In that final order, the	4848
board may order any of the sanctions identified under division (A)	4849
or (B) of this section.	4850
(K) Any action taken by the board under division (B) of this	4851
section resulting in a suspension shall be accompanied by a	4852
written statement of the conditions under which the physician	4853
assistant's <del>certificate</del> <u>license</u> may be reinstated. The board shall	4854
adopt rules in accordance with Chapter 119. of the Revised Code	4855
governing conditions to be imposed for reinstatement.	4856
Reinstatement of a <del>certificate</del> <u>license</u> suspended pursuant to	4857
division (B) of this section requires an affirmative vote of not	4858
fewer than six members of the board.	4859
(L) When the board refuses to grant to an applicant a	4860
<del>certificate</del> <u>license</u> to practice as a physician assistant <del>or a</del>	4861
certificate to prescribe, revokes an individual's certificate	4862
<u>license</u> , refuses to issue a <del>certificate</del> <u>license</u> , or refuses to	4863

reinstate an individual's certificate license, the board may

The tree reported by the contains realist committee	
specify that its action is permanent. An individual subject to a	4865
permanent action taken by the board is forever thereafter	4866
ineligible to hold the <del>certificate</del> <u>license</u> and the board shall not	4867
accept an application for reinstatement of the <b>certificate</b> <u>license</u>	4868
or for issuance of a new <del>certificate</del> <u>license</u> .	4869
(M) Notwithstanding any other provision of the Revised Code,	4870
all of the following apply:	4871
(1) The surrender of a <del>certificate</del> <u>license</u> issued under this	4872
chapter is not effective unless or until accepted by the board.	4873
Reinstatement of a <del>certificate</del> <u>license</u> surrendered to the board	4874
requires an affirmative vote of not fewer than six members of the	4875
board.	4876
(2) An application made under this chapter for a certificate,	4877
approval of a physician supervisory plan, or approval of a	4878
supervision agreement license may not be withdrawn without	4879
approval of the board.	4880
(3) Failure by an individual to renew a certificate license	4881
in accordance with section 4730.14 or section 4730.48 of the	4882
Revised Code shall not remove or limit the board's jurisdiction to	4883
take disciplinary action under this section against the	4884
individual.	4885
God 4720 F2 (7) ha wood in this goation udwardatabaseu	4886
Sec. 4730.53. (A) As used in this section, "drug database"	
means the database established and maintained by the state board of pharmacy pursuant to section 4729.75 of the Revised Code.	4887 4888
of pharmacy pursuant to section 4729.75 of the Revised Code.	4000
(B) Except as provided in divisions (C) and (E) of this	4889
section, a physician assistant <del>holding a certificate to prescribe</del>	4890
issued licensed under this chapter who has been granted	4891
physician-delegated prescriptive authority shall comply with all	4892
of the following as conditions of prescribing a drug that is	4893
either an opioid analgesic or a benzodiazepine as part of a	4894

patient's course of treatment for a particular condition: 4895 (1) Before initially prescribing the drug, the physician 4896 assistant or the physician assistant's delegate shall request from 4897 the drug database a report of information related to the patient 4898 that covers at least the twelve months immediately preceding the 4899 date of the request. If the physician assistant practices 4900 primarily in a county of this state that adjoins another state, 4901 the physician assistant or delegate also shall request a report of 4902 any information available in the drug database that pertains to 4903 prescriptions issued or drugs furnished to the patient in the 4904 state adjoining that county. 4905 (2) If the patient's course of treatment for the condition 4906 continues for more than ninety days after the initial report is 4907 requested, the physician assistant or delegate shall make periodic 4908 requests for reports of information from the drug database until 4909 the course of treatment has ended. The requests shall be made at 4910 intervals not exceeding ninety days, determined according to the 4911 date the initial request was made. The request shall be made in 4912 the same manner provided in division (B)(1) of this section for 4913 requesting the initial report of information from the drug 4914 database. 4915 (3) On receipt of a report under division (B)(1) or (2) of 4916 this section, the physician assistant shall assess the information 4917 in the report. The physician assistant shall document in the 4918 patient's record that the report was received and the information 4919 was assessed. 4920 (C) Division (B) of this section does not apply in any of the 4921 following circumstances: 4922 (1) A drug database report regarding the patient is not 4923 available, in which case the physician assistant shall document in 4924 the patient's record the reason that the report is not available. 4925

(2) The drug is prescribed in an amount indicated for a	4926
period not to exceed seven days.	4927
(3) The drug is prescribed for the treatment of cancer or	4928
another condition associated with cancer.	4929
(4) The drug is prescribed to a hospice patient in a hospice	4930
care program, as those terms are defined in section 3712.01 of the	4931
Revised Code, or any other patient diagnosed as terminally ill.	4932
(5) The drug is prescribed for administration in a hospital,	4933
nursing home, or residential care facility.	4934
(D) With respect to prescribing any drug that is not an	4935
opioid analgesic or a benzodiazepine but is included in the drug	4936
database pursuant to rules adopted under section 4729.84 of the	4937
Revised Code, the state medical board shall adopt rules that	4938
establish standards and procedures to be followed by a physician	4939
assistant who holds a certificate to prescribe issued licensed	4940
under this chapter who has been granted physician-delegated	4941
prescriptive authority regarding the review of patient information	4942
available through the drug database under division (A)(5) of	4943
section 4729.80 of the Revised Code. The rules shall be adopted in	4944
accordance with Chapter 119. of the Revised Code.	4945
(E) This section and the rules adopted under it do not apply	4946
if the state board of pharmacy no longer maintains the drug	4947
database.	4948
Section 4. That the existing versions of sections 4730.25 and	4949
4730.53 of the Revised Code that are scheduled to take effect	4950
April 1, 2015, are hereby repealed.	4951
TIPLIT I, 2010, GIC HOLODY TOPOGLOG.	<del>エ</del> ノリエ
Section 5. Sections 3 and 4 of this act shall take effect	4952
April 1, 2015.	4953
Section 6. (A) The State Medical Board may continue to issue	4954

the section as presented in this act.

4974

certificates to practice and certificates to prescribe pursuant to	4955
Chapter 4730. of the Revised Code for not longer than ninety days	4956
after the effective date of this act. Thereafter, the Board shall	4957
issue physician assistant licenses in compliance with this act.	4958
(B) Certificates to practice and certificates to prescribe	4959
issued pursuant to division (A) of this section or Chapter 4730.	4960
of the Revised Code, as it existed immediately prior to the	4961
effective date of this act, shall satisfy the requirements for	4962
physician assistant licenses, as created by this act, until the	4963
thirty-first day of January of the first even-numbered year	4964
following the effective date of this act.	4965
Section 7. Section 4730.25 of the Revised Code is presented	4966
in Section 4 of this act as a composite of the section as amended	4967
by Sub. H.B. 314, Am. Sub. H.B. 341, and Am. Sub. H.B. 483, all of	4968
the 130th General Assembly. The General Assembly, applying the	4969
principle stated in division (B) of section 1.52 of the Revised	4970
Code that amendments are to be harmonized if reasonably capable of	4971
simultaneous operation, finds that the composite is the resulting	4972
version of the section in effect prior to the effective date of	4973