

As Reported by the House Health and Aging Committee

130th General Assembly

Regular Session

2013-2014

Sub. H. B. No. 485

Representatives Smith, Johnson

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A BILL

To amend sections 355.01, 355.03, 355.04, 2151.011, 1
2151.421, 3712.04, 3712.99, 4715.14, 4715.30, 2
4715.302, 4723.28, 4723.481, 4723.486, 4723.487, 3
4725.092, 4725.16, 4725.19, 4729.12, 4729.75, 4
4729.80, 4729.86, 4730.25, 4730.41, 4730.48, 5
4730.53, 4731.055, 4731.22, 4731.281, and 5103.02; 6
to amend for the purpose of adopting a new section 7
number as indicated in parentheses, section 8
4729.87 (4729.91); and to enact new section 9
4729.87 and sections 121.25, 121.26, 121.27, 10
121.28, 3712.062, 3719.061, 4121.443, 4723.283, 11
4725.191, 4729.861, 4730.252, 4731.229, 5101.061, 12
5103.50, 5103.51, 5103.52, 5103.53, 5103.54, and 13
5103.55 of the Revised Code to require hospice 14
care programs to establish policies to prevent 15
diversion of controlled substances that contain 16
opioids; to require a prescriber to obtain written 17
informed consent from a minor's parent, guardian, 18
or other person responsible for the minor before 19
issuing a prescription for a controlled substance 20
that contains an opioid to the minor and to 21
establish sanctions for a prescriber's violation 22
of this requirement; to establish requirements to 23
be followed by prescribers in reviewing patient 24

information in the State Board of Pharmacy's Ohio 25
Automated Rx Reporting System; to license private, 26
nonprofit therapeutic wilderness camps; to 27
authorize the collection of additional health 28
information through OARRS; to establish the Office 29
of Human Services Innovation in the Department of 30
Job and Family Services; to establish the Ohio 31
Healthier Buckeye Council and the Ohio Healthier 32
Buckeye Grant Program; and to authorize the State 33
Medical Board to conduct a pilot program regarding 34
the use of teleconferencing at its committee 35
meetings. 36

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

Section 1. That sections 355.01, 355.03, 355.04, 2151.011, 37
2151.421, 3712.04, 3712.99, 4715.14, 4715.30, 4715.302, 4723.28, 38
4723.481, 4723.486, 4723.487, 4725.092, 4725.16, 4725.19, 4729.12, 39
4729.75, 4729.80, 4729.86, 4730.25, 4730.41, 4730.48, 4730.53, 40
4731.055, 4731.22, 4731.281, and 5103.02 be amended; section 41
4729.87 (4729.91) be amended for the purpose of adopting a new 42
section number as indicated in parentheses; and new section 43
4729.87 and sections 121.25, 121.26, 121.27, 121.28, 3712.062, 44
3719.061, 4121.443, 4723.283, 4725.191, 4729.861, 4730.252, 45
4731.229, 5101.061, 5103.50, 5103.51, 5103.52, 5103.53, 5103.54, 46
and 5103.55 of the Revised Code be enacted to read as follows: 47

Sec. 121.25. (A) As used in sections 121.25 to 121.28 of the 48
Revised Code: 49

(1) "Independent life plan coordination" means a plan that 50
will assist an individual to access available private or public 51
physical health, behavioral health, social, employment, education, 52
and housing services the individual needs. 53

(2) "Independent life plan coordinator" means a person who facilitates independent life plan coordination. 54
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(3) "Political subdivision" has the same meaning as in section 2744.01 of the Revised Code. 56
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(4) "Publicly funded assistance program" means any physical health, behavioral health, social, employment, education, housing, or similar program funded or provided by the state or a political subdivision of the state. 58
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(B) There is hereby created the Ohio healthier buckeye council. The council shall consist of the following members: 62
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(1) The auditor of state, or the auditor's designee; 64

(2) Three members representing administrative departments enumerated in section 121.02 of the Revised Code, appointed by the governor; 65
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(3) Five members representing affected local private and public entities or individuals, appointed by the governor; 68
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(4) Two members of the senate, one appointed by the president of the senate and the other appointed by the minority leader of the senate; 70
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(5) Two members of the house of representatives, one appointed by the speaker of the house of representatives and the other appointed by the minority leader of the house of representatives; 73
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(6) One member representing the judicial branch of government, appointed by the chief justice of the supreme court. 77
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(C) Initial appointments to the council shall be made not later than September 30, 2014. 79
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The members appointed under division (B)(3) of this section shall serve an initial term of one year. The member appointed under division (B)(6) of this section shall serve an initial term 81
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of three years. Thereafter, each member appointed under those 84
divisions shall serve a four-year term. Each member appointed 85
under division (B)(2) of this section shall serve a four-year 86
term. A member appointed under divisions (B)(4) and (5) of this 87
section shall serve a four-year term or during the member's tenure 88
in the general assembly, whichever period is shorter. 89

Members may be reappointed to the council. Vacancies on the 90
council shall be filled in the same manner as the original 91
appointments. 92

(D) At its first meeting, the council shall select a 93
chairperson from among its members. After the first meeting, the 94
council shall meet at the call of the chairperson or upon the 95
request of a majority of the council's members. A majority of the 96
council constitutes a quorum. 97

(E) Council members shall receive no compensation but shall 98
be reimbursed for actual and necessary expenses incurred in the 99
performance of council duties. 100

Sec. 121.26. The Ohio healthier buckeye council shall do all 101
of the following: 102

(A) Promote the establishment of county healthier buckeye 103
councils, as described in section 355.02 of the Revised Code, 104
throughout this state through whatever means the council considers 105
to be most efficient; 106

(B) Develop and promote means by which the county councils, 107
as provided in section 355.03 of the Revised Code, may reduce the 108
reliance of individuals on publicly funded assistance programs 109
with an emphasis on the following: 110

(1) Programs that have been demonstrated to be effective; 111

(2) Identification and elimination of eligibility 112
requirements for publicly funded assistance programs that are 113

barriers to achieving greater financial independence for 114
participants in those programs. 115

(C) Establish eligibility criteria, application processes, 116
and maximum grant amounts for the Ohio healthier buckeye grant 117
program established in section 121.27 of the Revised Code and 118
award grants under the program; 119

(D) Collect and analyze the information submitted under 120
section 121.27 of the Revised Code; 121

(E) Develop the best practices for the administration of 122
publicly funded assistance programs in the state, taking into 123
consideration any recommendations received from county healthier 124
buckeye councils under section 355.04 of the Revised Code; 125

(F) Issue the annual reports required by sections 121.26 and 126
121.28 of the Revised Code. 127

Sec. 121.27. (A) There is hereby created the Ohio healthier 128
buckeye grant program to be administered by the Ohio healthier 129
buckeye council. The program shall provide grants to county 130
healthier buckeye councils, as described in section 355.02 of the 131
Revised Code, for the following: 132

(1) To assist county councils with costs associated with 133
gathering information regarding enrollment in and outcomes related 134
to publicly funded assistance programs; 135

(2) To provide funding to county councils to enable 136
independent life plan coordinators to seek certification; 137

(3) To award grants to county councils for projects that 138
focus on the following: 139

(a) Developing, maintaining, and strengthening families; 140

(b) Improving self-sufficiency to increase levels of income; 141

(c) Using volunteer workers; 142

<u>(d) Using incentives to encourage designated behaviors;</u>	143
<u>(e) Using peer leaders and mentors.</u>	144
<u>(B) To be eligible for a grant, a county healthier buckeye</u>	145
<u>council must demonstrate an active partnership with most, if not</u>	146
<u>all, of the following public and private sector entities:</u>	147
<u>(1) Local health departments;</u>	148
<u>(2) County departments of job and family services;</u>	149
<u>(3) Medicaid managed care organizations;</u>	150
<u>(4) Primary and secondary schools;</u>	151
<u>(5) Vocational education programs;</u>	152
<u>(6) Chambers of commerce and other economic development</u>	153
<u>organizations;</u>	154
<u>(7) Employers;</u>	155
<u>(8) Nonprofit organizations serving low-income individuals;</u>	156
<u>(9) Hospitals and health systems;</u>	157
<u>(10) Community health centers;</u>	158
<u>(11) Free clinics;</u>	159
<u>(12) Community behavioral health boards and providers;</u>	160
<u>(13) Regional planning commissions;</u>	161
<u>(14) Local elected officials.</u>	162
<u>(C) Grants may be awarded on an individual county council</u>	163
<u>basis, multi-county council basis, or both. In awarding grants,</u>	164
<u>the Ohio healthier buckeye council shall give priority to county</u>	165
<u>councils with existing projects or initiatives that do the</u>	166
<u>following:</u>	167
<u>(1) Improve the health and well-being of low-income</u>	168
<u>individuals;</u>	169

<u>(2) Align and coordinate public and private resources to</u>	170
<u>assist low-income individuals in achieving self-sufficiency;</u>	171
<u>(3) Use local matching funds from private sector sources;</u>	172
<u>(4) Implement or adapt evidence-based practices;</u>	173
<u>(5) Use volunteers and peer supports;</u>	174
<u>(6) Were created as a result of local assessment and planning</u>	175
<u>processes;</u>	176
<u>(7) Demonstrate collaboration between entities that</u>	177
<u>participate in assessment and planning processes.</u>	178
<u>(D) The Ohio healthier buckeye council, in consultation with</u>	179
<u>county councils, shall adopt rules in accordance with Chapter 119.</u>	180
<u>of the Revised Code that do all of the following:</u>	181
<u>(1) Establish standards and procedures for reporting program</u>	182
<u>descriptions, costs, and participant numbers, including numbers of</u>	183
<u>participants who have successfully completed programs;</u>	184
<u>(2) Establish program process and outcome metrics;</u>	185
<u>(3) Establish standards and procedures for submitting annual</u>	186
<u>reports as required by this section.</u>	187
<u>(E) Each county council shall use the metrics established by</u>	188
<u>rule to track outcomes and to prepare and submit an annual report</u>	189
<u>to the Ohio healthier buckeye council, the governor, and, in</u>	190
<u>accordance with section 101.68 of Revised Code, the general</u>	191
<u>assembly.</u>	192
<u>(F) Not later than December 31, 2014, the council shall</u>	193
<u>establish all of the following:</u>	194
<u>(1) The application processes, eligibility criteria, and</u>	195
<u>grant amounts to be awarded under the program;</u>	196
<u>(2) The form and manner to be used by county councils when</u>	197
<u>submitting enrollment and outcome information to the council;</u>	198

(3) The certification programs that the council considers acceptable for independent life plan coordinators. 199
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Sec. 121.28. (A) Not later than April 30, 2016, and every year thereafter, the Ohio healthier buckeye council shall submit a report to the joint medicaid oversight committee established in section 103.41 of the Revised Code. A copy of the report shall be submitted electronically to each county healthier buckeye council. 201
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The report shall include the following: 206

(1) Enrollment and outcome information submitted by county healthier buckeye councils under sections 121.27 and 355.04 of the Revised Code, including comparisons with past information, if available; 207
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(2) Recommendations developed by the council regarding the best practices for the administration of publicly funded assistance programs. 211
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(B) The council shall collaborate with the committee on policy issues that pertain to physical and behavioral health. 214
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Sec. 355.01. As used in this chapter: "independent life plan" 216

~~"Care coordination" means assisting an individual to access available physical health, behavioral health, social, employment, education, and housing services the individual needs.~~ 217
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~~"Political subdivision" has the same meaning as in section 2744.01 of the Revised Code.~~ 220
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~~"Publicly and "publicly funded assistance programs program" include physical health, behavioral health, social, employment, education, and housing programs funded or provided by the state or a political subdivision of the state have the same meanings as in section 121.25 of the Revised Code.~~ 222
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Sec. 355.03. A county healthier buckeye council may do all of 227

the following:	228
(A) Promote means by which council members or the entities	229
the members represent may reduce the reliance of individuals and	230
families on publicly funded assistance programs using both of the	231
following:	232
(1) Programs that have been demonstrated to be effective and	233
have one or more of the following features:	234
(a) <u>Focus on developing, maintaining, and strengthening</u>	235
<u>families;</u>	236
(b) Low costs;	237
(b) (c) Use volunteer workers;	238
(e) (d) Use incentives to encourage designated behaviors;	239
(d) (e) Are led <u>and mentored</u> by peers.	240
(2) Practices that identify and seek to eliminate barriers to	241
achieving greater financial independence for individuals and	242
families who receive services from or participate in programs	243
operated by council members or the entities the members represent.	244
(B) Promote care <u>independent life plan</u> coordination among	245
physical health, behavioral health, social, employment, education,	246
and housing service providers within the county;	247
(C) Collect and analyze data regarding individuals or	248
families who receive services from or participate in programs	249
operated by council members or the entities the members represent.	250
Sec. 355.04. A county healthier buckeye council may report	251
the following information to the joint medicaid oversight	252
committee created in section 103.41 of the Revised Code <u>and the</u>	253
<u>Ohio healthier buckeye council created in section 121.25 of the</u>	254
<u>Revised Code:</u>	255

(A) Notification that the county council has been established	256
and information regarding the council's activities;	257
(B) Information regarding enrollment or outcome data	258
collected under division (C) of section 355.03 of the Revised	259
Code;	260
(C) Recommendations regarding the best practices for the	261
administration and delivery of publicly funded assistance programs	262
or other services or programs provided by council members or the	263
entities the members represent;	264
(D) Recommendations regarding the best practices in care	265
<u>independent life plan</u> coordination.	266
Sec. 2151.011. (A) As used in the Revised Code:	267
(1) "Juvenile court" means whichever of the following is	268
applicable that has jurisdiction under this chapter and Chapter	269
2152. of the Revised Code:	270
(a) The division of the court of common pleas specified in	271
section 2101.022 or 2301.03 of the Revised Code as having	272
jurisdiction under this chapter and Chapter 2152. of the Revised	273
Code or as being the juvenile division or the juvenile division	274
combined with one or more other divisions;	275
(b) The juvenile court of Cuyahoga county or Hamilton county	276
that is separately and independently created by section 2151.08 or	277
Chapter 2153. of the Revised Code and that has jurisdiction under	278
this chapter and Chapter 2152. of the Revised Code;	279
(c) If division (A)(1)(a) or (b) of this section does not	280
apply, the probate division of the court of common pleas.	281
(2) "Juvenile judge" means a judge of a court having	282
jurisdiction under this chapter.	283
(3) "Private child placing agency" means any association, as	284

defined in section 5103.02 of the Revised Code, that is certified 285
under section 5103.03 of the Revised Code to accept temporary, 286
permanent, or legal custody of children and place the children for 287
either foster care or adoption. 288

(4) "Private noncustodial agency" means any person, 289
organization, association, or society certified by the department 290
of job and family services that does not accept temporary or 291
permanent legal custody of children, that is privately operated in 292
this state, and that does one or more of the following: 293

(a) Receives and cares for children for two or more 294
consecutive weeks; 295

(b) Participates in the placement of children in certified 296
foster homes; 297

(c) Provides adoption services in conjunction with a public 298
children services agency or private child placing agency. 299

(B) As used in this chapter: 300

(1) "Adequate parental care" means the provision by a child's 301
parent or parents, guardian, or custodian of adequate food, 302
clothing, and shelter to ensure the child's health and physical 303
safety and the provision by a child's parent or parents of 304
specialized services warranted by the child's physical or mental 305
needs. 306

(2) "Adult" means an individual who is eighteen years of age 307
or older. 308

(3) "Agreement for temporary custody" means a voluntary 309
agreement authorized by section 5103.15 of the Revised Code that 310
transfers the temporary custody of a child to a public children 311
services agency or a private child placing agency. 312

(4) "Alternative response" means the public children services 313
agency's response to a report of child abuse or neglect that 314

engages the family in a comprehensive evaluation of child safety, 315
risk of subsequent harm, and family strengths and needs and that 316
does not include a determination as to whether child abuse or 317
neglect occurred. 318

(5) "Certified foster home" means a foster home, as defined 319
in section 5103.02 of the Revised Code, certified under section 320
5103.03 of the Revised Code. 321

(6) "Child" means a person who is under eighteen years of 322
age, except that the juvenile court has jurisdiction over any 323
person who is adjudicated an unruly child prior to attaining 324
eighteen years of age until the person attains twenty-one years of 325
age, and, for purposes of that jurisdiction related to that 326
adjudication, a person who is so adjudicated an unruly child shall 327
be deemed a "child" until the person attains twenty-one years of 328
age. 329

(7) "Child day camp," "child care," "child day-care center," 330
"part-time child day-care center," "type A family day-care home," 331
"licensed type B family day-care home," "type B family day-care 332
home," "administrator of a child day-care center," "administrator 333
of a type A family day-care home," and "in-home aide" have the 334
same meanings as in section 5104.01 of the Revised Code. 335

(8) "Child care provider" means an individual who is a 336
child-care staff member or administrator of a child day-care 337
center, a type A family day-care home, or a type B family day-care 338
home, or an in-home aide or an individual who is licensed, is 339
regulated, is approved, operates under the direction of, or 340
otherwise is certified by the department of job and family 341
services, department of developmental disabilities, or the early 342
childhood programs of the department of education. 343

(9) "Chronic truant" has the same meaning as in section 344
2152.02 of the Revised Code. 345

(10) "Commit" means to vest custody as ordered by the court.	346
(11) "Counseling" includes both of the following:	347
(a) General counseling services performed by a public children services agency or shelter for victims of domestic violence to assist a child, a child's parents, and a child's siblings in alleviating identified problems that may cause or have caused the child to be an abused, neglected, or dependent child.	348 349 350 351 352
(b) Psychiatric or psychological therapeutic counseling services provided to correct or alleviate any mental or emotional illness or disorder and performed by a licensed psychiatrist, licensed psychologist, or a person licensed under Chapter 4757. of the Revised Code to engage in social work or professional counseling.	353 354 355 356 357 358
(12) "Custodian" means a person who has legal custody of a child or a public children services agency or private child placing agency that has permanent, temporary, or legal custody of a child.	359 360 361 362
(13) "Delinquent child" has the same meaning as in section 2152.02 of the Revised Code.	363 364
(14) "Detention" means the temporary care of children pending court adjudication or disposition, or execution of a court order, in a public or private facility designed to physically restrict the movement and activities of children.	365 366 367 368
(15) "Developmental disability" has the same meaning as in section 5123.01 of the Revised Code.	369 370
(16) "Differential response approach" means an approach that a public children services agency may use to respond to accepted reports of child abuse or neglect with either an alternative response or a traditional response.	371 372 373 374
(17) "Foster caregiver" has the same meaning as in section	375

5103.02 of the Revised Code. 376

(18) "Guardian" means a person, association, or corporation 377
that is granted authority by a probate court pursuant to Chapter 378
2111. of the Revised Code to exercise parental rights over a child 379
to the extent provided in the court's order and subject to the 380
residual parental rights of the child's parents. 381

(19) "Habitual truant" means any child of compulsory school 382
age who is absent without legitimate excuse for absence from the 383
public school the child is supposed to attend for five or more 384
consecutive school days, seven or more school days in one school 385
month, or twelve or more school days in a school year. 386

(20) "Juvenile traffic offender" has the same meaning as in 387
section 2152.02 of the Revised Code. 388

(21) "Legal custody" means a legal status that vests in the 389
custodian the right to have physical care and control of the child 390
and to determine where and with whom the child shall live, and the 391
right and duty to protect, train, and discipline the child and to 392
provide the child with food, shelter, education, and medical care, 393
all subject to any residual parental rights, privileges, and 394
responsibilities. An individual granted legal custody shall 395
exercise the rights and responsibilities personally unless 396
otherwise authorized by any section of the Revised Code or by the 397
court. 398

(22) A "legitimate excuse for absence from the public school 399
the child is supposed to attend" includes, but is not limited to, 400
any of the following: 401

(a) The fact that the child in question has enrolled in and 402
is attending another public or nonpublic school in this or another 403
state; 404

(b) The fact that the child in question is excused from 405
attendance at school for any of the reasons specified in section 406

3321.04 of the Revised Code;	407
(c) The fact that the child in question has received an age	408
and schooling certificate in accordance with section 3331.01 of	409
the Revised Code.	410
(23) "Mental illness" and "mentally ill person subject to	411
hospitalization by court order" have the same meanings as in	412
section 5122.01 of the Revised Code.	413
(24) "Mental injury" means any behavioral, cognitive,	414
emotional, or mental disorder in a child caused by an act or	415
omission that is described in section 2919.22 of the Revised Code	416
and is committed by the parent or other person responsible for the	417
child's care.	418
(25) "Mentally retarded person" has the same meaning as in	419
section 5123.01 of the Revised Code.	420
(26) "Nonsecure care, supervision, or training" means care,	421
supervision, or training of a child in a facility that does not	422
confine or prevent movement of the child within the facility or	423
from the facility.	424
(27) "Of compulsory school age" has the same meaning as in	425
section 3321.01 of the Revised Code.	426
(28) "Organization" means any institution, public,	427
semipublic, or private, and any private association, society, or	428
agency located or operating in the state, incorporated or	429
unincorporated, having among its functions the furnishing of	430
protective services or care for children, or the placement of	431
children in certified foster homes or elsewhere.	432
(29) "Out-of-home care" means detention facilities, shelter	433
facilities, certified children's crisis care facilities, certified	434
foster homes, placement in a prospective adoptive home prior to	435
the issuance of a final decree of adoption, organizations,	436

certified organizations, child day-care centers, type A family 437
day-care homes, type B family day-care homes, child care provided 438
by in-home aides, group home providers, group homes, institutions, 439
state institutions, residential facilities, residential care 440
facilities, residential camps, day camps, private, nonprofit 441
therapeutic wilderness camps, public schools, chartered nonpublic 442
schools, educational service centers, hospitals, and medical 443
clinics that are responsible for the care, physical custody, or 444
control of children. 445

(30) "Out-of-home care child abuse" means any of the 446
following when committed by a person responsible for the care of a 447
child in out-of-home care: 448

(a) Engaging in sexual activity with a child in the person's 449
care; 450

(b) Denial to a child, as a means of punishment, of proper or 451
necessary subsistence, education, medical care, or other care 452
necessary for a child's health; 453

(c) Use of restraint procedures on a child that cause injury 454
or pain; 455

(d) Administration of prescription drugs or psychotropic 456
medication to the child without the written approval and ongoing 457
supervision of a licensed physician; 458

(e) Commission of any act, other than by accidental means, 459
that results in any injury to or death of the child in out-of-home 460
care or commission of any act by accidental means that results in 461
an injury to or death of a child in out-of-home care and that is 462
at variance with the history given of the injury or death. 463

(31) "Out-of-home care child neglect" means any of the 464
following when committed by a person responsible for the care of a 465
child in out-of-home care: 466

(a) Failure to provide reasonable supervision according to the standards of care appropriate to the age, mental and physical condition, or other special needs of the child;	467 468 469
(b) Failure to provide reasonable supervision according to the standards of care appropriate to the age, mental and physical condition, or other special needs of the child, that results in sexual or physical abuse of the child by any person;	470 471 472 473
(c) Failure to develop a process for all of the following:	474
(i) Administration of prescription drugs or psychotropic drugs for the child;	475 476
(ii) Assuring that the instructions of the licensed physician who prescribed a drug for the child are followed;	477 478
(iii) Reporting to the licensed physician who prescribed the drug all unfavorable or dangerous side effects from the use of the drug.	479 480 481
(d) Failure to provide proper or necessary subsistence, education, medical care, or other individualized care necessary for the health or well-being of the child;	482 483 484
(e) Confinement of the child to a locked room without monitoring by staff;	485 486
(f) Failure to provide ongoing security for all prescription and nonprescription medication;	487 488
(g) Isolation of a child for a period of time when there is substantial risk that the isolation, if continued, will impair or retard the mental health or physical well-being of the child.	489 490 491
(32) "Permanent custody" means a legal status that vests in a public children services agency or a private child placing agency, all parental rights, duties, and obligations, including the right to consent to adoption, and divests the natural parents or adoptive parents of all parental rights, privileges, and	492 493 494 495 496

obligations, including all residual rights and obligations. 497

(33) "Permanent surrender" means the act of the parents or, 498
if a child has only one parent, of the parent of a child, by a 499
voluntary agreement authorized by section 5103.15 of the Revised 500
Code, to transfer the permanent custody of the child to a public 501
children services agency or a private child placing agency. 502

(34) "Person" means an individual, association, corporation, 503
or partnership and the state or any of its political subdivisions, 504
departments, or agencies. 505

(35) "Person responsible for a child's care in out-of-home 506
care" means any of the following: 507

(a) Any foster caregiver, in-home aide, or provider; 508

(b) Any administrator, employee, or agent of any of the 509
following: a public or private detention facility; shelter 510
facility; certified children's crisis care facility; organization; 511
certified organization; child day-care center; type A family 512
day-care home; licensed type B family day-care home; group home; 513
institution; state institution; residential facility; residential 514
care facility; residential camp; day camp; school district; 515
community school; chartered nonpublic school; educational service 516
center; hospital; or medical clinic; 517

(c) Any person who supervises or coaches children as part of 518
an extracurricular activity sponsored by a school district, public 519
school, or chartered nonpublic school; 520

(d) Any other person who performs a similar function with 521
respect to, or has a similar relationship to, children. 522

(36) "Physically impaired" means having one or more of the 523
following conditions that substantially limit one or more of an 524
individual's major life activities, including self-care, receptive 525
and expressive language, learning, mobility, and self-direction: 526

(a) A substantial impairment of vision, speech, or hearing;	527
(b) A congenital orthopedic impairment;	528
(c) An orthopedic impairment caused by disease, rheumatic fever or any other similar chronic or acute health problem, or amputation or another similar cause.	529 530 531
(37) "Placement for adoption" means the arrangement by a public children services agency or a private child placing agency with a person for the care and adoption by that person of a child of whom the agency has permanent custody.	532 533 534 535
(38) "Placement in foster care" means the arrangement by a public children services agency or a private child placing agency for the out-of-home care of a child of whom the agency has temporary custody or permanent custody.	536 537 538 539
(39) "Planned permanent living arrangement" means an order of a juvenile court pursuant to which both of the following apply:	540 541
(a) The court gives legal custody of a child to a public children services agency or a private child placing agency without the termination of parental rights.	542 543 544
(b) The order permits the agency to make an appropriate placement of the child and to enter into a written agreement with a foster care provider or with another person or agency with whom the child is placed.	545 546 547 548
(40) "Practice of social work" and "practice of professional counseling" have the same meanings as in section 4757.01 of the Revised Code.	549 550 551
(41) <u>"Private, nonprofit therapeutic wilderness camp" has the same meaning as in section 5103.02 of the Revised Code.</u>	552 553
(42) "Sanction, service, or condition" means a sanction, service, or condition created by court order following an adjudication that a child is an unruly child that is described in	554 555 556

division (A)(4) of section 2152.19 of the Revised Code. 557

~~(42)~~(43) "Protective supervision" means an order of 558
disposition pursuant to which the court permits an abused, 559
neglected, dependent, or unruly child to remain in the custody of 560
the child's parents, guardian, or custodian and stay in the 561
child's home, subject to any conditions and limitations upon the 562
child, the child's parents, guardian, or custodian, or any other 563
person that the court prescribes, including supervision as 564
directed by the court for the protection of the child. 565

~~(43)~~(44) "Psychiatrist" has the same meaning as in section 566
5122.01 of the Revised Code. 567

~~(44)~~(45) "Psychologist" has the same meaning as in section 568
4732.01 of the Revised Code. 569

~~(45)~~(46) "Residential camp" means a program in which the 570
care, physical custody, or control of children is accepted 571
overnight for recreational or recreational and educational 572
purposes. 573

~~(46)~~(47) "Residential care facility" means an institution, 574
residence, or facility that is licensed by the department of 575
mental health and addiction services under section 5119.34 of the 576
Revised Code and that provides care for a child. 577

~~(47)~~(48) "Residential facility" means a home or facility that 578
is licensed by the department of developmental disabilities under 579
section 5123.19 of the Revised Code and in which a child with a 580
developmental disability resides. 581

~~(48)~~(49) "Residual parental rights, privileges, and 582
responsibilities" means those rights, privileges, and 583
responsibilities remaining with the natural parent after the 584
transfer of legal custody of the child, including, but not 585
necessarily limited to, the privilege of reasonable visitation, 586
consent to adoption, the privilege to determine the child's 587

religious affiliation, and the responsibility for support. 588

~~(49)~~(50) "School day" means the school day established by the 589
board of education of the applicable school district pursuant to 590
section 3313.481 of the Revised Code. 591

~~(50)~~(51) "School year" has the same meaning as in section 592
3313.62 of the Revised Code. 593

~~(51)~~(52) "Secure correctional facility" means a facility 594
under the direction of the department of youth services that is 595
designed to physically restrict the movement and activities of 596
children and used for the placement of children after adjudication 597
and disposition. 598

~~(52)~~(53) "Sexual activity" has the same meaning as in section 599
2907.01 of the Revised Code. 600

~~(53)~~(54) "Shelter" means the temporary care of children in 601
physically unrestricted facilities pending court adjudication or 602
disposition. 603

~~(54)~~(55) "Shelter for victims of domestic violence" has the 604
same meaning as in section 3113.33 of the Revised Code. 605

~~(55)~~(56) "Temporary custody" means legal custody of a child 606
who is removed from the child's home, which custody may be 607
terminated at any time at the discretion of the court or, if the 608
legal custody is granted in an agreement for temporary custody, by 609
the person who executed the agreement. 610

~~(56)~~(57) "Traditional response" means a public children 611
services agency's response to a report of child abuse or neglect 612
that encourages engagement of the family in a comprehensive 613
evaluation of the child's current and future safety needs and a 614
fact-finding process to determine whether child abuse or neglect 615
occurred and the circumstances surrounding the alleged harm or 616
risk of harm. 617

(C) For the purposes of this chapter, a child shall be 618
presumed abandoned when the parents of the child have failed to 619
visit or maintain contact with the child for more than ninety 620
days, regardless of whether the parents resume contact with the 621
child after that period of ninety days. 622

Sec. 2151.421. (A)(1)(a) No person described in division 623
(A)(1)(b) of this section who is acting in an official or 624
professional capacity and knows, or has reasonable cause to 625
suspect based on facts that would cause a reasonable person in a 626
similar position to suspect, that a child under eighteen years of 627
age or a mentally retarded, developmentally disabled, or 628
physically impaired child under twenty-one years of age has 629
suffered or faces a threat of suffering any physical or mental 630
wound, injury, disability, or condition of a nature that 631
reasonably indicates abuse or neglect of the child shall fail to 632
immediately report that knowledge or reasonable cause to suspect 633
to the entity or persons specified in this division. Except as 634
provided in section 5120.173 of the Revised Code, the person 635
making the report shall make it to the public children services 636
agency or a municipal or county peace officer in the county in 637
which the child resides or in which the abuse or neglect is 638
occurring or has occurred. In the circumstances described in 639
section 5120.173 of the Revised Code, the person making the report 640
shall make it to the entity specified in that section. 641

(b) Division (A)(1)(a) of this section applies to any person 642
who is an attorney; physician, including a hospital intern or 643
resident; dentist; podiatrist; practitioner of a limited branch of 644
medicine as specified in section 4731.15 of the Revised Code; 645
registered nurse; licensed practical nurse; visiting nurse; other 646
health care professional; licensed psychologist; licensed school 647
psychologist; independent marriage and family therapist or 648
marriage and family therapist; speech pathologist or audiologist; 649

coroner; administrator or employee of a child day-care center; 650
administrator or employee of a residential camp ~~or~~, child day 651
camp, or private, nonprofit therapeutic wilderness camp; 652
administrator or employee of a certified child care agency or 653
other public or private children services agency; school teacher; 654
school employee; school authority; person engaged in social work 655
or the practice of professional counseling; agent of a county 656
humane society; person, other than a cleric, rendering spiritual 657
treatment through prayer in accordance with the tenets of a 658
well-recognized religion; employee of a county department of job 659
and family services who is a professional and who works with 660
children and families; superintendent, board member, or employee 661
of a county board of developmental disabilities; investigative 662
agent contracted with by a county board of developmental 663
disabilities; employee of the department of developmental 664
disabilities; employee of a facility or home that provides respite 665
care in accordance with section 5123.171 of the Revised Code; 666
employee of a home health agency; employee of an entity that 667
provides homemaker services; a person performing the duties of an 668
assessor pursuant to Chapter 3107. or 5103. of the Revised Code; 669
or third party employed by a public children services agency to 670
assist in providing child or family related services. 671

(2) Except as provided in division (A)(3) of this section, an 672
attorney or a physician is not required to make a report pursuant 673
to division (A)(1) of this section concerning any communication 674
the attorney or physician receives from a client or patient in an 675
attorney-client or physician-patient relationship, if, in 676
accordance with division (A) or (B) of section 2317.02 of the 677
Revised Code, the attorney or physician could not testify with 678
respect to that communication in a civil or criminal proceeding. 679

(3) The client or patient in an attorney-client or 680
physician-patient relationship described in division (A)(2) of 681

this section is deemed to have waived any testimonial privilege 682
under division (A) or (B) of section 2317.02 of the Revised Code 683
with respect to any communication the attorney or physician 684
receives from the client or patient in that attorney-client or 685
physician-patient relationship, and the attorney or physician 686
shall make a report pursuant to division (A)(1) of this section 687
with respect to that communication, if all of the following apply: 688

(a) The client or patient, at the time of the communication, 689
is either a child under eighteen years of age or a mentally 690
retarded, developmentally disabled, or physically impaired person 691
under twenty-one years of age. 692

(b) The attorney or physician knows, or has reasonable cause 693
to suspect based on facts that would cause a reasonable person in 694
similar position to suspect, as a result of the communication or 695
any observations made during that communication, that the client 696
or patient has suffered or faces a threat of suffering any 697
physical or mental wound, injury, disability, or condition of a 698
nature that reasonably indicates abuse or neglect of the client or 699
patient. 700

(c) The abuse or neglect does not arise out of the client's 701
or patient's attempt to have an abortion without the notification 702
of her parents, guardian, or custodian in accordance with section 703
2151.85 of the Revised Code. 704

(4)(a) No cleric and no person, other than a volunteer, 705
designated by any church, religious society, or faith acting as a 706
leader, official, or delegate on behalf of the church, religious 707
society, or faith who is acting in an official or professional 708
capacity, who knows, or has reasonable cause to believe based on 709
facts that would cause a reasonable person in a similar position 710
to believe, that a child under eighteen years of age or a mentally 711
retarded, developmentally disabled, or physically impaired child 712
under twenty-one years of age has suffered or faces a threat of 713

suffering any physical or mental wound, injury, disability, or 714
condition of a nature that reasonably indicates abuse or neglect 715
of the child, and who knows, or has reasonable cause to believe 716
based on facts that would cause a reasonable person in a similar 717
position to believe, that another cleric or another person, other 718
than a volunteer, designated by a church, religious society, or 719
faith acting as a leader, official, or delegate on behalf of the 720
church, religious society, or faith caused, or poses the threat of 721
causing, the wound, injury, disability, or condition that 722
reasonably indicates abuse or neglect shall fail to immediately 723
report that knowledge or reasonable cause to believe to the entity 724
or persons specified in this division. Except as provided in 725
section 5120.173 of the Revised Code, the person making the report 726
shall make it to the public children services agency or a 727
municipal or county peace officer in the county in which the child 728
resides or in which the abuse or neglect is occurring or has 729
occurred. In the circumstances described in section 5120.173 of 730
the Revised Code, the person making the report shall make it to 731
the entity specified in that section. 732

(b) Except as provided in division (A)(4)(c) of this section, 733
a cleric is not required to make a report pursuant to division 734
(A)(4)(a) of this section concerning any communication the cleric 735
receives from a penitent in a cleric-penitent relationship, if, in 736
accordance with division (C) of section 2317.02 of the Revised 737
Code, the cleric could not testify with respect to that 738
communication in a civil or criminal proceeding. 739

(c) The penitent in a cleric-penitent relationship described 740
in division (A)(4)(b) of this section is deemed to have waived any 741
testimonial privilege under division (C) of section 2317.02 of the 742
Revised Code with respect to any communication the cleric receives 743
from the penitent in that cleric-penitent relationship, and the 744
cleric shall make a report pursuant to division (A)(4)(a) of this 745

section with respect to that communication, if all of the 746
following apply: 747

(i) The penitent, at the time of the communication, is either 748
a child under eighteen years of age or a mentally retarded, 749
developmentally disabled, or physically impaired person under 750
twenty-one years of age. 751

(ii) The cleric knows, or has reasonable cause to believe 752
based on facts that would cause a reasonable person in a similar 753
position to believe, as a result of the communication or any 754
observations made during that communication, the penitent has 755
suffered or faces a threat of suffering any physical or mental 756
wound, injury, disability, or condition of a nature that 757
reasonably indicates abuse or neglect of the penitent. 758

(iii) The abuse or neglect does not arise out of the 759
penitent's attempt to have an abortion performed upon a child 760
under eighteen years of age or upon a mentally retarded, 761
developmentally disabled, or physically impaired person under 762
twenty-one years of age without the notification of her parents, 763
guardian, or custodian in accordance with section 2151.85 of the 764
Revised Code. 765

(d) Divisions (A)(4)(a) and (c) of this section do not apply 766
in a cleric-penitent relationship when the disclosure of any 767
communication the cleric receives from the penitent is in 768
violation of the sacred trust. 769

(e) As used in divisions (A)(1) and (4) of this section, 770
"cleric" and "sacred trust" have the same meanings as in section 771
2317.02 of the Revised Code. 772

(B) Anyone who knows, or has reasonable cause to suspect 773
based on facts that would cause a reasonable person in similar 774
circumstances to suspect, that a child under eighteen years of age 775
or a mentally retarded, developmentally disabled, or physically 776

impaired person under twenty-one years of age has suffered or 777
faces a threat of suffering any physical or mental wound, injury, 778
disability, or other condition of a nature that reasonably 779
indicates abuse or neglect of the child may report or cause 780
reports to be made of that knowledge or reasonable cause to 781
suspect to the entity or persons specified in this division. 782
Except as provided in section 5120.173 of the Revised Code, a 783
person making a report or causing a report to be made under this 784
division shall make it or cause it to be made to the public 785
children services agency or to a municipal or county peace 786
officer. In the circumstances described in section 5120.173 of the 787
Revised Code, a person making a report or causing a report to be 788
made under this division shall make it or cause it to be made to 789
the entity specified in that section. 790

(C) Any report made pursuant to division (A) or (B) of this 791
section shall be made forthwith either by telephone or in person 792
and shall be followed by a written report, if requested by the 793
receiving agency or officer. The written report shall contain: 794

(1) The names and addresses of the child and the child's 795
parents or the person or persons having custody of the child, if 796
known; 797

(2) The child's age and the nature and extent of the child's 798
injuries, abuse, or neglect that is known or reasonably suspected 799
or believed, as applicable, to have occurred or of the threat of 800
injury, abuse, or neglect that is known or reasonably suspected or 801
believed, as applicable, to exist, including any evidence of 802
previous injuries, abuse, or neglect; 803

(3) Any other information that might be helpful in 804
establishing the cause of the injury, abuse, or neglect that is 805
known or reasonably suspected or believed, as applicable, to have 806
occurred or of the threat of injury, abuse, or neglect that is 807
known or reasonably suspected or believed, as applicable, to 808

exist. 809

Any person, who is required by division (A) of this section 810
to report child abuse or child neglect that is known or reasonably 811
suspected or believed to have occurred, may take or cause to be 812
taken color photographs of areas of trauma visible on a child and, 813
if medically indicated, cause to be performed radiological 814
examinations of the child. 815

(D) As used in this division, "children's advocacy center" 816
and "sexual abuse of a child" have the same meanings as in section 817
2151.425 of the Revised Code. 818

(1) When a municipal or county peace officer receives a 819
report concerning the possible abuse or neglect of a child or the 820
possible threat of abuse or neglect of a child, upon receipt of 821
the report, the municipal or county peace officer who receives the 822
report shall refer the report to the appropriate public children 823
services agency. 824

(2) When a public children services agency receives a report 825
pursuant to this division or division (A) or (B) of this section, 826
upon receipt of the report, the public children services agency 827
shall do both of the following: 828

(a) Comply with section 2151.422 of the Revised Code; 829

(b) If the county served by the agency is also served by a 830
children's advocacy center and the report alleges sexual abuse of 831
a child or another type of abuse of a child that is specified in 832
the memorandum of understanding that creates the center as being 833
within the center's jurisdiction, comply regarding the report with 834
the protocol and procedures for referrals and investigations, with 835
the coordinating activities, and with the authority or 836
responsibility for performing or providing functions, activities, 837
and services stipulated in the interagency agreement entered into 838
under section 2151.428 of the Revised Code relative to that 839

center. 840

(E) No township, municipal, or county peace officer shall 841
remove a child about whom a report is made pursuant to this 842
section from the child's parents, stepparents, or guardian or any 843
other persons having custody of the child without consultation 844
with the public children services agency, unless, in the judgment 845
of the officer, and, if the report was made by physician, the 846
physician, immediate removal is considered essential to protect 847
the child from further abuse or neglect. The agency that must be 848
consulted shall be the agency conducting the investigation of the 849
report as determined pursuant to section 2151.422 of the Revised 850
Code. 851

(F)(1) Except as provided in section 2151.422 of the Revised 852
Code or in an interagency agreement entered into under section 853
2151.428 of the Revised Code that applies to the particular 854
report, the public children services agency shall investigate, 855
within twenty-four hours, each report of child abuse or child 856
neglect that is known or reasonably suspected or believed to have 857
occurred and of a threat of child abuse or child neglect that is 858
known or reasonably suspected or believed to exist that is 859
referred to it under this section to determine the circumstances 860
surrounding the injuries, abuse, or neglect or the threat of 861
injury, abuse, or neglect, the cause of the injuries, abuse, 862
neglect, or threat, and the person or persons responsible. The 863
investigation shall be made in cooperation with the law 864
enforcement agency and in accordance with the memorandum of 865
understanding prepared under division (J) of this section. A 866
representative of the public children services agency shall, at 867
the time of initial contact with the person subject to the 868
investigation, inform the person of the specific complaints or 869
allegations made against the person. The information shall be 870
given in a manner that is consistent with division (H)(1) of this 871

section and protects the rights of the person making the report 872
under this section. 873

A failure to make the investigation in accordance with the 874
memorandum is not grounds for, and shall not result in, the 875
dismissal of any charges or complaint arising from the report or 876
the suppression of any evidence obtained as a result of the report 877
and does not give, and shall not be construed as giving, any 878
rights or any grounds for appeal or post-conviction relief to any 879
person. The public children services agency shall report each case 880
to the uniform statewide automated child welfare information 881
system that the department of job and family services shall 882
maintain in accordance with section 5101.13 of the Revised Code. 883
The public children services agency shall submit a report of its 884
investigation, in writing, to the law enforcement agency. 885

(2) The public children services agency shall make any 886
recommendations to the county prosecuting attorney or city 887
director of law that it considers necessary to protect any 888
children that are brought to its attention. 889

(G)(1)(a) Except as provided in division (H)(3) of this 890
section, anyone or any hospital, institution, school, health 891
department, or agency participating in the making of reports under 892
division (A) of this section, anyone or any hospital, institution, 893
school, health department, or agency participating in good faith 894
in the making of reports under division (B) of this section, and 895
anyone participating in good faith in a judicial proceeding 896
resulting from the reports, shall be immune from any civil or 897
criminal liability for injury, death, or loss to person or 898
property that otherwise might be incurred or imposed as a result 899
of the making of the reports or the participation in the judicial 900
proceeding. 901

(b) Notwithstanding section 4731.22 of the Revised Code, the 902
physician-patient privilege shall not be a ground for excluding 903

evidence regarding a child's injuries, abuse, or neglect, or the 904
cause of the injuries, abuse, or neglect in any judicial 905
proceeding resulting from a report submitted pursuant to this 906
section. 907

(2) In any civil or criminal action or proceeding in which it 908
is alleged and proved that participation in the making of a report 909
under this section was not in good faith or participation in a 910
judicial proceeding resulting from a report made under this 911
section was not in good faith, the court shall award the 912
prevailing party reasonable attorney's fees and costs and, if a 913
civil action or proceeding is voluntarily dismissed, may award 914
reasonable attorney's fees and costs to the party against whom the 915
civil action or proceeding is brought. 916

(H)(1) Except as provided in divisions (H)(4) and (N) of this 917
section, a report made under this section is confidential. The 918
information provided in a report made pursuant to this section and 919
the name of the person who made the report shall not be released 920
for use, and shall not be used, as evidence in any civil action or 921
proceeding brought against the person who made the report. Nothing 922
in this division shall preclude the use of reports of other 923
incidents of known or suspected abuse or neglect in a civil action 924
or proceeding brought pursuant to division (M) of this section 925
against a person who is alleged to have violated division (A)(1) 926
of this section, provided that any information in a report that 927
would identify the child who is the subject of the report or the 928
maker of the report, if the maker of the report is not the 929
defendant or an agent or employee of the defendant, has been 930
redacted. In a criminal proceeding, the report is admissible in 931
evidence in accordance with the Rules of Evidence and is subject 932
to discovery in accordance with the Rules of Criminal Procedure. 933

(2) No person shall permit or encourage the unauthorized 934
dissemination of the contents of any report made under this 935

section. 936

(3) A person who knowingly makes or causes another person to 937
make a false report under division (B) of this section that 938
alleges that any person has committed an act or omission that 939
resulted in a child being an abused child or a neglected child is 940
guilty of a violation of section 2921.14 of the Revised Code. 941

(4) If a report is made pursuant to division (A) or (B) of 942
this section and the child who is the subject of the report dies 943
for any reason at any time after the report is made, but before 944
the child attains eighteen years of age, the public children 945
services agency or municipal or county peace officer to which the 946
report was made or referred, on the request of the child fatality 947
review board, shall submit a summary sheet of information 948
providing a summary of the report to the review board of the 949
county in which the deceased child resided at the time of death. 950
On the request of the review board, the agency or peace officer 951
may, at its discretion, make the report available to the review 952
board. If the county served by the public children services agency 953
is also served by a children's advocacy center and the report of 954
alleged sexual abuse of a child or another type of abuse of a 955
child is specified in the memorandum of understanding that creates 956
the center as being within the center's jurisdiction, the agency 957
or center shall perform the duties and functions specified in this 958
division in accordance with the interagency agreement entered into 959
under section 2151.428 of the Revised Code relative to that 960
advocacy center. 961

(5) A public children services agency shall advise a person 962
alleged to have inflicted abuse or neglect on a child who is the 963
subject of a report made pursuant to this section, including a 964
report alleging sexual abuse of a child or another type of abuse 965
of a child referred to a children's advocacy center pursuant to an 966
interagency agreement entered into under section 2151.428 of the 967

Revised Code, in writing of the disposition of the investigation. 968
The agency shall not provide to the person any information that 969
identifies the person who made the report, statements of 970
witnesses, or police or other investigative reports. 971

(I) Any report that is required by this section, other than a 972
report that is made to the state highway patrol as described in 973
section 5120.173 of the Revised Code, shall result in protective 974
services and emergency supportive services being made available by 975
the public children services agency on behalf of the children 976
about whom the report is made, in an effort to prevent further 977
neglect or abuse, to enhance their welfare, and, whenever 978
possible, to preserve the family unit intact. The agency required 979
to provide the services shall be the agency conducting the 980
investigation of the report pursuant to section 2151.422 of the 981
Revised Code. 982

(J)(1) Each public children services agency shall prepare a 983
memorandum of understanding that is signed by all of the 984
following: 985

(a) If there is only one juvenile judge in the county, the 986
juvenile judge of the county or the juvenile judge's 987
representative; 988

(b) If there is more than one juvenile judge in the county, a 989
juvenile judge or the juvenile judges' representative selected by 990
the juvenile judges or, if they are unable to do so for any 991
reason, the juvenile judge who is senior in point of service or 992
the senior juvenile judge's representative; 993

(c) The county peace officer; 994

(d) All chief municipal peace officers within the county; 995

(e) Other law enforcement officers handling child abuse and 996
neglect cases in the county; 997

(f) The prosecuting attorney of the county;	998
(g) If the public children services agency is not the county department of job and family services, the county department of job and family services;	999 1000 1001
(h) The county humane society;	1002
(i) If the public children services agency participated in the execution of a memorandum of understanding under section 2151.426 of the Revised Code establishing a children's advocacy center, each participating member of the children's advocacy center established by the memorandum.	1003 1004 1005 1006 1007
(2) A memorandum of understanding shall set forth the normal operating procedure to be employed by all concerned officials in the execution of their respective responsibilities under this section and division (C) of section 2919.21, division (B)(1) of section 2919.22, division (B) of section 2919.23, and section 2919.24 of the Revised Code and shall have as two of its primary goals the elimination of all unnecessary interviews of children who are the subject of reports made pursuant to division (A) or (B) of this section and, when feasible, providing for only one interview of a child who is the subject of any report made pursuant to division (A) or (B) of this section. A failure to follow the procedure set forth in the memorandum by the concerned officials is not grounds for, and shall not result in, the dismissal of any charges or complaint arising from any reported case of abuse or neglect or the suppression of any evidence obtained as a result of any reported child abuse or child neglect and does not give, and shall not be construed as giving, any rights or any grounds for appeal or post-conviction relief to any person.	1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026
(3) A memorandum of understanding shall include all of the following:	1027 1028

(a) The roles and responsibilities for handling emergency and nonemergency cases of abuse and neglect;

(b) Standards and procedures to be used in handling and coordinating investigations of reported cases of child abuse and reported cases of child neglect, methods to be used in interviewing the child who is the subject of the report and who allegedly was abused or neglected, and standards and procedures addressing the categories of persons who may interview the child who is the subject of the report and who allegedly was abused or neglected.

(4) If a public children services agency participated in the execution of a memorandum of understanding under section 2151.426 of the Revised Code establishing a children's advocacy center, the agency shall incorporate the contents of that memorandum in the memorandum prepared pursuant to this section.

(5) The clerk of the court of common pleas in the county may sign the memorandum of understanding prepared under division (J)(1) of this section. If the clerk signs the memorandum of understanding, the clerk shall execute all relevant responsibilities as required of officials specified in the memorandum.

(K)(1) Except as provided in division (K)(4) of this section, a person who is required to make a report pursuant to division (A) of this section may make a reasonable number of requests of the public children services agency that receives or is referred the report, or of the children's advocacy center that is referred the report if the report is referred to a children's advocacy center pursuant to an interagency agreement entered into under section 2151.428 of the Revised Code, to be provided with the following information:

(a) Whether the agency or center has initiated an

investigation of the report;	1060
(b) Whether the agency or center is continuing to investigate the report;	1061 1062
(c) Whether the agency or center is otherwise involved with the child who is the subject of the report;	1063 1064
(d) The general status of the health and safety of the child who is the subject of the report;	1065 1066
(e) Whether the report has resulted in the filing of a complaint in juvenile court or of criminal charges in another court.	1067 1068 1069
(2) A person may request the information specified in division (K)(1) of this section only if, at the time the report is made, the person's name, address, and telephone number are provided to the person who receives the report.	1070 1071 1072 1073
When a municipal or county peace officer or employee of a public children services agency receives a report pursuant to division (A) or (B) of this section the recipient of the report shall inform the person of the right to request the information described in division (K)(1) of this section. The recipient of the report shall include in the initial child abuse or child neglect report that the person making the report was so informed and, if provided at the time of the making of the report, shall include the person's name, address, and telephone number in the report.	1074 1075 1076 1077 1078 1079 1080 1081 1082
Each request is subject to verification of the identity of the person making the report. If that person's identity is verified, the agency shall provide the person with the information described in division (K)(1) of this section a reasonable number of times, except that the agency shall not disclose any confidential information regarding the child who is the subject of the report other than the information described in those divisions.	1083 1084 1085 1086 1087 1088 1089 1090

(3) A request made pursuant to division (K)(1) of this section is not a substitute for any report required to be made pursuant to division (A) of this section.

(4) If an agency other than the agency that received or was referred the report is conducting the investigation of the report pursuant to section 2151.422 of the Revised Code, the agency conducting the investigation shall comply with the requirements of division (K) of this section.

(L) The director of job and family services shall adopt rules in accordance with Chapter 119. of the Revised Code to implement this section. The department of job and family services may enter into a plan of cooperation with any other governmental entity to aid in ensuring that children are protected from abuse and neglect. The department shall make recommendations to the attorney general that the department determines are necessary to protect children from child abuse and child neglect.

(M) Whoever violates division (A) of this section is liable for compensatory and exemplary damages to the child who would have been the subject of the report that was not made. A person who brings a civil action or proceeding pursuant to this division against a person who is alleged to have violated division (A)(1) of this section may use in the action or proceeding reports of other incidents of known or suspected abuse or neglect, provided that any information in a report that would identify the child who is the subject of the report or the maker of the report, if the maker is not the defendant or an agent or employee of the defendant, has been redacted.

(N)(1) As used in this division:

(a) "Out-of-home care" includes a nonchartered nonpublic school if the alleged child abuse or child neglect, or alleged threat of child abuse or child neglect, described in a report

received by a public children services agency allegedly occurred 1122
in or involved the nonchartered nonpublic school and the alleged 1123
perpetrator named in the report holds a certificate, permit, or 1124
license issued by the state board of education under section 1125
3301.071 or Chapter 3319. of the Revised Code. 1126

(b) "Administrator, director, or other chief administrative 1127
officer" means the superintendent of the school district if the 1128
out-of-home care entity subject to a report made pursuant to this 1129
section is a school operated by the district. 1130

(2) No later than the end of the day following the day on 1131
which a public children services agency receives a report of 1132
alleged child abuse or child neglect, or a report of an alleged 1133
threat of child abuse or child neglect, that allegedly occurred in 1134
or involved an out-of-home care entity, the agency shall provide 1135
written notice of the allegations contained in and the person 1136
named as the alleged perpetrator in the report to the 1137
administrator, director, or other chief administrative officer of 1138
the out-of-home care entity that is the subject of the report 1139
unless the administrator, director, or other chief administrative 1140
officer is named as an alleged perpetrator in the report. If the 1141
administrator, director, or other chief administrative officer of 1142
an out-of-home care entity is named as an alleged perpetrator in a 1143
report of alleged child abuse or child neglect, or a report of an 1144
alleged threat of child abuse or child neglect, that allegedly 1145
occurred in or involved the out-of-home care entity, the agency 1146
shall provide the written notice to the owner or governing board 1147
of the out-of-home care entity that is the subject of the report. 1148
The agency shall not provide witness statements or police or other 1149
investigative reports. 1150

(3) No later than three days after the day on which a public 1151
children services agency that conducted the investigation as 1152
determined pursuant to section 2151.422 of the Revised Code makes 1153

a disposition of an investigation involving a report of alleged 1154
child abuse or child neglect, or a report of an alleged threat of 1155
child abuse or child neglect, that allegedly occurred in or 1156
involved an out-of-home care entity, the agency shall send written 1157
notice of the disposition of the investigation to the 1158
administrator, director, or other chief administrative officer and 1159
the owner or governing board of the out-of-home care entity. The 1160
agency shall not provide witness statements or police or other 1161
investigative reports. 1162

(O) As used in this section, "investigation" means the public 1163
children services agency's response to an accepted report of child 1164
abuse or neglect through either an alternative response or a 1165
traditional response. 1166

Sec. 3712.04. (A) Every person or public agency that proposes 1167
to provide a hospice care program shall apply to the department of 1168
health for a license. Application shall be made on forms 1169
prescribed and provided by the department, shall include such 1170
information as the department requires, and shall be accompanied 1171
by the license fee established by rules of the director of health 1172
adopted under division (A) of section 3712.03 of the Revised Code. 1173
1174

The department shall grant a license to the applicant if the 1175
applicant is in compliance with this chapter and rules adopted 1176
under it. 1177

(B) A license granted under this section shall be valid for 1178
three years. Application for renewal of a license shall be made at 1179
least ninety days before the expiration of the license in the same 1180
manner as for an initial license, except that, if the program 1181
provides hospice care and services in a hospice patient's home, 1182
the application for renewal shall include written evidence 1183
demonstrating that the applicant is in compliance with section 1184

3712.062 of the Revised Code. The department shall renew the 1185
license if the applicant meets the requirements of this chapter 1186
and rules adopted under it. 1187

(C) Subject to Chapter 119. of the Revised Code, the 1188
department may suspend or revoke a license if the licensee made 1189
any material misrepresentation in the application for the license 1190
or no longer meets the requirements of this chapter or rules 1191
adopted under it. 1192

(D) A hospital, nursing home, home for the aged, county 1193
medical care facility, or other health facility or agency that 1194
provides a hospice care program shall be licensed to provide a 1195
hospice care program under this section. 1196

(E) A nursing home licensed under Chapter 3721. of the 1197
Revised Code that does not hold itself out to be a hospice, does 1198
not hold itself out as providing a hospice care program, does not 1199
use the term hospice to describe or refer to its activities or 1200
facilities, and that does not provide all of the services 1201
enumerated in division (A) of section 3712.01 of the Revised Code 1202
is not subject to the licensing provisions of this chapter. 1203

Sec. 3712.062. (A) Each hospice care program licensed under 1204
this chapter that provides hospice care and services in a hospice 1205
patient's home shall establish a written policy establishing 1206
procedures to be followed in preventing the diversion of 1207
controlled substances containing opioids that are prescribed to 1208
its hospice patients. The policy shall include procedures for the 1209
disposal of any such drugs prescribed to a hospice patient as part 1210
of the patient's interdisciplinary plan of care that are 1211
relinquished to the program after the patient's death or that 1212
otherwise are no longer needed by the patient. The policy shall 1213
require that the disposal be documented by a program employee and 1214
conducted in any of the following ways: 1215

<u>(1) Performed by a program employee and witnessed by the</u>	1216
<u>patient or patient's family member;</u>	1217
<u>(2) Performed by the patient or patient's family member and</u>	1218
<u>witnessed by a program employee;</u>	1219
<u>(3) Performed by a program employee and witnessed by another</u>	1220
<u>program employee.</u>	1221
<u>(B) As part of a hospice patient's interdisciplinary plan of</u>	1222
<u>care required by section 3712.06 of the Revised Code, each hospice</u>	1223
<u>care program that provides hospice care and services in the</u>	1224
<u>patient's home shall do all of the following:</u>	1225
<u>(1) Before providing hospice care and services, distribute a</u>	1226
<u>copy of the written policy established under division (A) of this</u>	1227
<u>section to the patient and patient's family and discuss the</u>	1228
<u>procedures included in the policy with the patient and patient's</u>	1229
<u>family;</u>	1230
<u>(2) Assess the patient, the patient's family, and the care</u>	1231
<u>environment for any risk factors associated with diversion;</u>	1232
<u>(3) Maintain records of controlled substances containing</u>	1233
<u>opioids prescribed to the patient and included in the patient's</u>	1234
<u>interdisciplinary plan of care, including accurate counts of the</u>	1235
<u>numbers dispensed and used;</u>	1236
<u>(4) Monitor the use and consumption of controlled substances</u>	1237
<u>containing opioids prescribed to the patient and included in the</u>	1238
<u>patient's interdisciplinary plan of care, including prescription</u>	1239
<u>refills, for signs of diversion;</u>	1240
<u>(5) Report any sign of suspected diversion to a local law</u>	1241
<u>enforcement agency;</u>	1242
<u>(6) Before providing hospice care and services, inform the</u>	1243
<u>patient and the patient's family that the hospice care program</u>	1244
<u>will dispose of any controlled substances containing opioids that</u>	1245

are no longer needed by the patient and were included in the 1246
patient's interdisciplinary plan of care; 1247

(7) After the patient's death or when no longer needed by the 1248
patient, request, in writing, that the patient or patient's family 1249
relinquish to the program for disposal any remaining controlled 1250
substances containing opioids that were included in the patient's 1251
interdisciplinary plan of care to the program; 1252

(8) Report to a local law enforcement agency the quantity and 1253
type of any remaining controlled substances containing opioids 1254
that were included in the patient's interdisciplinary plan of care 1255
and were not relinquished to the program by the patient or 1256
patient's family. 1257

(C) If a hospice care program complies with divisions (B)(7) 1258
and (8) of this section, neither the program nor its employees, 1259
officers, or directors shall be liable in damages to any person or 1260
government entity in a civil action for injury, death, or loss to 1261
person or property that allegedly arises from an action or 1262
omission of the program or an employee relative to this section 1263
unless the action or omission constitutes willful or wanton 1264
misconduct. 1265

(D) No person who receives a written request under division 1266
(B)(7) of this section shall fail to relinquish controlled 1267
substances containing opioids that were included in a patient's 1268
interdisciplinary plan of care. 1269

(E) Immediately following a report from a hospice program 1270
under division (B)(8) of this section, the local law enforcement 1271
agency shall investigate and dispose of the remaining controlled 1272
substances containing opioids that were reported to the agency 1273
pursuant to division (B)(8) of this section. 1274

(F) After a review of the written evidence submitted under 1275
division (B) of section 3701.04 of the Revised Code with an 1276

application for license renewal, if the department determines that 1277
the program is not in compliance with this section, the department 1278
may suspend the program's license for not more than six months and 1279
impose a fine not to exceed twenty thousand dollars. 1280

(G) Not later than one year after the effective date of this 1281
section, the director of health shall adopt rules in accordance 1282
with Chapter 119. of the Revised Code establishing standards and 1283
procedures for the submission and review of the written evidence 1284
required by division (B) of section 3701.04 of the Revised Code 1285
for renewal of a hospice care program license. 1286

Sec. 3712.99. (A) Any person who violates division (A) of 1287
section 3712.05 or division (A) of section 3712.051 of the Revised 1288
Code is guilty of a misdemeanor of the second degree on a first 1289
offense; on each subsequent offense the person is guilty of a 1290
misdemeanor of the first degree. 1291

(B) Any person who violates division (D) of section 3712.062 1292
of the Revised Code is guilty of a minor misdemeanor. 1293

Sec. 3719.061. (A)(1) As used in this section: 1294

(a) "Medical emergency" means a situation that in a 1295
prescriber's good faith medical judgment creates an immediate 1296
threat of serious risk to the life or physical health of a minor. 1297

(b) "Minor" means a person under eighteen years of age who is 1298
not emancipated. 1299

(2) For the purposes of this section, a person under eighteen 1300
years of age is emancipated only if the person has married, 1301
entered the armed services of the United States, became employed 1302
and self-sustaining, or has otherwise become independent from the 1303
care and control of the person's parent, guardian, or custodian. 1304

(B) Except as provided in division (C) of this section, 1305

before issuing for a minor the first prescription in a single 1306
course of treatment for a particular compound that is a controlled 1307
substance that contains an opioid, regardless of whether the 1308
dosage is modified during that course of treatment, a prescriber 1309
shall do all of the following: 1310

(1) As part of the prescriber's examination of the minor, 1311
assess whether the minor has ever suffered, or is currently 1312
suffering, from mental health or substance abuse disorders and 1313
whether the minor has taken or is currently taking prescription 1314
drugs for treatment of those disorders; 1315

(2) Discuss with the minor and the minor's parent, guardian, 1316
or other person responsible for the minor all of the following: 1317

(a) The risks of addiction and overdose associated with the 1318
compound; 1319

(b) The increased risk of addiction to controlled substances 1320
of individuals suffering from both mental and substance abuse 1321
disorders; 1322

(c) The dangers of taking controlled substances containing 1323
opioids with benzodiazepines, alcohol, or other central nervous 1324
system depressants; 1325

(d) Any other information in the patient counseling 1326
information section of labeling for the compound required under 21 1327
C.F.R. 201.57(c)(18). 1328

(3) Obtain written consent for the prescription from the 1329
minor's parent, guardian, or other person responsible for the 1330
minor. 1331

The prescriber shall record the consent on a form, separate 1332
from any other document the prescriber uses to obtain informed 1333
consent for other treatment provided to the minor, that contains 1334
all of the following: 1335

<u>(a) The name and quantity of the compound being prescribed</u>	1336
<u>and the amount of the initial dose;</u>	1337
<u>(b) A statement indicating that a controlled substance is a</u>	1338
<u>drug or other substance that the United States drug enforcement</u>	1339
<u>agency has identified as having a potential for abuse;</u>	1340
<u>(c) A statement certifying that the prescriber discussed with</u>	1341
<u>the minor and the minor's parent, guardian, or other person</u>	1342
<u>responsible for the minor the matters described in division (B)(2)</u>	1343
<u>of this section;</u>	1344
<u>(d) The number of refills authorized by the prescription;</u>	1345
<u>(e) The signature of the minor's parent, guardian, or other</u>	1346
<u>person responsible for the minor and the date of signing.</u>	1347
<u>(C)(1) The requirements in division (B) of this section do</u>	1348
<u>not apply if the minor's treatment with a controlled substance</u>	1349
<u>that contains an opioid meets any of the following criteria:</u>	1350
<u>(a) The treatment is associated with or incident to a medical</u>	1351
<u>emergency.</u>	1352
<u>(b) The treatment is associated with or incident to surgery,</u>	1353
<u>regardless of whether the surgery is performed on an inpatient or</u>	1354
<u>outpatient basis.</u>	1355
<u>(c) In the prescriber's professional judgment, fulfilling the</u>	1356
<u>requirements of division (B) of this section with respect to the</u>	1357
<u>minor's treatment would be a detriment to the minor's health or</u>	1358
<u>safety.</u>	1359
<u>(d) Except as provided in division (C)(2) of this section,</u>	1360
<u>the treatment is rendered in a hospital, ambulatory surgical</u>	1361
<u>facility, nursing home, pediatric respite care program,</u>	1362
<u>residential care facility, freestanding rehabilitation facility,</u>	1363
<u>or similar institutional facility.</u>	1364
<u>(2) The exemption in division (C)(1)(d) of this section does</u>	1365

not apply to treatment rendered in a prescriber's office that is 1366
located on the premises of or adjacent to a facility or other 1367
location described in that division. 1368

(D) If the exemption in division (C)(1)(c) of this section 1369
applies, the prescriber shall notify the appropriate public 1370
children services agency of the circumstances precipitating the 1371
prescriber's professional judgment to invoke this exemption. 1372

(E) The signed consent form shall be maintained in the 1373
minor's medical record. 1374

Sec. 4121.443. Each contract the administrator of workers' 1375
compensation enters into with a managed care organization under 1376
division (B)(4) of section 4121.44 of the Revised Code shall 1377
require the managed care organization to enter into a data 1378
security agreement with the state board of pharmacy governing the 1379
managed care organization's use of the board's drug database 1380
established and maintained under section 4729.75 of the Revised 1381
Code. 1382

This section does not apply if the board no longer maintains 1383
the drug database. 1384

Sec. 4715.14. (A)(1) Each person who is licensed to practice 1385
dentistry in Ohio shall, on or before the first day of January of 1386
each even-numbered year, register with the state dental board. The 1387
registration shall be made on a form prescribed by the board and 1388
furnished by the secretary, shall include the licensee's name, 1389
address, license number, and such other reasonable information as 1390
the board may consider necessary, and shall include payment of a 1391
biennial registration fee of two hundred forty-five dollars. 1392
Except as provided in division (E) of this section, this fee shall 1393
be paid to the treasurer of state. Subject to division (C) of this 1394
section, a registration shall be in effect for the two-year period 1395

beginning on the first day of January of the even-numbered year 1396
and ending on the last day of December of the following 1397
odd-numbered year, and shall be renewed in accordance with the 1398
standard renewal procedure of sections 4745.01 to 4745.03 of the 1399
Revised Code. 1400

(2)(a) Except as provided in division (A)(2)(b) of this 1401
section, with respect to a licensee who prescribes or personally 1402
furnishes opioid analgesics or benzodiazepines as part of the 1403
licensee's regular practice of dentistry, the registration shall 1404
also include evidence that the licensee has been granted access to 1405
the drug database established and maintained by the state board of 1406
pharmacy pursuant to section 4729.75 of the Revised Code. 1407

(b) The requirement in division (A)(2)(a) of this section 1408
does not apply if either of the following is the case: 1409

(i) The state board of pharmacy notifies the state dental 1410
board pursuant to section 4729.861 of the Revised Code that the 1411
licensee has been restricted from obtaining further information 1412
from the drug database. 1413

(ii) The state board of pharmacy no longer maintains the drug 1414
database. 1415

(B) A licensed dentist who desires to temporarily retire from 1416
practice and who has given the board notice in writing to that 1417
effect shall be granted such a retirement, provided only that at 1418
that time all previous registration fees and additional costs of 1419
reinstatement have been paid. 1420

(C) Not later than the thirty-first day of January of an 1421
even-numbered year, the board shall send a notice by certified 1422
mail to a dentist who fails to renew a license in accordance with 1423
division (A) of this section. The notice shall state all of the 1424
following: 1425

(1) That the board has not received the registration form and 1426

fee described in that division; 1427

(2) That the license shall remain valid and in good standing 1428
until the first day of April following the last day of December of 1429
the odd-numbered year in which the dentist was scheduled to renew 1430
if the dentist remains in compliance with all other applicable 1431
provisions of this chapter and any rule adopted under it; 1432

(3) That the license may be renewed until the first day of 1433
April following the last day of December of the odd-numbered year 1434
in which the dentist was scheduled to renew by the payment of the 1435
biennial registration fee and an additional fee of one hundred 1436
dollars to cover the cost of late renewal; 1437

(4) That unless the board receives the registration form and 1438
fee before the first day of April following the last day of 1439
December of the odd-numbered year in which the dentist was 1440
scheduled to renew, the board may, on or after the relevant first 1441
day of April, initiate disciplinary action against the dentist 1442
pursuant to Chapter 119. of the Revised Code; 1443

(5) That a dentist whose license has been suspended as a 1444
result of disciplinary action initiated pursuant to division 1445
(C)(4) of this section may be reinstated by the payment of the 1446
biennial registration fee and an additional fee of three hundred 1447
dollars to cover the cost of reinstatement. 1448

(D) Each dentist licensed to practice, whether a resident or 1449
not, shall notify the secretary in writing or electronically of 1450
any change in the dentist's office address or employment within 1451
ten days after such change has taken place. On the first day of 1452
July of every even-numbered year, the secretary shall issue a 1453
printed roster of the names and addresses so registered. 1454

(E) Twenty dollars of each biennial registration fee shall be 1455
paid to the dentist loan repayment fund created under section 1456
3702.95 of the Revised Code. 1457

Sec. 4715.30. (A) An applicant for or holder of a certificate	1458
or license issued under this chapter is subject to disciplinary	1459
action by the state dental board for any of the following reasons:	1460
	1461
(1) Employing or cooperating in fraud or material deception	1462
in applying for or obtaining a license or certificate;	1463
(2) Obtaining or attempting to obtain money or anything of	1464
value by intentional misrepresentation or material deception in	1465
the course of practice;	1466
(3) Advertising services in a false or misleading manner or	1467
violating the board's rules governing time, place, and manner of	1468
advertising;	1469
(4) Commission of an act that constitutes a felony in this	1470
state, regardless of the jurisdiction in which the act was	1471
committed;	1472
(5) Commission of an act in the course of practice that	1473
constitutes a misdemeanor in this state, regardless of the	1474
jurisdiction in which the act was committed;	1475
(6) Conviction of, a plea of guilty to, a judicial finding of	1476
guilt of, a judicial finding of guilt resulting from a plea of no	1477
contest to, or a judicial finding of eligibility for intervention	1478
in lieu of conviction for, any felony or of a misdemeanor	1479
committed in the course of practice;	1480
(7) Engaging in lewd or immoral conduct in connection with	1481
the provision of dental services;	1482
(8) Selling, prescribing, giving away, or administering drugs	1483
for other than legal and legitimate therapeutic purposes, or	1484
conviction of, a plea of guilty to, a judicial finding of guilt	1485
of, a judicial finding of guilt resulting from a plea of no	1486
contest to, or a judicial finding of eligibility for intervention	1487

in lieu of conviction for, a violation of any federal or state law	1488
regulating the possession, distribution, or use of any drug;	1489
(9) Providing or allowing dental hygienists, expanded	1490
function dental auxiliaries, or other practitioners of auxiliary	1491
dental occupations working under the certificate or license	1492
holder's supervision, or a dentist holding a temporary limited	1493
continuing education license under division (C) of section 4715.16	1494
of the Revised Code working under the certificate or license	1495
holder's direct supervision, to provide dental care that departs	1496
from or fails to conform to accepted standards for the profession,	1497
whether or not injury to a patient results;	1498
(10) Inability to practice under accepted standards of the	1499
profession because of physical or mental disability, dependence on	1500
alcohol or other drugs, or excessive use of alcohol or other	1501
drugs;	1502
(11) Violation of any provision of this chapter or any rule	1503
adopted thereunder;	1504
(12) Failure to use universal blood and body fluid	1505
precautions established by rules adopted under section 4715.03 of	1506
the Revised Code;	1507
(13) Except as provided in division (H) of this section,	1508
either of the following:	1509
(a) Waiving the payment of all or any part of a deductible or	1510
copayment that a patient, pursuant to a health insurance or health	1511
care policy, contract, or plan that covers dental services, would	1512
otherwise be required to pay if the waiver is used as an	1513
enticement to a patient or group of patients to receive health	1514
care services from that certificate or license holder;	1515
(b) Advertising that the certificate or license holder will	1516
waive the payment of all or any part of a deductible or copayment	1517
that a patient, pursuant to a health insurance or health care	1518

policy, contract, or plan that covers dental services, would 1519
otherwise be required to pay. 1520

(14) Failure to comply with section 4715.302 or 4729.79 of 1521
the Revised Code, unless the state board of pharmacy no longer 1522
maintains a drug database pursuant to section 4729.75 of the 1523
Revised Code; 1524

(15) Any of the following actions taken by an agency 1525
responsible for authorizing, certifying, or regulating an 1526
individual to practice a health care occupation or provide health 1527
care services in this state or another jurisdiction, for any 1528
reason other than the nonpayment of fees: the limitation, 1529
revocation, or suspension of an individual's license to practice; 1530
acceptance of an individual's license surrender; denial of a 1531
license; refusal to renew or reinstate a license; imposition of 1532
probation; or issuance of an order of censure or other reprimand; 1533

(16) Failure to cooperate in an investigation conducted by 1534
the board under division (D) of section 4715.03 of the Revised 1535
Code, including failure to comply with a subpoena or order issued 1536
by the board or failure to answer truthfully a question presented 1537
by the board at a deposition or in written interrogatories, except 1538
that failure to cooperate with an investigation shall not 1539
constitute grounds for discipline under this section if a court of 1540
competent jurisdiction has issued an order that either quashes a 1541
subpoena or permits the individual to withhold the testimony or 1542
evidence in issue; 1543

(17) Violation of section 3719.061 of the Revised Code. 1544

(B) A manager, proprietor, operator, or conductor of a dental 1545
facility shall be subject to disciplinary action if any dentist, 1546
dental hygienist, expanded function dental auxiliary, or qualified 1547
personnel providing services in the facility is found to have 1548
committed a violation listed in division (A) of this section and 1549

the manager, proprietor, operator, or conductor knew of the 1550
violation and permitted it to occur on a recurring basis. 1551

(C)(1) Subject to Chapter 119. of the Revised Code, the board 1552
may take one or more of the following disciplinary actions if one 1553
or more of the grounds for discipline listed in divisions (A)(1) 1554
to (16) and (B) of this section exist: 1555

~~(1)~~(a) Censure the license or certificate holder; 1556

~~(2)~~(b) Place the license or certificate on probationary 1557
status for such period of time the board determines necessary and 1558
require the holder to: 1559

~~(a)~~(i) Report regularly to the board upon the matters which 1560
are the basis of probation; 1561

~~(b)~~(ii) Limit practice to those areas specified by the board; 1562

~~(c)~~(iii) Continue or renew professional education until a 1563
satisfactory degree of knowledge or clinical competency has been 1564
attained in specified areas. 1565

~~(3)~~(c) Suspend the certificate or license; 1566

~~(4)~~(d) Revoke the certificate or license. 1567

(2) For the initial violation of section 3719.061 of the 1568
Revised Code by a dentist, the board may impose a fine not to 1569
exceed twenty thousand dollars. For each subsequent violation of 1570
that section, the board may impose an additional fine not to 1571
exceed twenty thousand dollars, suspend for not less than six 1572
months the license of the dentist, or both. 1573

Disciplinary action under this section shall be taken 1574
pursuant to an adjudication conducted under Chapter 119. of the 1575
Revised Code. 1576

Where the board places a holder of a license or certificate 1577
on probationary status pursuant to division (C)~~(2)~~(1)(b) of this 1578
section, the board may subsequently suspend or revoke the license 1579

or certificate if it determines that the holder has not met the 1580
requirements of the probation or continues to engage in activities 1581
that constitute grounds for discipline pursuant to division (A) or 1582
(B) of this section. 1583

Any order suspending a license or certificate for grounds for 1584
discipline listed in divisions (A)(1) to (16) of this section 1585
shall state the conditions under which the license or certificate 1586
will be restored, which may include a conditional restoration 1587
during which time the holder is in a probationary status pursuant 1588
to division (C)~~(2)~~(1)(b) of this section. The board shall restore 1589
the license or certificate unconditionally when such conditions 1590
are met. 1591

(D) If the physical or mental condition of an applicant or a 1592
license or certificate holder is at issue in a disciplinary 1593
proceeding, the board may order the license or certificate holder 1594
to submit to reasonable examinations by an individual designated 1595
or approved by the board and at the board's expense. The physical 1596
examination may be conducted by any individual authorized by the 1597
Revised Code to do so, including a physician assistant, a clinical 1598
nurse specialist, a certified nurse practitioner, or a certified 1599
nurse-midwife. Any written documentation of the physical 1600
examination shall be completed by the individual who conducted the 1601
examination. 1602

Failure to comply with an order for an examination shall be 1603
grounds for refusal of a license or certificate or summary 1604
suspension of a license or certificate under division (E) of this 1605
section. 1606

(E) If a license or certificate holder has failed to comply 1607
with an order under division (D) of this section, the board may 1608
apply to the court of common pleas of the county in which the 1609
holder resides for an order temporarily suspending the holder's 1610
license or certificate, without a prior hearing being afforded by 1611

the board, until the board conducts an adjudication hearing 1612
pursuant to Chapter 119. of the Revised Code. If the court 1613
temporarily suspends a holder's license or certificate, the board 1614
shall give written notice of the suspension personally or by 1615
certified mail to the license or certificate holder. Such notice 1616
shall inform the license or certificate holder of the right to a 1617
hearing pursuant to Chapter 119. of the Revised Code. 1618

(F) Any holder of a certificate or license issued under this 1619
chapter who has pleaded guilty to, has been convicted of, or has 1620
had a judicial finding of eligibility for intervention in lieu of 1621
conviction entered against the holder in this state for aggravated 1622
murder, murder, voluntary manslaughter, felonious assault, 1623
kidnapping, rape, sexual battery, gross sexual imposition, 1624
aggravated arson, aggravated robbery, or aggravated burglary, or 1625
who has pleaded guilty to, has been convicted of, or has had a 1626
judicial finding of eligibility for treatment or intervention in 1627
lieu of conviction entered against the holder in another 1628
jurisdiction for any substantially equivalent criminal offense, is 1629
automatically suspended from practice under this chapter in this 1630
state and any certificate or license issued to the holder under 1631
this chapter is automatically suspended, as of the date of the 1632
guilty plea, conviction, or judicial finding, whether the 1633
proceedings are brought in this state or another jurisdiction. 1634
Continued practice by an individual after the suspension of the 1635
individual's certificate or license under this division shall be 1636
considered practicing without a certificate or license. The board 1637
shall notify the suspended individual of the suspension of the 1638
individual's certificate or license under this division by 1639
certified mail or in person in accordance with section 119.07 of 1640
the Revised Code. If an individual whose certificate or license is 1641
suspended under this division fails to make a timely request for 1642
an adjudicatory hearing, the board shall enter a final order 1643
revoking the individual's certificate or license. 1644

(G) If the supervisory investigative panel determines both of 1645
the following, the panel may recommend that the board suspend an 1646
individual's certificate or license without a prior hearing: 1647

(1) That there is clear and convincing evidence that an 1648
individual has violated ~~division~~ divisions (A)(1) to (16) of this 1649
section; 1650

(2) That the individual's continued practice presents a 1651
danger of immediate and serious harm to the public. 1652

Written allegations shall be prepared for consideration by 1653
the board. The board, upon review of those allegations and by an 1654
affirmative vote of not fewer than four dentist members of the 1655
board and seven of its members in total, excluding any member on 1656
the supervisory investigative panel, may suspend a certificate or 1657
license without a prior hearing. A telephone conference call may 1658
be utilized for reviewing the allegations and taking the vote on 1659
the summary suspension. 1660

The board shall issue a written order of suspension by 1661
certified mail or in person in accordance with section 119.07 of 1662
the Revised Code. The order shall not be subject to suspension by 1663
the court during pendency or any appeal filed under section 119.12 1664
of the Revised Code. If the individual subject to the summary 1665
suspension requests an adjudicatory hearing by the board, the date 1666
set for the hearing shall be within fifteen days, but not earlier 1667
than seven days, after the individual requests the hearing, unless 1668
otherwise agreed to by both the board and the individual. 1669

Any summary suspension imposed under this division shall 1670
remain in effect, unless reversed on appeal, until a final 1671
adjudicative order issued by the board pursuant to this section 1672
and Chapter 119. of the Revised Code becomes effective. The board 1673
shall issue its final adjudicative order within seventy-five days 1674
after completion of its hearing. A failure to issue the order 1675

within seventy-five days shall result in dissolution of the 1676
summary suspension order but shall not invalidate any subsequent, 1677
final adjudicative order. 1678

(H) Sanctions shall not be imposed under division (A)(13) of 1679
this section against any certificate or license holder who waives 1680
deductibles and copayments as follows: 1681

(1) In compliance with the health benefit plan that expressly 1682
allows such a practice. Waiver of the deductibles or copayments 1683
shall be made only with the full knowledge and consent of the plan 1684
purchaser, payer, and third-party administrator. Documentation of 1685
the consent shall be made available to the board upon request. 1686

(2) For professional services rendered to any other person 1687
who holds a certificate or license issued pursuant to this chapter 1688
to the extent allowed by this chapter and the rules of the board. 1689

(I) In no event shall the board consider or raise during a 1690
hearing required by Chapter 119. of the Revised Code the 1691
circumstances of, or the fact that the board has received, one or 1692
more complaints about a person unless the one or more complaints 1693
are the subject of the hearing or resulted in the board taking an 1694
action authorized by this section against the person on a prior 1695
occasion. 1696

(J) The board may share any information it receives pursuant 1697
to an investigation under division (D) of section 4715.03 of the 1698
Revised Code, including patient records and patient record 1699
information, with law enforcement agencies, other licensing 1700
boards, and other governmental agencies that are prosecuting, 1701
adjudicating, or investigating alleged violations of statutes or 1702
administrative rules. An agency or board that receives the 1703
information shall comply with the same requirements regarding 1704
confidentiality as those with which the state dental board must 1705
comply, notwithstanding any conflicting provision of the Revised 1706

Code or procedure of the agency or board that applies when it is 1707
dealing with other information in its possession. In a judicial 1708
proceeding, the information may be admitted into evidence only in 1709
accordance with the Rules of Evidence, but the court shall require 1710
that appropriate measures are taken to ensure that confidentiality 1711
is maintained with respect to any part of the information that 1712
contains names or other identifying information about patients or 1713
complainants whose confidentiality was protected by the state 1714
dental board when the information was in the board's possession. 1715
Measures to ensure confidentiality that may be taken by the court 1716
include sealing its records or deleting specific information from 1717
its records. 1718

Sec. 4715.302. (A) As used in this section, "drug database" 1719
means the database established and maintained by the state board 1720
of pharmacy pursuant to section 4729.75 of the Revised Code. 1721

(B) The Except as provided in divisions (C) and (E) of this 1722
section, a dentist shall comply with all of the following as 1723
conditions of prescribing a drug that is either an opioid 1724
analgesic or a benzodiazepine, or personally furnishing a complete 1725
or partial supply of such a drug, as part of a patient's course of 1726
treatment for a particular condition: 1727

(1) Before initially prescribing or furnishing the drug, the 1728
dentist or the dentist's delegate shall request from the drug 1729
database a report of information related to the patient that 1730
covers at least the twelve months immediately preceding the date 1731
of the request. If the dentist practices primarily in a county of 1732
this state that adjoins another state, the dentist or delegate 1733
also shall request a report of any information available in the 1734
drug database that pertains to prescriptions issued or drugs 1735
furnished to the patient in the state adjoining that county. 1736

(2) If the patient's course of treatment for the condition 1737

continues for more than ninety days after the initial report is 1738
requested, the dentist or delegate shall make periodic requests 1739
for reports of information from the drug database until the course 1740
of treatment has ended. The requests shall be made at intervals 1741
not exceeding ninety days, determined according to the date the 1742
initial request was made. The request shall be made in the same 1743
manner provided in division (B)(1) of this section for requesting 1744
the initial report of information from the drug database. 1745

(3) On receipt of a report under division (B)(1) or (2) of 1746
this section, the dentist shall assess the information in the 1747
report. The dentist shall document in the patient's record that 1748
the report was received and the information was assessed. 1749

(C)(1) Division (B) of this section does not apply if a drug 1750
database report regarding the patient is not available. In this 1751
event, the dentist shall document in the patient's record the 1752
reason that the report is not available. 1753

(2) Division (B) of this section does not apply if the drug 1754
is prescribed or personally furnished in an amount indicated for a 1755
period not to exceed seven days. 1756

(D) With respect to prescribing or personally furnishing any 1757
drug that is not an opioid analgesic or a benzodiazepine but is 1758
included in the drug database pursuant to rules adopted under 1759
section 4729.84 of the Revised Code, the state dental board shall 1760
adopt rules in accordance with Chapter 119. of the Revised Code 1761
that establish standards and procedures to be followed by a 1762
dentist regarding the review of patient information available 1763
through the drug database under division (A)(5) of section 4729.80 1764
of the Revised Code. The rules shall be adopted in accordance with 1765
Chapter 119. of the Revised Code. 1766

~~(C)~~(E) This section and the rules adopted under it do not 1767
apply if the state board of pharmacy no longer maintains the drug 1768

database. 1769

Sec. 4723.28. (A) The board of nursing, by a vote of a 1770
quorum, may impose one or more of the following sanctions if it 1771
finds that a person committed fraud in passing an examination 1772
required to obtain a license, certificate of authority, or 1773
dialysis technician certificate issued by the board or to have 1774
committed fraud, misrepresentation, or deception in applying for 1775
or securing any nursing license, certificate of authority, or 1776
dialysis technician certificate issued by the board: deny, revoke, 1777
suspend, or place restrictions on any nursing license, certificate 1778
of authority, or dialysis technician certificate issued by the 1779
board; reprimand or otherwise discipline a holder of a nursing 1780
license, certificate of authority, or dialysis technician 1781
certificate; or impose a fine of not more than five hundred 1782
dollars per violation. 1783

(B) The board of nursing, by a vote of a quorum, may impose 1784
one or more of the following sanctions: deny, revoke, suspend, or 1785
place restrictions on any nursing license, certificate of 1786
authority, or dialysis technician certificate issued by the board; 1787
reprimand or otherwise discipline a holder of a nursing license, 1788
certificate of authority, or dialysis technician certificate; or 1789
impose a fine of not more than five hundred dollars per violation. 1790
The sanctions may be imposed for any of the following: 1791

(1) Denial, revocation, suspension, or restriction of 1792
authority to engage in a licensed profession or practice a health 1793
care occupation, including nursing or practice as a dialysis 1794
technician, for any reason other than a failure to renew, in Ohio 1795
or another state or jurisdiction; 1796

(2) Engaging in the practice of nursing or engaging in 1797
practice as a dialysis technician, having failed to renew a 1798
nursing license or dialysis technician certificate issued under 1799

this chapter, or while a nursing license or dialysis technician certificate is under suspension; 1800
1801

(3) Conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, a misdemeanor committed in the course of practice; 1802
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(4) Conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, any felony or of any crime involving gross immorality or moral turpitude; 1807
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(5) Selling, giving away, or administering drugs or therapeutic devices for other than legal and legitimate therapeutic purposes; or conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, violating any municipal, state, county, or federal drug law; 1813
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(6) Conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, an act in another jurisdiction that would constitute a felony or a crime of moral turpitude in Ohio; 1821
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(7) Conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of 1827
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conviction for, an act in the course of practice in another	1831
jurisdiction that would constitute a misdemeanor in Ohio;	1832
(8) Self-administering or otherwise taking into the body any	1833
dangerous drug, as defined in section 4729.01 of the Revised Code,	1834
in any way that is not in accordance with a legal, valid	1835
prescription issued for that individual, or self-administering or	1836
otherwise taking into the body any drug that is a schedule I	1837
controlled substance;	1838
(9) Habitual or excessive use of controlled substances, other	1839
habit-forming drugs, or alcohol or other chemical substances to an	1840
extent that impairs the individual's ability to provide safe	1841
nursing care or safe dialysis care;	1842
(10) Impairment of the ability to practice according to	1843
acceptable and prevailing standards of safe nursing care or safe	1844
dialysis care because of the use of drugs, alcohol, or other	1845
chemical substances;	1846
(11) Impairment of the ability to practice according to	1847
acceptable and prevailing standards of safe nursing care or safe	1848
dialysis care because of a physical or mental disability;	1849
(12) Assaulting or causing harm to a patient or depriving a	1850
patient of the means to summon assistance;	1851
(13) Misappropriation or attempted misappropriation of money	1852
or anything of value in the course of practice;	1853
(14) Adjudication by a probate court of being mentally ill or	1854
mentally incompetent. The board may reinstate the person's nursing	1855
license or dialysis technician certificate upon adjudication by a	1856
probate court of the person's restoration to competency or upon	1857
submission to the board of other proof of competency.	1858
(15) The suspension or termination of employment by the	1859
department of defense or the veterans administration of the United	1860

States for any act that violates or would violate this chapter;	1861
(16) Violation of this chapter or any rules adopted under it;	1862
(17) Violation of any restrictions placed by the board on a nursing license or dialysis technician certificate;	1863 1864
(18) Failure to use universal and standard precautions established by rules adopted under section 4723.07 of the Revised Code;	1865 1866 1867
(19) Failure to practice in accordance with acceptable and prevailing standards of safe nursing care or safe dialysis care;	1868 1869
(20) In the case of a registered nurse, engaging in activities that exceed the practice of nursing as a registered nurse;	1870 1871 1872
(21) In the case of a licensed practical nurse, engaging in activities that exceed the practice of nursing as a licensed practical nurse;	1873 1874 1875
(22) In the case of a dialysis technician, engaging in activities that exceed those permitted under section 4723.72 of the Revised Code;	1876 1877 1878
(23) Aiding and abetting a person in that person's practice of nursing without a license or practice as a dialysis technician without a certificate issued under this chapter;	1879 1880 1881
(24) In the case of a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner, except as provided in division (M) of this section, either of the following:	1882 1883 1884 1885
(a) Waiving the payment of all or any part of a deductible or copayment that a patient, pursuant to a health insurance or health care policy, contract, or plan that covers such nursing services, would otherwise be required to pay if the waiver is used as an enticement to a patient or group of patients to receive health	1886 1887 1888 1889 1890

care services from that provider;	1891
(b) Advertising that the nurse will waive the payment of all	1892
or any part of a deductible or copayment that a patient, pursuant	1893
to a health insurance or health care policy, contract, or plan	1894
that covers such nursing services, would otherwise be required to	1895
pay.	1896
(25) Failure to comply with the terms and conditions of	1897
participation in the chemical dependency monitoring program	1898
established under section 4723.35 of the Revised Code;	1899
(26) Failure to comply with the terms and conditions required	1900
under the practice intervention and improvement program	1901
established under section 4723.282 of the Revised Code;	1902
(27) In the case of a certified registered nurse anesthetist,	1903
clinical nurse specialist, certified nurse-midwife, or certified	1904
nurse practitioner:	1905
(a) Engaging in activities that exceed those permitted for	1906
the nurse's nursing specialty under section 4723.43 of the Revised	1907
Code;	1908
(b) Failure to meet the quality assurance standards	1909
established under section 4723.07 of the Revised Code.	1910
(28) In the case of a clinical nurse specialist, certified	1911
nurse-midwife, or certified nurse practitioner, failure to	1912
maintain a standard care arrangement in accordance with section	1913
4723.431 of the Revised Code or to practice in accordance with the	1914
standard care arrangement;	1915
(29) In the case of a clinical nurse specialist, certified	1916
nurse-midwife, or certified nurse practitioner who holds a	1917
certificate to prescribe issued under section 4723.48 of the	1918
Revised Code, failure to prescribe drugs and therapeutic devices	1919
in accordance with section 4723.481 of the Revised Code;	1920

(30) Prescribing any drug or device to perform or induce an abortion, or otherwise performing or inducing an abortion;	1921 1922
(31) Failure to establish and maintain professional boundaries with a patient, as specified in rules adopted under section 4723.07 of the Revised Code;	1923 1924 1925
(32) Regardless of whether the contact or verbal behavior is consensual, engaging with a patient other than the spouse of the registered nurse, licensed practical nurse, or dialysis technician in any of the following:	1926 1927 1928 1929
(a) Sexual contact, as defined in section 2907.01 of the Revised Code;	1930 1931
(b) Verbal behavior that is sexually demeaning to the patient or may be reasonably interpreted by the patient as sexually demeaning.	1932 1933 1934
(33) Assisting suicide as defined in section 3795.01 of the Revised Code;	1935 1936
<u>(34) Failure to comply with section 4723.487 of the Revised Code, unless the state board of pharmacy no longer maintains a drug database pursuant to section 4729.75 of the Revised Code.</u>	1937 1938 1939
(C) Disciplinary actions taken by the board under divisions (A) and (B) of this section shall be taken pursuant to an adjudication conducted under Chapter 119. of the Revised Code, except that in lieu of a hearing, the board may enter into a consent agreement with an individual to resolve an allegation of a violation of this chapter or any rule adopted under it. A consent agreement, when ratified by a vote of a quorum, shall constitute the findings and order of the board with respect to the matter addressed in the agreement. If the board refuses to ratify a consent agreement, the admissions and findings contained in the agreement shall be of no effect.	1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950

(D) The hearings of the board shall be conducted in 1951
accordance with Chapter 119. of the Revised Code, the board may 1952
appoint a hearing examiner, as provided in section 119.09 of the 1953
Revised Code, to conduct any hearing the board is authorized to 1954
hold under Chapter 119. of the Revised Code. 1955

In any instance in which the board is required under Chapter 1956
119. of the Revised Code to give notice of an opportunity for a 1957
hearing and the applicant, licensee, or certificate holder does 1958
not make a timely request for a hearing in accordance with section 1959
119.07 of the Revised Code, the board is not required to hold a 1960
hearing, but may adopt, by a vote of a quorum, a final order that 1961
contains the board's findings. In the final order, the board may 1962
order any of the sanctions listed in division (A) or (B) of this 1963
section. 1964

(E) If a criminal action is brought against a registered 1965
nurse, licensed practical nurse, or dialysis technician for an act 1966
or crime described in divisions (B)(3) to (7) of this section and 1967
the action is dismissed by the trial court other than on the 1968
merits, the board shall conduct an adjudication to determine 1969
whether the registered nurse, licensed practical nurse, or 1970
dialysis technician committed the act on which the action was 1971
based. If the board determines on the basis of the adjudication 1972
that the registered nurse, licensed practical nurse, or dialysis 1973
technician committed the act, or if the registered nurse, licensed 1974
practical nurse, or dialysis technician fails to participate in 1975
the adjudication, the board may take action as though the 1976
registered nurse, licensed practical nurse, or dialysis technician 1977
had been convicted of the act. 1978

If the board takes action on the basis of a conviction, plea, 1979
or a judicial finding as described in divisions (B)(3) to (7) of 1980
this section that is overturned on appeal, the registered nurse, 1981
licensed practical nurse, or dialysis technician may, on 1982

exhaustion of the appeal process, petition the board for 1983
reconsideration of its action. On receipt of the petition and 1984
supporting court documents, the board shall temporarily rescind 1985
its action. If the board determines that the decision on appeal 1986
was a decision on the merits, it shall permanently rescind its 1987
action. If the board determines that the decision on appeal was 1988
not a decision on the merits, it shall conduct an adjudication to 1989
determine whether the registered nurse, licensed practical nurse, 1990
or dialysis technician committed the act on which the original 1991
conviction, plea, or judicial finding was based. If the board 1992
determines on the basis of the adjudication that the registered 1993
nurse, licensed practical nurse, or dialysis technician committed 1994
such act, or if the registered nurse, licensed practical nurse, or 1995
dialysis technician does not request an adjudication, the board 1996
shall reinstate its action; otherwise, the board shall permanently 1997
rescind its action. 1998

Notwithstanding the provision of division (C)(2) of section 1999
2953.32 of the Revised Code specifying that if records pertaining 2000
to a criminal case are sealed under that section the proceedings 2001
in the case shall be deemed not to have occurred, sealing of the 2002
following records on which the board has based an action under 2003
this section shall have no effect on the board's action or any 2004
sanction imposed by the board under this section: records of any 2005
conviction, guilty plea, judicial finding of guilt resulting from 2006
a plea of no contest, or a judicial finding of eligibility for a 2007
pretrial diversion program or intervention in lieu of conviction. 2008

The board shall not be required to seal, destroy, redact, or 2009
otherwise modify its records to reflect the court's sealing of 2010
conviction records. 2011

(F) The board may investigate an individual's criminal 2012
background in performing its duties under this section. As part of 2013
such investigation, the board may order the individual to submit, 2014

at the individual's expense, a request to the bureau of criminal 2015
identification and investigation for a criminal records check and 2016
check of federal bureau of investigation records in accordance 2017
with the procedure described in section 4723.091 of the Revised 2018
Code. 2019

(G) During the course of an investigation conducted under 2020
this section, the board may compel any registered nurse, licensed 2021
practical nurse, or dialysis technician or applicant under this 2022
chapter to submit to a mental or physical examination, or both, as 2023
required by the board and at the expense of the individual, if the 2024
board finds reason to believe that the individual under 2025
investigation may have a physical or mental impairment that may 2026
affect the individual's ability to provide safe nursing care. 2027
Failure of any individual to submit to a mental or physical 2028
examination when directed constitutes an admission of the 2029
allegations, unless the failure is due to circumstances beyond the 2030
individual's control, and a default and final order may be entered 2031
without the taking of testimony or presentation of evidence. 2032

If the board finds that an individual is impaired, the board 2033
shall require the individual to submit to care, counseling, or 2034
treatment approved or designated by the board, as a condition for 2035
initial, continued, reinstated, or renewed authority to practice. 2036
The individual shall be afforded an opportunity to demonstrate to 2037
the board that the individual can begin or resume the individual's 2038
occupation in compliance with acceptable and prevailing standards 2039
of care under the provisions of the individual's authority to 2040
practice. 2041

For purposes of this division, any registered nurse, licensed 2042
practical nurse, or dialysis technician or applicant under this 2043
chapter shall be deemed to have given consent to submit to a 2044
mental or physical examination when directed to do so in writing 2045
by the board, and to have waived all objections to the 2046

admissibility of testimony or examination reports that constitute 2047
a privileged communication. 2048

(H) The board shall investigate evidence that appears to show 2049
that any person has violated any provision of this chapter or any 2050
rule of the board. Any person may report to the board any 2051
information the person may have that appears to show a violation 2052
of any provision of this chapter or rule of the board. In the 2053
absence of bad faith, any person who reports such information or 2054
who testifies before the board in any adjudication conducted under 2055
Chapter 119. of the Revised Code shall not be liable for civil 2056
damages as a result of the report or testimony. 2057

(I) All of the following apply under this chapter with 2058
respect to the confidentiality of information: 2059

(1) Information received by the board pursuant to a complaint 2060
or an investigation is confidential and not subject to discovery 2061
in any civil action, except that the board may disclose 2062
information to law enforcement officers and government entities 2063
for purposes of an investigation of either a licensed health care 2064
professional, including a registered nurse, licensed practical 2065
nurse, or dialysis technician, or a person who may have engaged in 2066
the unauthorized practice of nursing or dialysis care. No law 2067
enforcement officer or government entity with knowledge of any 2068
information disclosed by the board pursuant to this division shall 2069
divulge the information to any other person or government entity 2070
except for the purpose of a government investigation, a 2071
prosecution, or an adjudication by a court or government entity. 2072

(2) If an investigation requires a review of patient records, 2073
the investigation and proceeding shall be conducted in such a 2074
manner as to protect patient confidentiality. 2075

(3) All adjudications and investigations of the board shall 2076
be considered civil actions for the purposes of section 2305.252 2077

of the Revised Code. 2078

(4) Any board activity that involves continued monitoring of 2079
an individual as part of or following any disciplinary action 2080
taken under this section shall be conducted in a manner that 2081
maintains the individual's confidentiality. Information received 2082
or maintained by the board with respect to the board's monitoring 2083
activities is not subject to discovery in any civil action and is 2084
confidential, except that the board may disclose information to 2085
law enforcement officers and government entities for purposes of 2086
an investigation of a licensee or certificate holder. 2087

(J) Any action taken by the board under this section 2088
resulting in a suspension from practice shall be accompanied by a 2089
written statement of the conditions under which the person may be 2090
reinstated to practice. 2091

(K) When the board refuses to grant a license or certificate 2092
to an applicant, revokes a license or certificate, or refuses to 2093
reinstate a license or certificate, the board may specify that its 2094
action is permanent. An individual subject to permanent action 2095
taken by the board is forever ineligible to hold a license or 2096
certificate of the type that was refused or revoked and the board 2097
shall not accept from the individual an application for 2098
reinstatement of the license or certificate or for a new license 2099
or certificate. 2100

(L) No unilateral surrender of a nursing license, certificate 2101
of authority, or dialysis technician certificate issued under this 2102
chapter shall be effective unless accepted by majority vote of the 2103
board. No application for a nursing license, certificate of 2104
authority, or dialysis technician certificate issued under this 2105
chapter may be withdrawn without a majority vote of the board. The 2106
board's jurisdiction to take disciplinary action under this 2107
section is not removed or limited when an individual has a license 2108
or certificate classified as inactive or fails to renew a license 2109

or certificate. 2110

(M) Sanctions shall not be imposed under division (B)(24) of 2111
this section against any licensee who waives deductibles and 2112
copayments as follows: 2113

(1) In compliance with the health benefit plan that expressly 2114
allows such a practice. Waiver of the deductibles or copayments 2115
shall be made only with the full knowledge and consent of the plan 2116
purchaser, payer, and third-party administrator. Documentation of 2117
the consent shall be made available to the board upon request. 2118

(2) For professional services rendered to any other person 2119
licensed pursuant to this chapter to the extent allowed by this 2120
chapter and the rules of the board. 2121

Sec. 4723.283. (A) For the initial violation of section 2122
3719.061 of the Revised Code by a clinical nurse specialist, 2123
certified nurse-midwife, or certified nurse practitioner, the 2124
board of nursing, by a vote of a quorum, may impose a fine not to 2125
exceed twenty thousand dollars. For each subsequent violation of 2126
that section, the board, by a vote of a quorum, may impose an 2127
additional fine not to exceed twenty thousand dollars; suspend for 2128
not less than six months the nurse's license to practice as a 2129
registered nurse, certificate of authority, and certificate to 2130
prescribe; or both. 2131

(B) Disciplinary action under this section shall be taken 2132
pursuant to an adjudication conducted under Chapter 119. of the 2133
Revised Code. 2134

When investigating or conducting a hearing on an alleged 2135
violation of section 3719.061 of the Revised Code, the board may 2136
take any action it is authorized to take under division (D), (F), 2137
or (G) of section 4723.28 of the Revised Code. 2138

Sec. 4723.481. This section establishes standards and 2139

conditions regarding the authority of a clinical nurse specialist, 2140
certified nurse-midwife, or certified nurse practitioner to 2141
prescribe drugs and therapeutic devices under a certificate to 2142
prescribe issued under section 4723.48 of the Revised Code. 2143

(A) A clinical nurse specialist, certified nurse-midwife, or 2144
certified nurse practitioner shall not prescribe any drug or 2145
therapeutic device that is not included in the types of drugs and 2146
devices listed on the formulary established in rules adopted under 2147
section 4723.50 of the Revised Code. 2148

(B) The prescriptive authority of a clinical nurse 2149
specialist, certified nurse-midwife, or certified nurse 2150
practitioner shall not exceed the prescriptive authority of the 2151
collaborating physician or podiatrist, including the collaborating 2152
physician's authority to treat chronic pain with controlled 2153
substances and products containing tramadol as described in 2154
section 4731.052 of the Revised Code. 2155

(C)(1) Except as provided in division (C)(2) or (3) of this 2156
section, a clinical nurse specialist, certified nurse-midwife, or 2157
certified nurse practitioner may prescribe to a patient a schedule 2158
II controlled substance only if all of the following are the case: 2159

(a) The patient has a terminal condition, as defined in 2160
section 2133.01 of the Revised Code. 2161

(b) The collaborating physician of the clinical nurse 2162
specialist, certified nurse-midwife, or certified nurse 2163
practitioner initially prescribed the substance for the patient. 2164

(c) The prescription is for an amount that does not exceed 2165
the amount necessary for the patient's use in a single, 2166
twenty-four-hour period. 2167

(2) The restrictions on prescriptive authority in division 2168
(C)(1) of this section do not apply if a clinical nurse 2169

specialist, certified nurse-midwife, or certified nurse	2170
practitioner issues the prescription to the patient from any of	2171
the following locations:	2172
(a) A hospital registered under section 3701.07 of the	2173
Revised Code;	2174
(b) An entity owned or controlled, in whole or in part, by a	2175
hospital or by an entity that owns or controls, in whole or in	2176
part, one or more hospitals;	2177
(c) A health care facility operated by the department of	2178
mental health and addiction services or the department of	2179
developmental disabilities;	2180
(d) A nursing home licensed under section 3721.02 of the	2181
Revised Code or by a political subdivision certified under section	2182
3721.09 of the Revised Code;	2183
(e) A county home or district home operated under Chapter	2184
5155. of the Revised Code that is certified under the medicare or	2185
medicaid program;	2186
(f) A hospice care program, as defined in section 3712.01 of	2187
the Revised Code;	2188
(g) A community mental health services provider, as defined	2189
in section 5122.01 of the Revised Code;	2190
(h) An ambulatory surgical facility, as defined in section	2191
3702.30 of the Revised Code;	2192
(i) A freestanding birthing center, as defined in section	2193
3702.141 of the Revised Code;	2194
(j) A federally qualified health center, as defined in	2195
section 3701.047 of the Revised Code;	2196
(k) A federally qualified health center look-alike, as	2197
defined in section 3701.047 of the Revised Code;	2198

(1) A health care office or facility 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;

(m) A site where a medical practice is operated, but only if the practice is comprised of one or more physicians who also are owners of the practice; the practice is organized to provide direct patient care; and the clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner providing services at the site has a standard care arrangement and collaborates with at least one of the physician owners who practices primarily at that site.

(3) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner shall not issue to a patient a prescription for a schedule II controlled substance from a convenience care clinic even if the clinic is owned or operated by an entity specified in division (C)(2) of this section.

(D) A pharmacist who acts in good faith reliance on a prescription issued by a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner under division (C)(2) of this section is not liable for or subject to any of the following for relying on the prescription: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action by the state board of pharmacy under Chapter 4729. of the Revised Code.

(E) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may personally furnish to a patient a sample of any drug or therapeutic device included in the types of drugs and devices listed on the formulary, except that all of the following conditions apply:

(1) The amount of the sample furnished shall not exceed a

seventy-two-hour supply, except when the minimum available 2230
quantity of the sample is packaged in an amount that is greater 2231
than a seventy-two-hour supply, in which case the packaged amount 2232
may be furnished. 2233

(2) No charge may be imposed for the sample or for furnishing 2234
it. 2235

(3) Samples of controlled substances may not be personally 2236
furnished. 2237

(F) A clinical nurse specialist, certified nurse-midwife, or 2238
certified nurse practitioner may personally furnish to a patient a 2239
complete or partial supply of a drug or therapeutic device 2240
included in the types of drugs and devices listed on the 2241
formulary, except that all of the following conditions apply: 2242

(1) The clinical nurse specialist, certified nurse-midwife, 2243
or certified nurse practitioner shall personally furnish only 2244
antibiotics, antifungals, scabicides, contraceptives, prenatal 2245
vitamins, antihypertensives, drugs and devices used in the 2246
treatment of diabetes, drugs and devices used in the treatment of 2247
asthma, and drugs used in the treatment of dyslipidemia. 2248

(2) The clinical nurse specialist, certified nurse-midwife, 2249
or certified nurse practitioner shall not furnish the drugs and 2250
devices in locations other than a health department operated by 2251
the board of health of a city or general health district or the 2252
authority having the duties of a board of health under section 2253
3709.05 of the Revised Code, a federally funded comprehensive 2254
primary care clinic, or a nonprofit health care clinic or program. 2255

(3) The clinical nurse specialist, certified nurse-midwife, 2256
or certified nurse practitioner shall comply with all safety 2257
standards for personally furnishing supplies of drugs and devices, 2258
as established in rules adopted under section 4723.50 of the 2259
Revised Code. 2260

(G) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner shall comply with section 3719.061 of the Revised Code if the nurse prescribes a controlled substance that contains an opioid to a minor, as defined in that section.

Sec. 4723.486. (A) A certificate to prescribe issued under section 4723.48 of the Revised Code that is not issued as an externship certificate is valid for two years, unless otherwise provided in rules adopted under section 4723.50 of the Revised Code or earlier suspended or revoked by the board. The board of nursing shall renew certificates to prescribe according to procedures and a renewal schedule established in rules adopted under section 4723.50 of the Revised Code.

(B) The Except as provided in division (C) of this section, the board may renew a certificate to prescribe if the holder submits to the board all of the following:

(1) Evidence of having completed during the previous two years at least twelve hours of continuing education in advanced pharmacology, or, if the certificate has been held for less than a full renewal period, the number of hours required by the board in rules adopted under section 4723.50 of the Revised Code;

(2) The fee required under section 4723.08 of the Revised Code for renewal of a certificate to prescribe;

(3) Any additional information the board requires pursuant to rules adopted under section 4723.50 of the Revised Code.

(C)(1) Except as provided in division (C)(2) of this section, with respect to a certificate holder who prescribes opioid analgesics or benzodiazepines as part of the holder's regular practice of nursing, the holder shall also submit to the board evidence of having been granted access to the drug database established and maintained by the state board of pharmacy pursuant

to section 4729.75 of the Revised Code. 2291

(2) The requirement in division (C)(1) of this section does 2292
not apply if either of the following is the case: 2293

(a) The state board of pharmacy notifies the board of nursing 2294
pursuant to section 4729.861 of the Revised Code that the 2295
certificate holder has been restricted from obtaining further 2296
information from the drug database. 2297

(b) The state board of pharmacy no longer maintains the drug 2298
database. 2299

(D) The continuing education in pharmacology required under 2300
division (B)(1) of this section must be received from an 2301
accredited institution recognized by the board. The hours of 2302
continuing education required are in addition to any other 2303
continuing education requirement that must be completed pursuant 2304
to this chapter. 2305

Sec. 4723.487. (A) As used in this section, "drug database" 2306
means the database established and maintained by the state board 2307
of pharmacy pursuant to section 4729.75 of the Revised Code. 2308

(B) The Except as provided in divisions (C) and (E) of this 2309
section, an advanced practice registered nurse holding a 2310
certificate to prescribe issued under this chapter shall comply 2311
with all of the following as conditions of prescribing a drug that 2312
is either an opioid analgesic or a benzodiazepine as part of a 2313
patient's course of treatment for a particular condition: 2314

(1) Before initially prescribing the drug, the nurse or the 2315
nurse's delegate shall request from the drug database a report of 2316
information related to the patient that covers at least the twelve 2317
months immediately preceding the date of the request. If the nurse 2318
practices primarily in a county of this state that adjoins another 2319
state, the nurse or delegate also shall request a report of any 2320

information available in the drug database that pertains to 2321
prescriptions issued or drugs furnished to the patient in the 2322
state adjoining that county. 2323

(2) If the patient's course of treatment for the condition 2324
continues for more than ninety days after the initial report is 2325
requested, the nurse or delegate shall make periodic requests for 2326
reports of information from the drug database until the course of 2327
treatment has ended. The requests shall be made at intervals not 2328
exceeding ninety days, determined according to the date the 2329
initial request was made. The request shall be made in the same 2330
manner provided in division (B)(1) of this section for requesting 2331
the initial report of information from the drug database. 2332

(3) On receipt of a report under division (B)(1) or (2) of 2333
this section, the nurse shall assess the information in the 2334
report. The nurse shall document in the patient's record that the 2335
report was received and the information was assessed. 2336

(C) Division (B) of this section does not apply if in any of 2337
the following circumstances: 2338

(1) A drug database report regarding the patient is not 2339
available, in which case the nurse shall document in the patient's 2340
record the reason that the report is not available. 2341

(2) The drug is prescribed in an amount indicated for a 2342
period not to exceed seven days. 2343

(3) The drug is prescribed for the treatment of cancer or 2344
another condition associated with cancer. 2345

(4) The drug is prescribed to a hospice patient in a hospice 2346
care program, as those terms are defined in section 3712.01 of the 2347
Revised Code, or any other patient diagnosed as terminally ill. 2348

(5) The drug is prescribed for administration in a hospital, 2349
nursing home, or residential care facility. 2350

(D) With respect to prescribing any drug that is not an opioid analgesic or a benzodiazepine but is included in the drug database pursuant to rules adopted under section 4729.84 of the Revised Code, the board of nursing shall adopt rules in accordance with Chapter 119. of the Revised Code that establish standards and procedures to be followed by an advanced practice registered nurse with a certificate to prescribe issued under section 4723.48 of the Revised Code regarding the review of patient information available through the drug database under division (A)(5) of section 4729.80 of the Revised Code. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.

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

Sec. 4725.092. (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.

(B) The Except as provided in divisions (C) and (E) of this section, an optometrist holding a therapeutic pharmaceutical agents certificate shall comply with all of the following as conditions of prescribing a drug that is either an opioid analgesic or a benzodiazepine, or personally furnishing a complete or partial supply of such a drug, as part of a patient's course of treatment for a particular condition:

(1) Before initially prescribing or furnishing the drug, the optometrist or the optometrist's delegate shall request from the drug database a report of information related to the patient that covers at least the twelve months immediately preceding the date of the request. If the optometrist practices primarily in a county of this state that adjoins another state, the optometrist or delegate also shall request a report of any information available

in the drug database that pertains to prescriptions issued or 2382
drugs furnished to the patient in the state adjoining that county. 2383

(2) If the patient's course of treatment for the condition 2384
continues for more than ninety days after the initial report is 2385
requested, the optometrist or delegate shall make periodic 2386
requests for reports of information from the drug database until 2387
the course of treatment has ended. The requests shall be made at 2388
intervals not exceeding ninety days, determined according to the 2389
date the initial request was made. The request shall be made in 2390
the same manner provided in division (B)(1) of this section for 2391
requesting the initial report of information from the drug 2392
database. 2393

(3) On receipt of a report under division (B)(1) or (2) of 2394
this section, the optometrist shall assess the information in the 2395
report. The optometrist shall document in the patient's record 2396
that the report was received and the information was assessed. 2397

(C)(1) Division (B) of this section does not apply if a drug 2398
database report regarding the patient is not available. In this 2399
event, the optometrist shall document in the patient's record the 2400
reason that the report is not available. 2401

(2) Division (B) of this section does not apply if the drug 2402
is prescribed or personally furnished in an amount indicated for a 2403
period not to exceed seven days. 2404

(D) With respect to prescribing or personally furnishing any 2405
drug that is not an opioid analgesic or a benzodiazepine but is 2406
included in the drug database pursuant to rules adopted under 2407
section 4729.84 of the Revised Code, the state board of optometry 2408
shall adopt rules in accordance with Chapter 119. of the Revised 2409
Code that establish standards and procedures to be followed by an 2410
optometrist who holds a therapeutic pharmaceutical agents 2411
certificate regarding the review of patient information available 2412

through the drug database under division (A)(5) of section 4729.80 2413
of the Revised Code. The rules shall be adopted in accordance with 2414
Chapter 119. of the Revised Code. 2415

~~(C)~~(E) This section and the rules adopted under it do not 2416
apply if the state board of pharmacy no longer maintains the drug 2417
database. 2418

Sec. 4725.16. (A)(1) Each certificate of licensure, topical 2419
ocular pharmaceutical agents certificate, and therapeutic 2420
pharmaceutical agents certificate issued by the state board of 2421
optometry shall expire annually on the last day of December, and 2422
may be renewed in accordance with this section and the standard 2423
renewal procedure established under Chapter 4745. of the Revised 2424
Code. 2425

(2) An optometrist seeking to continue to practice optometry 2426
shall file with the board an application for license renewal. The 2427
application shall be in such form and require such pertinent 2428
professional biographical data as the board may require. 2429

(3)(a) Except as provided in division (A)(3)(b) of this 2430
section, in the case of an optometrist who holds a topical ocular 2431
pharmaceutical agents certificate and who prescribes or personally 2432
furnishes opioid analgesics or benzodiazepines as part of the 2433
holder's regular practice of optometry, the application shall also 2434
include evidence that the optometrist has been granted access to 2435
the drug database established and maintained by the state board of 2436
pharmacy pursuant to section 4729.75 of the Revised Code. 2437

(b) The requirement in division (A)(3)(a) of this section 2438
does not apply if either of the following is the case: 2439

(i) The state board of pharmacy notifies the state board of 2440
optometry pursuant to section 4729.861 of the Revised Code that 2441
the certificate holder has been restricted from obtaining further 2442

information from the drug database. 2443

(ii) The state board of pharmacy no longer maintains the drug database. 2444
2445

(B) All licensed optometrists shall annually complete 2446
continuing education in subjects relating to the practice of 2447
optometry, to the end that the utilization and application of new 2448
techniques, scientific and clinical advances, and the achievements 2449
of research will assure comprehensive care to the public. The 2450
board shall prescribe by rule the continuing optometric education 2451
that licensed optometrists must complete. The length of study 2452
shall be twenty-five clock hours each year, including ten clock 2453
hours of instruction in pharmacology to be completed by all 2454
licensed optometrists. 2455

Unless the continuing education required under this division 2456
is waived or deferred under division (D) of this section, the 2457
continuing education must be completed during the twelve-month 2458
period beginning on the first day of October and ending on the 2459
last day of September. If the board receives notice from a 2460
continuing education program indicating that an optometrist 2461
completed the program after the last day of September, and the 2462
optometrist wants to use the continuing education completed after 2463
that day to renew the license that expires on the last day of 2464
December of that year, the optometrist shall pay the penalty 2465
specified under section 4725.34 of the Revised Code for late 2466
completion of continuing education. 2467

At least once annually, the board shall post on its web site 2468
and shall mail, or send by electronic mail, to each licensed 2469
optometrist a list of courses approved in accordance with 2470
standards prescribed by board rule. Upon the request of a licensed 2471
optometrist, the executive director of the board shall supply a 2472
list of additional courses that the board has approved subsequent 2473
to the most recent web site posting, electronic mail transmission, 2474

or mailing of the list of approved courses. 2475

(C)(1) Annually, not later than the first day of November, 2476
the board shall mail or send by electronic mail a notice regarding 2477
license renewal to each licensed optometrist who may be eligible 2478
for renewal. The notice shall be sent to the optometrist's most 2479
recent electronic mail or mailing address shown in the board's 2480
records. If the board knows that the optometrist has completed the 2481
required continuing optometric education for the year, the board 2482
may include with the notice an application for license renewal. 2483

(2) Filing a license renewal application with the board shall 2484
serve as notice by the optometrist that the continuing optometric 2485
education requirement has been successfully completed. If the 2486
board finds that an optometrist has not completed the required 2487
continuing optometric education, the board shall disapprove the 2488
optometrist's application. The board's disapproval of renewal is 2489
effective without a hearing, unless a hearing is requested 2490
pursuant to Chapter 119. of the Revised Code. 2491

(3) The board shall refuse to accept an application for 2492
renewal from any applicant whose license is not in good standing 2493
or who is under disciplinary review pursuant to section 4725.19 of 2494
the Revised Code. 2495

(4) Notice of an applicant's failure to qualify for renewal 2496
shall be served upon the applicant by mail. The notice shall be 2497
sent not later than the fifteenth day of November to the 2498
applicant's last address shown in the board's records. 2499

(D) In cases of certified illness or undue hardship, the 2500
board may waive or defer for up to twelve months the requirement 2501
of continuing optometric education, except that in such cases the 2502
board may not waive or defer the continuing education in 2503
pharmacology required to be completed by optometrists who hold 2504
topical ocular pharmaceutical agents certificates or therapeutic 2505

pharmaceutical agents certificates. The board shall waive the 2506
requirement of continuing optometric education for any optometrist 2507
who is serving on active duty in the armed forces of the United 2508
States or a reserve component of the armed forces of the United 2509
States, including the Ohio national guard or the national guard of 2510
any other state or who has received an initial certificate of 2511
licensure during the nine-month period which ended on the last day 2512
of September. 2513

(E) An optometrist whose renewal application has been 2514
approved may renew each certificate held by paying to the 2515
treasurer of state the fees for renewal specified under section 2516
4725.34 of the Revised Code. On payment of all applicable fees, 2517
the board shall issue a renewal of the optometrist's certificate 2518
of licensure, topical ocular pharmaceutical agents certificate, 2519
and therapeutic pharmaceutical agents certificate, as appropriate. 2520

(F) Not later than the fifteenth day of December, the board 2521
shall mail or send by electronic mail a second notice regarding 2522
license renewal to each licensed optometrist who may be eligible 2523
for renewal but did not respond to the notice sent under division 2524
(C)(1) of this section. The notice shall be sent to the 2525
optometrist's most recent electronic mail or mailing address shown 2526
in the board's records. If an optometrist fails to file a renewal 2527
application after the second notice is sent, the board shall send 2528
a third notice regarding license renewal prior to any action under 2529
division (I) of this section to classify the optometrist's 2530
certificates as delinquent. 2531

(G) The failure of an optometrist to apply for license 2532
renewal or the failure to pay the applicable annual renewal fees 2533
on or before the date of expiration, shall automatically work a 2534
forfeiture of the optometrist's authority to practice optometry in 2535
this state. 2536

(H) The board shall accept renewal applications and renewal 2537

fees that are submitted from the first day of January to the last 2538
day of April of the year next succeeding the date of expiration. 2539
An individual who submits such a late renewal application or fee 2540
shall pay the late renewal fee specified in section 4725.34 of the 2541
Revised Code. 2542

(I)(1) If the certificates issued by the board to an 2543
individual have expired and the individual has not filed a 2544
complete application during the late renewal period, the 2545
individual's certificates shall be classified in the board's 2546
records as delinquent. 2547

(2) Any optometrist subject to delinquent classification may 2548
submit a written application to the board for reinstatement. For 2549
reinstatement to occur, the applicant must meet all of the 2550
following conditions: 2551

(a) Submit to the board evidence of compliance with board 2552
rules requiring continuing optometric education in a sufficient 2553
number of hours to make up for any delinquent compliance; 2554

(b) Pay the renewal fees for the year in which application 2555
for reinstatement is made and the reinstatement fee specified 2556
under division (A)(8) of section 4725.34 of the Revised Code; 2557

(c) Pass all or part of the licensing examination accepted by 2558
the board under section 4725.11 of the Revised Code as the board 2559
considers appropriate to determine whether the application for 2560
reinstatement should be approved; 2561

(d) If the applicant has been practicing optometry in another 2562
state or country, submit evidence that the applicant's license to 2563
practice optometry in the other state or country is in good 2564
standing. 2565

(3) The board shall approve an application for reinstatement 2566
if the conditions specified in division (I)(2) of this section are 2567
met. An optometrist who receives reinstatement is subject to the 2568

continuing education requirements specified under division (B) of 2569
this section for the year in which reinstatement occurs. 2570

Sec. 4725.19. (A) In accordance with Chapter 119. of the 2571
Revised Code and by an affirmative vote of a majority of its 2572
members, the state board of optometry, for any of the reasons 2573
specified in division (B) of this section, shall refuse to grant a 2574
certificate of licensure to an applicant and may, with respect to 2575
a licensed optometrist, do one or more of the following: 2576

(1) Suspend the operation of any certificate of licensure, 2577
topical ocular pharmaceutical agents certificate, or therapeutic 2578
pharmaceutical agents certificate, or all certificates granted by 2579
it to the optometrist; 2580

(2) Permanently revoke any or all of the certificates; 2581

(3) Limit or otherwise place restrictions on any or all of 2582
the certificates; 2583

(4) Reprimand the optometrist; 2584

(5) Impose a monetary penalty. If the reason for which the 2585
board is imposing the penalty involves a criminal offense that 2586
carries a fine under the Revised Code, the penalty shall not 2587
exceed the maximum fine that may be imposed for the criminal 2588
offense. In any other case, the penalty imposed by the board shall 2589
not exceed five hundred dollars. 2590

(6) Require the optometrist to take corrective action 2591
courses. 2592

The amount and content of corrective action courses shall be 2593
established by the board in rules adopted under section 4725.09 of 2594
the Revised Code. 2595

(B) The sanctions specified in division (A) of this section 2596
may be taken by the board for any of the following reasons: 2597

(1) Committing fraud in passing the licensing examination or making false or purposely misleading statements in an application for a certificate of licensure;	2598
	2599
	2600
(2) Being at any time guilty of immorality, regardless of the jurisdiction in which the act was committed;	2601
	2602
(3) Being guilty of dishonesty or unprofessional conduct in the practice of optometry;	2603
	2604
(4) Being at any time guilty of a felony, regardless of the jurisdiction in which the act was committed;	2605
	2606
(5) Being at any time guilty of a misdemeanor committed in the course of practice, regardless of the jurisdiction in which the act was committed;	2607
	2608
	2609
(6) Violating the conditions of any limitation or other restriction placed by the board on any certificate issued by the board;	2610
	2611
	2612
(7) Engaging in the practice of optometry as provided in division (A)(1), (2), or (3) of section 4725.01 of the Revised Code when the certificate authorizing that practice is under suspension, in which case the board shall permanently revoke the certificate;	2613
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	2617
(8) Being denied a license to practice optometry in another state or country or being subject to any other sanction by the optometric licensing authority of another state or country, other than sanctions imposed for the nonpayment of fees;	2618
	2619
	2620
	2621
(9) Departing from or failing to conform to acceptable and prevailing standards of care in the practice of optometry as followed by similar practitioners under the same or similar circumstances, regardless of whether actual injury to a patient is established;	2622
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(10) Failing to maintain comprehensive patient records;	2627

(11) Advertising a price of optical accessories, eye examinations, or other products or services by any means that would deceive or mislead the public;	2628 2629 2630
(12) Being addicted to the use of alcohol, stimulants, narcotics, or any other substance which impairs the intellect and judgment to such an extent as to hinder or diminish the performance of the duties included in the person's practice of optometry;	2631 2632 2633 2634 2635
(13) Engaging in the practice of optometry as provided in division (A)(2) or (3) of section 4725.01 of the Revised Code without authority to do so or, if authorized, in a manner inconsistent with the authority granted;	2636 2637 2638 2639
(14) Failing to make a report to the board as required by division (A) of section 4725.21 or section 4725.31 of the Revised Code;	2640 2641 2642
(15) Soliciting patients from door to door or establishing temporary offices, in which case the board shall suspend all certificates held by the optometrist;	2643 2644 2645
(16) <u>Failing to comply with section 4725.092 of the Revised Code, unless the state board of pharmacy no longer maintains a drug database pursuant to section 4729.75 of the Revised Code;</u>	2646 2647 2648
<u>(17)</u> Except as provided in division (D) of this section:	2649
(a) Waiving the payment of all or any part of a deductible or copayment that a patient, pursuant to a health insurance or health care policy, contract, or plan that covers optometric services, would otherwise be required to pay if the waiver is used as an enticement to a patient or group of patients to receive health care services from that optometrist.	2650 2651 2652 2653 2654 2655
(b) Advertising that the optometrist will waive the payment of all or any part of a deductible or copayment that a patient,	2656 2657

pursuant to a health insurance or health care policy, contract, or 2658
plan that covers optometric services, would otherwise be required 2659
to pay. 2660

(C) Any person who is the holder of a certificate of 2661
licensure, or who is an applicant for a certificate of licensure 2662
against whom is preferred any charges, shall be furnished by the 2663
board with a copy of the complaint and shall have a hearing before 2664
the board in accordance with Chapter 119. of the Revised Code. 2665

(D) Sanctions shall not be imposed under division (B)~~(16)~~(17) 2666
of this section against any optometrist who waives deductibles and 2667
copayments: 2668

(1) In compliance with the health benefit plan that expressly 2669
allows such a practice. Waiver of the deductibles or copayments 2670
shall be made only with the full knowledge and consent of the plan 2671
purchaser, payer, and third-party administrator. Documentation of 2672
the consent shall be made available to the board upon request. 2673

(2) For professional services rendered to any other 2674
optometrist licensed by the board, to the extent allowed by 2675
sections 4725.01 to 4725.34 of the Revised Code and the rules of 2676
the board. 2677

Sec. 4725.191. (A) For the initial violation of section 2678
3719.061 of the Revised Code by an optometrist, the state board of 2679
optometry, by an affirmative vote of not fewer than six members, 2680
may impose a fine not to exceed twenty thousand dollars. For each 2681
subsequent violation of that section, the board, by an affirmative 2682
vote of not fewer than six members, may impose an additional fine 2683
not to exceed twenty thousand dollars, suspend for not less than 2684
six months the operation of the optometrist's certificate of 2685
licensure and therapeutic pharmaceutical agents certificate, or 2686
both. 2687

(B) Disciplinary action under this section shall be taken 2688
pursuant to an adjudication conducted under Chapter 119. of the 2689
Revised Code. 2690

Sec. 4729.12. An identification card issued by the state 2691
board of pharmacy under section 4729.08 of the Revised Code 2692
entitles the individual to whom it is issued to practice as a 2693
pharmacist or as a pharmacy intern in this state until the next 2694
annual renewal date. 2695

Identification cards shall be renewed annually on the 2696
fifteenth day of September, according to the standard renewal 2697
procedure of Chapter 4745. of the Revised Code. 2698

Each pharmacist and pharmacy intern shall carry the 2699
identification card or renewal identification card while engaged 2700
in the practice of pharmacy. The license shall be conspicuously 2701
exposed at the principal place where the pharmacist or pharmacy 2702
intern practices pharmacy. 2703

A pharmacist or pharmacy intern who desires to continue in 2704
the practice of pharmacy shall file with the board an application 2705
in such form and containing such data as the board may require for 2706
renewal of an identification card. An application filed under this 2707
section may not be withdrawn without the approval of the board. If 2708
the board finds that the applicant's card has not been revoked or 2709
placed under suspension and that the applicant has paid the 2710
renewal fee, has continued pharmacy education in accordance with 2711
the rules of the board, has been granted access to the drug 2712
database established and maintained by the board pursuant to 2713
section 4729.75 of the Revised Code (unless the board has 2714
restricted the applicant from obtaining any further information 2715
from the database or the board no longer maintains the database), 2716
and is entitled to continue in the practice of pharmacy, the board 2717
shall issue a renewal identification card to the applicant. 2718

When an identification card has lapsed for more than sixty 2719
days but application is made within three years after the 2720
expiration of the card, the applicant shall be issued a renewal 2721
identification card without further examination if the applicant 2722
meets the requirements of this section and pays the fee designated 2723
under division (E) of section 4729.15 of the Revised Code. 2724

Sec. 4729.75. (A) The state board of pharmacy may establish 2725
and maintain a drug database. The board shall use the drug 2726
database to monitor the misuse and diversion of controlled 2727
substances, as defined in section 3719.01 of the Revised Code, and 2728
other dangerous drugs the board includes in the database pursuant 2729
to rules adopted under section 4729.84 of the Revised Code. In 2730
establishing and maintaining the database, the board shall 2731
electronically collect information pursuant to sections 4729.77 2732
and 4729.79 of the Revised Code and shall disseminate information 2733
as authorized or required by sections 4729.80 and 4729.81 of the 2734
Revised Code. The board's collection and dissemination of 2735
information shall be conducted in accordance with rules adopted 2736
under section 4729.84 of the Revised Code. 2737

(B) In addition to using the drug database as provided in 2738
division (A) of this section, the board may use the database for 2739
the collection of other health information to be transmitted to 2740
the department of health in accordance with section 4729.87 of the 2741
Revised Code. 2742

(C) Sections 4729.76 to 4729.86 and 4729.861 of the Revised 2743
Code apply only to the use of the drug database as provided in 2744
division (A) of this section. Section 4729.87 of the Revised Code 2745
applies only to the use of the drug database as provided in 2746
division (B) of this section. 2747

Sec. 4729.80. (A) If the state board of pharmacy establishes 2748

and maintains a drug database pursuant to section 4729.75 of the Revised Code, the board is authorized or required to provide information from the database in accordance with the following:

(1) On receipt of a request from a designated representative of a government entity responsible for the licensure, regulation, or discipline of health care professionals with authority to prescribe, administer, or dispense drugs, the board may provide to the representative information from the database relating to the professional who is the subject of an active investigation being conducted by the government entity.

(2) On receipt of a request from a federal officer, or a state or local officer of this or any other state, whose duties include enforcing laws relating to drugs, the board shall provide to the officer information from the database relating to the person who is the subject of an active investigation of a drug abuse offense, as defined in section 2925.01 of the Revised Code, being conducted by the officer's employing government entity.

(3) Pursuant to a subpoena issued by a grand jury, the board shall provide to the grand jury information from the database relating to the person who is the subject of an investigation being conducted by the grand jury.

(4) Pursuant to a subpoena, search warrant, or court order in connection with the investigation or prosecution of a possible or alleged criminal offense, the board shall provide information from the database as necessary to comply with the subpoena, search warrant, or court order.

(5) On receipt of a request from a prescriber or the prescriber's delegate approved by the board, the board ~~may~~ shall provide to the prescriber a report of information from the database relating to a patient who is either ~~of the following~~ a current patient of the prescriber or a potential patient of the

~~prescriber based on a referral of the patient to the prescriber,~~ 2780
~~if the prescriber certifies in a form specified by the board that~~ 2781
~~it is for the purpose of providing medical treatment to the~~ 2782
~~patient who is the subject of the request~~ all of the following 2783
conditions are met: 2784

(a) ~~A current patient of the prescriber~~ The prescriber 2785
certifies in a form specified by the board that it is for the 2786
purpose of providing medical treatment to the patient who is the 2787
subject of the request; 2788

(b) ~~A potential patient of the prescriber based on a referral~~ 2789
~~of the patient to the prescriber~~ The prescriber has not been 2790
denied access to the database by the board. 2791

(6) On receipt of a request from a pharmacist or the 2792
pharmacist's delegate approved by the board, the board ~~may~~ shall 2793
provide to the pharmacist information from the database relating 2794
to a current patient of the pharmacist, if the pharmacist 2795
certifies in a form specified by the board that it is for the 2796
purpose of the pharmacist's practice of pharmacy involving the 2797
patient who is the subject of the request and the pharmacist has 2798
not been denied access to the database by the board. 2799

(7) On receipt of a request from an individual seeking the 2800
individual's own database information in accordance with the 2801
procedure established in rules adopted under section 4729.84 of 2802
the Revised Code, the board may provide to the individual the 2803
individual's own database information. 2804

(8) On receipt of a request from the medical director of a 2805
managed care organization that has entered into a contract with 2806
the department of medicaid under section 5167.10 of the Revised 2807
Code and a data security agreement with the board required by 2808
section 5167.14 of the Revised Code, the board shall provide to 2809
the medical director information from the database relating to a 2810

medicaid recipient enrolled in the managed care organization, 2811
including information in the database related to prescriptions for 2812
the recipient that were not covered or reimbursed under a program 2813
administered by the department of medicaid, if the medicaid 2814
director confirms, upon request from the board, that the medicaid 2815
recipient is enrolled in the managed care organization. 2816

(9) On receipt of a request from the medicaid director, the 2817
board shall provide to the director information from the database 2818
relating to a recipient of a program administered by the 2819
department of medicaid, including information in the database 2820
related to prescriptions for the recipient that were not covered 2821
or paid by a program administered by the department. 2822

(10) On receipt of a request from the medical director of a 2823
managed care organization that has entered into a contract with 2824
the administrator of workers' compensation under division (B)(4) 2825
of section 4121.44 of the Revised Code and a data security 2826
agreement with the board required by section 4121.443 of the 2827
Revised Code, the board shall provide to the medical director 2828
information from the database relating to a claimant under Chapter 2829
4121., 4123., 4127., or 4131. of the Revised Code assigned to the 2830
managed care organization, including information in the database 2831
related to prescriptions for the claimant that were not covered or 2832
reimbursed under Chapter 4121., 4123., 4127., or 4131. of the 2833
Revised Code, if the administrator of workers' compensation 2834
confirms, upon request from the board, that the claimant is 2835
assigned to the managed care organization. 2836

(11) On receipt of a request from the administrator of 2837
workers' compensation, the board ~~may~~ shall provide to the 2838
administrator information from the database relating to a claimant 2839
under Chapter 4121., 4123., 4127., or 4131. of the Revised Code, 2840
including information in the database related to prescriptions for 2841
the claimant that were not covered or reimbursed under Chapter 2842

4121., 4123., 4127., or 4131. of the Revised Code. 2843

~~(11)~~(12) On receipt of a request from a prescriber or the 2844
prescriber's delegate approved by the board, the board shall 2845
provide to the prescriber information from the database relating 2846
to a patient's mother, if the prescriber certifies in a form 2847
specified by the board that it is for the purpose of providing 2848
medical treatment to a newborn or infant patient diagnosed as 2849
opioid dependent and the prescriber has not been denied access to 2850
the database by the board. 2851

(13) On receipt of a request from a requestor described in 2852
division (A)(1), (2), (5), or (6) of this section who is from or 2853
participating with another state's prescription monitoring 2854
program, the board may provide to the requestor information from 2855
the database, but only if there is a written agreement under which 2856
the information is to be used and disseminated according to the 2857
laws of this state. 2858

(B) The state board of pharmacy shall maintain a record of 2859
each individual or entity that requests information from the 2860
database pursuant to this section. In accordance with rules 2861
adopted under section 4729.84 of the Revised Code, the board may 2862
use the records to document and report statistics and law 2863
enforcement outcomes. 2864

The board may provide records of an individual's requests for 2865
database information to the following: 2866

(1) A designated representative of a government entity that 2867
is responsible for the licensure, regulation, or discipline of 2868
health care professionals with authority to prescribe, administer, 2869
or dispense drugs who is involved in an active investigation being 2870
conducted by the government entity of the individual who submitted 2871
the requests for database information; 2872

(2) A federal officer, or a state or local officer of this or 2873

any other state, whose duties include enforcing laws relating to 2874
drugs and who is involved in an active investigation being 2875
conducted by the officer's employing government entity of the 2876
individual who submitted the requests for database information. 2877

(C) Information contained in the database and any information 2878
obtained from it is not a public record. Information contained in 2879
the records of requests for information from the database is not a 2880
public record. Information that does not identify a person may be 2881
released in summary, statistical, or aggregate form. 2882

(D) A pharmacist or prescriber shall not be held liable in 2883
damages to any person in any civil action for injury, death, or 2884
loss to person or property on the basis that the pharmacist or 2885
prescriber did or did not seek or obtain information from the 2886
database. 2887

Sec. 4729.86. If the state board of pharmacy establishes and 2888
maintains a drug database pursuant to section 4729.75 of the 2889
Revised Code, all of the following apply: 2890

(A)(1) No person identified in divisions (A)(1) to ~~(10)~~(12) 2891
or (B) of section 4729.80 of the Revised Code shall disseminate 2892
any written or electronic information the person receives from the 2893
drug database or otherwise provide another person access to the 2894
information that the person receives from the database, except as 2895
follows: 2896

(a) When necessary in the investigation or prosecution of a 2897
possible or alleged criminal offense; 2898

(b) When a person provides the information to the prescriber 2899
or pharmacist for whom the person is approved by the board to 2900
serve as a delegate of the prescriber or pharmacist for purposes 2901
of requesting and receiving information from the drug database 2902
under division (A)(5) or (6) of section 4729.80 of the Revised 2903

Code; 2904

(c) When a prescriber or pharmacist provides the information 2905
to a person who is approved by the board to serve as such a 2906
delegate of the prescriber or pharmacist. 2907

(2) No person shall provide false information to the state 2908
board of pharmacy with the intent to obtain or alter information 2909
contained in the drug database. 2910

(3) No person shall obtain drug database information by any 2911
means except as provided under section 4729.80 or 4729.81 of the 2912
Revised Code. 2913

(B) A person shall not use information obtained pursuant to 2914
division (A) of section 4729.80 of the Revised Code as evidence in 2915
any civil or administrative proceeding. 2916

(C)(1) The Except as provided in division (C)(2) of this 2917
section, after providing notice and affording an opportunity for a 2918
hearing in accordance with Chapter 119. of the Revised Code, the 2919
board may restrict a person from obtaining further information 2920
from the drug database if any of the following is the case: 2921

(a) The person violates division (A)(1), (2), or (3) of this 2922
section; 2923

(b) The person is a requestor identified in division 2924
(A)~~(11)~~(13) of section 4729.80 of the Revised Code and the board 2925
determines that the person's actions in another state would have 2926
constituted a violation of division (A)(1), (2), or (3) of this 2927
section; 2928

(c) The person fails to comply with division (B) of this 2929
section, regardless of the jurisdiction in which the failure to 2930
comply occurred; 2931

(d) The person creates, by clear and convincing evidence, a 2932
threat to the security of information contained in the database. 2933

(2) If the board determines that allegations regarding a person's actions warrant restricting the person from obtaining further information from the drug database without a prior hearing, the board may summarily impose the restriction. A telephone conference call may be used for reviewing the allegations and taking a vote on the summary restriction. The summary restriction shall remain in effect, unless removed by the board, until the board's final adjudication order becomes effective. 2934
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(3) The board shall determine the extent to which the person is restricted from obtaining further information from the database. 2943
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Sec. 4729.861. If the state board of pharmacy establishes and maintains a drug database pursuant to section 4729.75 of the Revised Code and if the board restricts a prescriber from obtaining further information from the database pursuant to division (C) of section 4729.86 of the Revised Code, the board shall notify the government entity responsible for licensing the prescriber. 2946
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Sec. 4729.87. (A) If the state board of pharmacy establishes and maintains a drug database pursuant to section 4729.75 of the Revised Code, the board may use the database as a means for the collection of any health information submitted by any of the entities required to submit drug-related information under sections 4729.76 to 4729.86 of the Revised Code. Any health information received under this section is not a public record and shall not be released by the board other than for purposes of transmitting the information to the department of health as provided in this section and the rules adopted under it. 2953
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(B) The board and department shall collaborate in determining 2963

the health information that may be collected by the board through 2964
the database and transmitted to the department. The information 2965
may include records of immunizations administered by pharmacists 2966
and pharmacy interns pursuant to section 4729.41 of the Revised 2967
Code for inclusion in any immunization registry established and 2968
maintained by the department. 2969

(C) The board shall adopt rules as necessary to implement 2970
this section. In adopting the rules, the board shall consult with 2971
the department. The rules shall be adopted in accordance with 2972
Chapter 119. of the Revised Code. 2973

Sec. ~~4729.87~~ 4729.91. The state board of pharmacy shall 2974
comply with section 4776.20 of the Revised Code. 2975

Sec. 4730.25. (A) The state medical board, by an affirmative 2976
vote of not fewer than six members, may revoke or may refuse to 2977
grant a certificate to practice as a physician assistant or a 2978
certificate to prescribe to a person found by the board to have 2979
committed fraud, misrepresentation, or deception in applying for 2980
or securing the certificate. 2981

(B) The board, by an affirmative vote of not fewer than six 2982
members, shall, to the extent permitted by law, limit, revoke, or 2983
suspend an individual's certificate to practice as a physician 2984
assistant or certificate to prescribe, refuse to issue a 2985
certificate to an applicant, refuse to reinstate a certificate, or 2986
reprimand or place on probation the holder of a certificate for 2987
any of the following reasons: 2988

(1) Failure to practice in accordance with the conditions 2989
under which the supervising physician's supervision agreement with 2990
the physician assistant was approved, including the requirement 2991
that when practicing under a particular supervising physician, the 2992
physician assistant must practice only according to the physician 2993

supervisory plan the board approved for that physician or the 2994
policies of the health care facility in which the supervising 2995
physician and physician assistant are practicing; 2996

(2) Failure to comply with the requirements of this chapter, 2997
Chapter 4731. of the Revised Code, or any rules adopted by the 2998
board; 2999

(3) Violating or attempting to violate, directly or 3000
indirectly, or assisting in or abetting the violation of, or 3001
conspiring to violate, any provision of this chapter, Chapter 3002
4731. of the Revised Code, or the rules adopted by the board; 3003

(4) Inability to practice according to acceptable and 3004
prevailing standards of care by reason of mental illness or 3005
physical illness, including physical deterioration that adversely 3006
affects cognitive, motor, or perceptive skills; 3007

(5) Impairment of ability to practice according to acceptable 3008
and prevailing standards of care because of habitual or excessive 3009
use or abuse of drugs, alcohol, or other substances that impair 3010
ability to practice; 3011

(6) Administering drugs for purposes other than those 3012
authorized under this chapter; 3013

(7) Willfully betraying a professional confidence; 3014

(8) Making a false, fraudulent, deceptive, or misleading 3015
statement in soliciting or advertising for employment as a 3016
physician assistant; in connection with any solicitation or 3017
advertisement for patients; in relation to the practice of 3018
medicine as it pertains to physician assistants; or in securing or 3019
attempting to secure a certificate to practice as a physician 3020
assistant, a certificate to prescribe, or approval of a 3021
supervision agreement. 3022

As used in this division, "false, fraudulent, deceptive, or 3023

misleading statement" means a statement that includes a 3024
misrepresentation of fact, is likely to mislead or deceive because 3025
of a failure to disclose material facts, is intended or is likely 3026
to create false or unjustified expectations of favorable results, 3027
or includes representations or implications that in reasonable 3028
probability will cause an ordinarily prudent person to 3029
misunderstand or be deceived. 3030

(9) Representing, with the purpose of obtaining compensation 3031
or other advantage personally or for any other person, that an 3032
incurable disease or injury, or other incurable condition, can be 3033
permanently cured; 3034

(10) The obtaining of, or attempting to obtain, money or 3035
anything of value by fraudulent misrepresentations in the course 3036
of practice; 3037

(11) A plea of guilty to, a judicial finding of guilt of, or 3038
a judicial finding of eligibility for intervention in lieu of 3039
conviction for, a felony; 3040

(12) Commission of an act that constitutes a felony in this 3041
state, regardless of the jurisdiction in which the act was 3042
committed; 3043

(13) A plea of guilty to, a judicial finding of guilt of, or 3044
a judicial finding of eligibility for intervention in lieu of 3045
conviction for, a misdemeanor committed in the course of practice; 3046

(14) A plea of guilty to, a judicial finding of guilt of, or 3047
a judicial finding of eligibility for intervention in lieu of 3048
conviction for, a misdemeanor involving moral turpitude; 3049

(15) Commission of an act in the course of practice that 3050
constitutes a misdemeanor in this state, regardless of the 3051
jurisdiction in which the act was committed; 3052

(16) Commission of an act involving moral turpitude that 3053

constitutes a misdemeanor in this state, regardless of the 3054
jurisdiction in which the act was committed; 3055

(17) A plea of guilty to, a judicial finding of guilt of, or 3056
a judicial finding of eligibility for intervention in lieu of 3057
conviction for violating any state or federal law regulating the 3058
possession, distribution, or use of any drug, including 3059
trafficking in drugs; 3060

(18) Any of the following actions taken by the state agency 3061
responsible for regulating the practice of physician assistants in 3062
another state, for any reason other than the nonpayment of fees: 3063
the limitation, revocation, or suspension of an individual's 3064
license to practice; acceptance of an individual's license 3065
surrender; denial of a license; refusal to renew or reinstate a 3066
license; imposition of probation; or issuance of an order of 3067
censure or other reprimand; 3068

(19) A departure from, or failure to conform to, minimal 3069
standards of care of similar physician assistants under the same 3070
or similar circumstances, regardless of whether actual injury to a 3071
patient is established; 3072

(20) Violation of the conditions placed by the board on a 3073
certificate to practice as a physician assistant, a certificate to 3074
prescribe, a physician supervisory plan, or supervision agreement; 3075

(21) Failure to use universal blood and body fluid 3076
precautions established by rules adopted under section 4731.051 of 3077
the Revised Code; 3078

(22) Failure to cooperate in an investigation conducted by 3079
the board under section 4730.26 of the Revised Code, including 3080
failure to comply with a subpoena or order issued by the board or 3081
failure to answer truthfully a question presented by the board at 3082
a deposition or in written interrogatories, except that failure to 3083
cooperate with an investigation shall not constitute grounds for 3084

discipline under this section if a court of competent jurisdiction 3085
has issued an order that either quashes a subpoena or permits the 3086
individual to withhold the testimony or evidence in issue; 3087

(23) Assisting suicide as defined in section 3795.01 of the 3088
Revised Code; 3089

(24) Prescribing any drug or device to perform or induce an 3090
abortion, or otherwise performing or inducing an abortion; 3091

(25) Failure to comply with section 4730.53 of the Revised 3092
Code, unless the board no longer maintains a drug database 3093
pursuant to section 4729.75 of the Revised Code. 3094

(C) Disciplinary actions taken by the board under divisions 3095
(A) and (B) of this section shall be taken pursuant to an 3096
adjudication under Chapter 119. of the Revised Code, except that 3097
in lieu of an adjudication, the board may enter into a consent 3098
agreement with a physician assistant or applicant to resolve an 3099
allegation of a violation of this chapter or any rule adopted 3100
under it. A consent agreement, when ratified by an affirmative 3101
vote of not fewer than six members of the board, shall constitute 3102
the findings and order of the board with respect to the matter 3103
addressed in the agreement. If the board refuses to ratify a 3104
consent agreement, the admissions and findings contained in the 3105
consent agreement shall be of no force or effect. 3106

(D) For purposes of divisions (B)(12), (15), and (16) of this 3107
section, the commission of the act may be established by a finding 3108
by the board, pursuant to an adjudication under Chapter 119. of 3109
the Revised Code, that the applicant or certificate holder 3110
committed the act in question. The board shall have no 3111
jurisdiction under these divisions in cases where the trial court 3112
renders a final judgment in the certificate holder's favor and 3113
that judgment is based upon an adjudication on the merits. The 3114
board shall have jurisdiction under these divisions in cases where 3115

the trial court issues an order of dismissal upon technical or 3116
procedural grounds. 3117

(E) The sealing of conviction records by any court shall have 3118
no effect upon a prior board order entered under the provisions of 3119
this section or upon the board's jurisdiction to take action under 3120
the provisions of this section if, based upon a plea of guilty, a 3121
judicial finding of guilt, or a judicial finding of eligibility 3122
for intervention in lieu of conviction, the board issued a notice 3123
of opportunity for a hearing prior to the court's order to seal 3124
the records. The board shall not be required to seal, destroy, 3125
redact, or otherwise modify its records to reflect the court's 3126
sealing of conviction records. 3127

(F) For purposes of this division, any individual who holds a 3128
certificate issued under this chapter, or applies for a 3129
certificate issued under this chapter, shall be deemed to have 3130
given consent to submit to a mental or physical examination when 3131
directed to do so in writing by the board and to have waived all 3132
objections to the admissibility of testimony or examination 3133
reports that constitute a privileged communication. 3134

(1) In enforcing division (B)(4) of this section, the board, 3135
upon a showing of a possible violation, may compel any individual 3136
who holds a certificate issued under this chapter or who has 3137
applied for a certificate pursuant to this chapter to submit to a 3138
mental examination, physical examination, including an HIV test, 3139
or both a mental and physical examination. The expense of the 3140
examination is the responsibility of the individual compelled to 3141
be examined. Failure to submit to a mental or physical examination 3142
or consent to an HIV test ordered by the board constitutes an 3143
admission of the allegations against the individual unless the 3144
failure is due to circumstances beyond the individual's control, 3145
and a default and final order may be entered without the taking of 3146
testimony or presentation of evidence. If the board finds a 3147

physician assistant unable to practice because of the reasons set 3148
forth in division (B)(4) of this section, the board shall require 3149
the physician assistant to submit to care, counseling, or 3150
treatment by physicians approved or designated by the board, as a 3151
condition for an initial, continued, reinstated, or renewed 3152
certificate. An individual affected under this division shall be 3153
afforded an opportunity to demonstrate to the board the ability to 3154
resume practicing in compliance with acceptable and prevailing 3155
standards of care. 3156

(2) For purposes of division (B)(5) of this section, if the 3157
board has reason to believe that any individual who holds a 3158
certificate issued under this chapter or any applicant for a 3159
certificate suffers such impairment, the board may compel the 3160
individual to submit to a mental or physical examination, or both. 3161
The expense of the examination is the responsibility of the 3162
individual compelled to be examined. Any mental or physical 3163
examination required under this division shall be undertaken by a 3164
treatment provider or physician qualified to conduct such 3165
examination and chosen by the board. 3166

Failure to submit to a mental or physical examination ordered 3167
by the board constitutes an admission of the allegations against 3168
the individual unless the failure is due to circumstances beyond 3169
the individual's control, and a default and final order may be 3170
entered without the taking of testimony or presentation of 3171
evidence. If the board determines that the individual's ability to 3172
practice is impaired, the board shall suspend the individual's 3173
certificate or deny the individual's application and shall require 3174
the individual, as a condition for initial, continued, reinstated, 3175
or renewed certification to practice or prescribe, to submit to 3176
treatment. 3177

Before being eligible to apply for reinstatement of a 3178
certificate suspended under this division, the physician assistant 3179

shall demonstrate to the board the ability to resume practice or 3180
prescribing in compliance with acceptable and prevailing standards 3181
of care. The demonstration shall include the following: 3182

(a) Certification from a treatment provider approved under 3183
section 4731.25 of the Revised Code that the individual has 3184
successfully completed any required inpatient treatment; 3185

(b) Evidence of continuing full compliance with an aftercare 3186
contract or consent agreement; 3187

(c) Two written reports indicating that the individual's 3188
ability to practice has been assessed and that the individual has 3189
been found capable of practicing according to acceptable and 3190
prevailing standards of care. The reports shall be made by 3191
individuals or providers approved by the board for making such 3192
assessments and shall describe the basis for their determination. 3193

The board may reinstate a certificate suspended under this 3194
division after such demonstration and after the individual has 3195
entered into a written consent agreement. 3196

When the impaired physician assistant resumes practice or 3197
prescribing, the board shall require continued monitoring of the 3198
physician assistant. The monitoring shall include compliance with 3199
the written consent agreement entered into before reinstatement or 3200
with conditions imposed by board order after a hearing, and, upon 3201
termination of the consent agreement, submission to the board for 3202
at least two years of annual written progress reports made under 3203
penalty of falsification stating whether the physician assistant 3204
has maintained sobriety. 3205

(G) If the secretary and supervising member determine that 3206
there is clear and convincing evidence that a physician assistant 3207
has violated division (B) of this section and that the 3208
individual's continued practice or prescribing presents a danger 3209
of immediate and serious harm to the public, they may recommend 3210

that the board suspend the individual's certificate to practice or 3211
prescribe without a prior hearing. Written allegations shall be 3212
prepared for consideration by the board. 3213

The board, upon review of those allegations and by an 3214
affirmative vote of not fewer than six of its members, excluding 3215
the secretary and supervising member, may suspend a certificate 3216
without a prior hearing. A telephone conference call may be 3217
utilized for reviewing the allegations and taking the vote on the 3218
summary suspension. 3219

The board shall issue a written order of suspension by 3220
certified mail or in person in accordance with section 119.07 of 3221
the Revised Code. The order shall not be subject to suspension by 3222
the court during pendency of any appeal filed under section 119.12 3223
of the Revised Code. If the physician assistant requests an 3224
adjudicatory hearing by the board, the date set for the hearing 3225
shall be within fifteen days, but not earlier than seven days, 3226
after the physician assistant requests the hearing, unless 3227
otherwise agreed to by both the board and the certificate holder. 3228

A summary suspension imposed under this division shall remain 3229
in effect, unless reversed on appeal, until a final adjudicative 3230
order issued by the board pursuant to this section and Chapter 3231
119. of the Revised Code becomes effective. The board shall issue 3232
its final adjudicative order within sixty days after completion of 3233
its hearing. Failure to issue the order within sixty days shall 3234
result in dissolution of the summary suspension order, but shall 3235
not invalidate any subsequent, final adjudicative order. 3236

(H) If the board takes action under division (B)(11), (13), 3237
or (14) of this section, and the judicial finding of guilt, guilty 3238
plea, or judicial finding of eligibility for intervention in lieu 3239
of conviction is overturned on appeal, upon exhaustion of the 3240
criminal appeal, a petition for reconsideration of the order may 3241
be filed with the board along with appropriate court documents. 3242

Upon receipt of a petition and supporting court documents, the 3243
board shall reinstate the certificate to practice or prescribe. 3244
The board may then hold an adjudication under Chapter 119. of the 3245
Revised Code to determine whether the individual committed the act 3246
in question. Notice of opportunity for hearing shall be given in 3247
accordance with Chapter 119. of the Revised Code. If the board 3248
finds, pursuant to an adjudication held under this division, that 3249
the individual committed the act, or if no hearing is requested, 3250
it may order any of the sanctions identified under division (B) of 3251
this section. 3252

(I) The certificate to practice issued to a physician 3253
assistant and the physician assistant's practice in this state are 3254
automatically suspended as of the date the physician assistant 3255
pleads guilty to, is found by a judge or jury to be guilty of, or 3256
is subject to a judicial finding of eligibility for intervention 3257
in lieu of conviction in this state or treatment or intervention 3258
in lieu of conviction in another state for any of the following 3259
criminal offenses in this state or a substantially equivalent 3260
criminal offense in another jurisdiction: aggravated murder, 3261
murder, voluntary manslaughter, felonious assault, kidnapping, 3262
rape, sexual battery, gross sexual imposition, aggravated arson, 3263
aggravated robbery, or aggravated burglary. Continued practice 3264
after the suspension shall be considered practicing without a 3265
certificate. 3266

The board shall notify the individual subject to the 3267
suspension by certified mail or in person in accordance with 3268
section 119.07 of the Revised Code. If an individual whose 3269
certificate is suspended under this division fails to make a 3270
timely request for an adjudication under Chapter 119. of the 3271
Revised Code, the board shall enter a final order permanently 3272
revoking the individual's certificate to practice. 3273

(J) In any instance in which the board is required by Chapter 3274

119. of the Revised Code to give notice of opportunity for hearing 3275
and the individual subject to the notice does not timely request a 3276
hearing in accordance with section 119.07 of the Revised Code, the 3277
board is not required to hold a hearing, but may adopt, by an 3278
affirmative vote of not fewer than six of its members, a final 3279
order that contains the board's findings. In that final order, the 3280
board may order any of the sanctions identified under division (A) 3281
or (B) of this section. 3282

(K) Any action taken by the board under division (B) of this 3283
section resulting in a suspension shall be accompanied by a 3284
written statement of the conditions under which the physician 3285
assistant's certificate may be reinstated. The board shall adopt 3286
rules in accordance with Chapter 119. of the Revised Code 3287
governing conditions to be imposed for reinstatement. 3288
Reinstatement of a certificate suspended pursuant to division (B) 3289
of this section requires an affirmative vote of not fewer than six 3290
members of the board. 3291

(L) When the board refuses to grant to an applicant a 3292
certificate to practice as a physician assistant or a certificate 3293
to prescribe, revokes an individual's certificate, refuses to 3294
issue a certificate, or refuses to reinstate an individual's 3295
certificate, the board may specify that its action is permanent. 3296
An individual subject to a permanent action taken by the board is 3297
forever thereafter ineligible to hold the certificate and the 3298
board shall not accept an application for reinstatement of the 3299
certificate or for issuance of a new certificate. 3300

(M) Notwithstanding any other provision of the Revised Code, 3301
all of the following apply: 3302

(1) The surrender of a certificate issued under this chapter 3303
is not effective unless or until accepted by the board. 3304
Reinstatement of a certificate surrendered to the board requires 3305
an affirmative vote of not fewer than six members of the board. 3306

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

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

Sec. 4730.252. (A) For the initial violation of section 3719.061 of the Revised Code by a physician assistant, the state medical board, by an affirmative vote of not fewer than six members, may impose a fine not to exceed twenty thousand dollars. For each subsequent violation of that section, the board, by an affirmative vote of not fewer than six members, may impose an additional fine not to exceed twenty thousand dollars, suspend for not less than six months the physician assistant's certificate to practice and certificate to prescribe, or both.

(B) Except as specified in division (J) of section 4730.25 of the Revised Code, disciplinary action under this section shall be taken pursuant to an adjudication conducted under Chapter 119. of the Revised Code.

Sec. 4730.41. (A) A certificate to prescribe issued under this chapter authorizes a physician assistant to prescribe and personally furnish drugs and therapeutic devices in the exercise of physician-delegated prescriptive authority.

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

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

authority. 3337

(2) The physician assistant shall comply with all conditions 3338
placed on the physician-delegated prescriptive authority, as 3339
specified by the supervising physician who is supervising the 3340
physician assistant in the exercise of physician-delegated 3341
prescriptive authority. 3342

(3) If the physician assistant possesses physician-delegated 3343
prescriptive authority for controlled substances, the physician 3344
assistant shall register with the federal drug enforcement 3345
administration. 3346

(4) If the physician assistant possesses physician-delegated 3347
prescriptive authority for schedule II controlled substances, the 3348
physician assistant shall comply with section 4730.411 of the 3349
Revised Code. 3350

(5) If the physician assistant prescribes a controlled 3351
substance that contains an opioid to a minor, the physician 3352
assistant shall comply with section 3719.061 of the Revised Code. 3353
As used in this division, "minor" has the same meaning as in 3354
section 3719.061 of the Revised Code. 3355

Sec. 4730.48. (A)(1) Except in the case of a provisional 3356
certificate to prescribe, a physician assistant's certificate to 3357
prescribe expires on the same date as the physician assistant's 3358
certificate to practice as a physician assistant, as provided in 3359
section 4730.14 of the Revised Code. The certificate to prescribe 3360
may be renewed in accordance with this section. 3361

(2) A person seeking to renew a certificate to prescribe 3362
shall, on or before the thirty-first day of January of each 3363
even-numbered year, apply for renewal of the certificate. The 3364
state medical board shall send renewal notices at least one month 3365
prior to the expiration date. The notice may be sent as part of 3366

the notice sent for renewal of the certificate to practice. 3367

(3) Applications for renewal shall be submitted to the board 3368
on forms the board shall prescribe and furnish. An application for 3369
renewal of a certificate to prescribe may be submitted in 3370
conjunction with an application for renewal of a certificate to 3371
practice. 3372

(4)(a) Except as provided in division (A)(4)(b) of this 3373
section, with respect to an applicant who holds a certificate to 3374
prescribe and prescribes opioid analgesics or benzodiazepines as 3375
part of the applicant's regular practice as a physician assistant, 3376
the application for renewal of a certificate to prescribe shall 3377
include evidence that the applicant has been granted access to the 3378
drug database established and maintained by the state board of 3379
pharmacy pursuant to section 4729.75 of the Revised Code. 3380

(b) The requirement in division (A)(4)(a) of this section 3381
does not apply if either of the following is the case: 3382

(i) The state board of pharmacy notifies the state medical 3383
board pursuant to section 4729.861 of the Revised Code that the 3384
applicant has been restricted from obtaining further information 3385
from the drug database. 3386

(ii) The state board of pharmacy no longer maintains the drug 3387
database. 3388

(5) Each application for renewal of a certificate to 3389
prescribe shall be accompanied by a biennial renewal fee of fifty 3390
dollars. The board shall deposit the fees in accordance with 3391
section 4731.24 of the Revised Code. 3392

(6) The applicant shall report any criminal offense that 3393
constitutes grounds under section 4730.25 of the Revised Code for 3394
refusing to issue a certificate to prescribe to which the 3395
applicant has pleaded guilty, of which the applicant has been 3396
found guilty, or for which the applicant has been found eligible 3397

for intervention in lieu of conviction, since last signing an 3398
application for a certificate to prescribe. 3399

(B) The board shall review all renewal applications received. 3400
If an applicant submits a complete renewal application and meets 3401
the requirements for renewal specified in section 4730.49 of the 3402
Revised Code, the board shall issue to the applicant a renewed 3403
certificate to prescribe. 3404

Sec. 4730.53. (A) As used in this section, "drug database" 3405
means the database established and maintained by the state board 3406
of pharmacy pursuant to section 4729.75 of the Revised Code. 3407

(B) The Except as provided in divisions (C) and (E) of this 3408
section, a physician assistant holding a certificate to prescribe 3409
issued under this chapter shall comply with all of the following 3410
as conditions of prescribing a drug that is either an opioid 3411
analgesic or a benzodiazepine as part of a patient's course of 3412
treatment for a particular condition: 3413

(1) Before initially prescribing the drug, the physician 3414
assistant or the physician assistant's delegate shall request from 3415
the drug database a report of information related to the patient 3416
that covers at least the twelve months immediately preceding the 3417
date of the request. If the physician assistant practices 3418
primarily in a county of this state that adjoins another state, 3419
the physician assistant or delegate also shall request a report of 3420
any information available in the drug database that pertains to 3421
prescriptions issued or drugs furnished to the patient in the 3422
state adjoining that county. 3423

(2) If the patient's course of treatment for the condition 3424
continues for more than ninety days after the initial report is 3425
requested, the physician assistant or delegate shall make periodic 3426
requests for reports of information from the drug database until 3427
the course of treatment has ended. The requests shall be made at 3428

intervals not exceeding ninety days, determined according to the 3429
date the initial request was made. The request shall be made in 3430
the same manner provided in division (B)(1) of this section for 3431
requesting the initial report of information from the drug 3432
database. 3433

(3) On receipt of a report under division (B)(1) or (2) of 3434
this section, the physician assistant shall assess the information 3435
in the report. The physician assistant shall document in the 3436
patient's record that the report was received and the information 3437
was assessed. 3438

(C) Division (B) of this section does not apply in any of the 3439
following circumstances: 3440

(1) A drug database report regarding the patient is not 3441
available, in which case the physician assistant shall document in 3442
the patient's record the reason that the report is not available. 3443

(2) The drug is prescribed in an amount indicated for a 3444
period not to exceed seven days. 3445

(3) The drug is prescribed for the treatment of cancer or 3446
another condition associated with cancer. 3447

(4) The drug is prescribed to a hospice patient in a hospice 3448
care program, as those terms are defined in section 3712.01 of the 3449
Revised Code, or any other patient diagnosed as terminally ill. 3450

(5) The drug is prescribed for administration in a hospital, 3451
nursing home, or residential care facility. 3452

(D) With respect to prescribing any drug that is not an 3453
opioid analgesic or a benzodiazepine but is included in the drug 3454
database pursuant to rules adopted under section 4729.84 of the 3455
Revised Code, the state medical board shall adopt rules ~~in~~ 3456
accordance with Chapter 119. of the Revised Code that establish 3457
standards and procedures to be followed by a physician assistant 3458

who holds a certificate to prescribe issued under this chapter 3459
regarding the review of patient information available through the 3460
drug database under division (A)(5) of section 4729.80 of the 3461
Revised Code. The rules shall be adopted in accordance with 3462
Chapter 119. of the Revised Code. 3463

~~(C)~~(E) This section and the rules adopted under it do not 3464
apply if the state board of pharmacy no longer maintains the drug 3465
database. 3466

Sec. 4731.055. (A) As used in this section: 3467

(1) "Drug database" means the database established and 3468
maintained by the state board of pharmacy pursuant to section 3469
4729.75 of the Revised Code. 3470

(2) "Physician" means an individual authorized under this 3471
chapter to practice medicine and surgery, osteopathic medicine and 3472
surgery, or podiatric medicine and surgery. 3473

(B) The Except as provided in divisions (C) and (E) of this 3474
section, a physician shall comply with all of the following as 3475
conditions of prescribing a drug that is either an opioid 3476
analgesic or a benzodiazepine, or personally furnishing a complete 3477
or partial supply of such a drug, as part of a patient's course of 3478
treatment for a particular condition: 3479

(1) Before initially prescribing or furnishing the drug, the 3480
physician or the physician's delegate shall request from the drug 3481
database a report of information related to the patient that 3482
covers at least the twelve months immediately preceding the date 3483
of the request. If the physician practices primarily in a county 3484
of this state that adjoins another state, the physician or 3485
delegate also shall request a report of any information available 3486
in the drug database that pertains to prescriptions issued or 3487
drugs furnished to the patient in the state adjoining that county. 3488

(2) If the patient's course of treatment for the condition continues for more than ninety days after the initial report is requested, the physician or delegate shall make periodic requests for reports of information from the drug database until the course of treatment has ended. The requests shall be made at intervals not exceeding ninety days, determined according to the date the initial request was made. The request shall be made in the same manner provided in division (B)(1) of this section for requesting the initial report of information from the drug database.

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(3) On receipt of a report under division (B)(1) or (2) of this section, the physician shall assess the information in the report. The physician shall document in the patient's record that the report was received and the information was assessed.

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(C) Division (B) of this section does not apply in any of the following circumstances:

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(1) A drug database report regarding the patient is not available, in which case the physician shall document in the patient's record the reason that the report is not available.

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(2) The drug is prescribed or personally furnished in an amount indicated for a period not to exceed seven days.

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(3) The drug is prescribed or personally furnished for the treatment of cancer or another condition associated with cancer.

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(4) The drug is prescribed or personally furnished to a hospice patient in a hospice care program, as those terms are defined in section 3712.01 of the Revised Code, or any other patient diagnosed as terminally ill.

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(5) The drug is prescribed or personally furnished for administration in a hospital, nursing home, or residential care facility.

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(6) The drug is prescribed or personally furnished to treat

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acute pain resulting from a surgical or other invasive procedure 3519
or a delivery. 3520

(D) With respect to prescribing or personally furnishing any 3521
drug that is not an opioid analgesic or a benzodiazepine but is 3522
included in the drug database pursuant to rules adopted under 3523
section 4729.84 of the Revised Code, the state medical board shall 3524
adopt rules in accordance with Chapter 119. of the Revised Code 3525
that establish standards and procedures to be followed by a 3526
physician regarding the review of patient information available 3527
through the drug database under division (A)(5) of section 4729.80 3528
of the Revised Code. The rules shall be adopted in accordance with 3529
Chapter 119. of the Revised Code. 3530

~~(C)~~(E) This section and the rules adopted under it do not 3531
apply if the state board of pharmacy no longer maintains the drug 3532
database. 3533

Sec. 4731.22. (A) The state medical board, by an affirmative 3534
vote of not fewer than six of its members, may limit, revoke, or 3535
suspend an individual's certificate to practice, refuse to grant a 3536
certificate to an individual, refuse to register an individual, 3537
refuse to reinstate a certificate, or reprimand or place on 3538
probation the holder of a certificate if the individual or 3539
certificate holder is found by the board to have committed fraud 3540
during the administration of the examination for a certificate to 3541
practice or to have committed fraud, misrepresentation, or 3542
deception in applying for or securing any certificate to practice 3543
or certificate of registration issued by the board. 3544

(B) The board, by an affirmative vote of not fewer than six 3545
members, shall, to the extent permitted by law, limit, revoke, or 3546
suspend an individual's certificate to practice, refuse to 3547
register an individual, refuse to reinstate a certificate, or 3548
reprimand or place on probation the holder of a certificate for 3549

one or more of the following reasons: 3550

(1) Permitting one's name or one's certificate to practice or 3551
certificate of registration to be used by a person, group, or 3552
corporation when the individual concerned is not actually 3553
directing the treatment given; 3554

(2) Failure to maintain minimal standards applicable to the 3555
selection or administration of drugs, or failure to employ 3556
acceptable scientific methods in the selection of drugs or other 3557
modalities for treatment of disease; 3558

(3) Selling, giving away, personally furnishing, prescribing, 3559
or administering drugs for other than legal and legitimate 3560
therapeutic purposes or a plea of guilty to, a judicial finding of 3561
guilt of, or a judicial finding of eligibility for intervention in 3562
lieu of conviction of, a violation of any federal or state law 3563
regulating the possession, distribution, or use of any drug; 3564

(4) Willfully betraying a professional confidence. 3565

For purposes of this division, "willfully betraying a 3566
professional confidence" does not include providing any 3567
information, documents, or reports to a child fatality review 3568
board under sections 307.621 to 307.629 of the Revised Code and 3569
does not include the making of a report of an employee's use of a 3570
drug of abuse, or a report of a condition of an employee other 3571
than one involving the use of a drug of abuse, to the employer of 3572
the employee as described in division (B) of section 2305.33 of 3573
the Revised Code. Nothing in this division affects the immunity 3574
from civil liability conferred by that section upon a physician 3575
who makes either type of report in accordance with division (B) of 3576
that section. As used in this division, "employee," "employer," 3577
and "physician" have the same meanings as in section 2305.33 of 3578
the Revised Code. 3579

(5) Making a false, fraudulent, deceptive, or misleading 3580

statement in the solicitation of or advertising for patients; in 3581
relation to the practice of medicine and surgery, osteopathic 3582
medicine and surgery, podiatric medicine and surgery, or a limited 3583
branch of medicine; or in securing or attempting to secure any 3584
certificate to practice or certificate of registration issued by 3585
the board. 3586

As used in this division, "false, fraudulent, deceptive, or 3587
misleading statement" means a statement that includes a 3588
misrepresentation of fact, is likely to mislead or deceive because 3589
of a failure to disclose material facts, is intended or is likely 3590
to create false or unjustified expectations of favorable results, 3591
or includes representations or implications that in reasonable 3592
probability will cause an ordinarily prudent person to 3593
misunderstand or be deceived. 3594

(6) A departure from, or the failure to conform to, minimal 3595
standards of care of similar practitioners under the same or 3596
similar circumstances, whether or not actual injury to a patient 3597
is established; 3598

(7) Representing, with the purpose of obtaining compensation 3599
or other advantage as personal gain or for any other person, that 3600
an incurable disease or injury, or other incurable condition, can 3601
be permanently cured; 3602

(8) The obtaining of, or attempting to obtain, money or 3603
anything of value by fraudulent misrepresentations in the course 3604
of practice; 3605

(9) A plea of guilty to, a judicial finding of guilt of, or a 3606
judicial finding of eligibility for intervention in lieu of 3607
conviction for, a felony; 3608

(10) Commission of an act that constitutes a felony in this 3609
state, regardless of the jurisdiction in which the act was 3610
committed; 3611

- (11) A plea of guilty to, a judicial finding of guilt of, or 3612
a judicial finding of eligibility for intervention in lieu of 3613
conviction for, a misdemeanor committed in the course of practice; 3614
- (12) Commission of an act in the course of practice that 3615
constitutes a misdemeanor in this state, regardless of the 3616
jurisdiction in which the act was committed; 3617
- (13) A plea of guilty to, a judicial finding of guilt of, or 3618
a judicial finding of eligibility for intervention in lieu of 3619
conviction for, a misdemeanor involving moral turpitude; 3620
- (14) Commission of an act involving moral turpitude that 3621
constitutes a misdemeanor in this state, regardless of the 3622
jurisdiction in which the act was committed; 3623
- (15) Violation of the conditions of limitation placed by the 3624
board upon a certificate to practice; 3625
- (16) Failure to pay license renewal fees specified in this 3626
chapter; 3627
- (17) Except as authorized in section 4731.31 of the Revised 3628
Code, engaging in the division of fees for referral of patients, 3629
or the receiving of a thing of value in return for a specific 3630
referral of a patient to utilize a particular service or business; 3631
- (18) Subject to section 4731.226 of the Revised Code, 3632
violation of any provision of a code of ethics of the American 3633
medical association, the American osteopathic association, the 3634
American podiatric medical association, or any other national 3635
professional organizations that the board specifies by rule. The 3636
state medical board shall obtain and keep on file current copies 3637
of the codes of ethics of the various national professional 3638
organizations. The individual whose certificate is being suspended 3639
or revoked shall not be found to have violated any provision of a 3640
code of ethics of an organization not appropriate to the 3641
individual's profession. 3642

For purposes of this division, a "provision of a code of ethics of a national professional organization" does not include any provision that would preclude the making of a report by a physician of an employee's use of a drug of abuse, or of a condition of an employee other than one involving the use of a drug of abuse, to the employer of the employee as described in division (B) of section 2305.33 of the Revised Code. Nothing in this division affects the immunity from civil liability conferred by that section upon a physician who makes either type of report in accordance with division (B) of that section. As used in this division, "employee," "employer," and "physician" have the same meanings as in section 2305.33 of the Revised Code.

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

In enforcing this division, the board, upon a showing of a possible violation, may compel any individual authorized to practice by this chapter or who has submitted an application pursuant to this chapter to submit to a mental examination, physical examination, including an HIV test, or both a mental and a physical examination. The expense of the examination is the responsibility of the individual compelled to be examined. Failure to submit to a mental or physical examination or consent to an HIV test ordered by the board constitutes an admission of the allegations against the individual unless the failure is due to circumstances beyond the individual's control, and a default and final order may be entered without the taking of testimony or presentation of evidence. If the board finds an individual unable to practice because of the reasons set forth in this division, the board shall require the individual to submit to care, counseling,

or treatment by physicians approved or designated by the board, as 3675
a condition for initial, continued, reinstated, or renewed 3676
authority to practice. An individual affected under this division 3677
shall be afforded an opportunity to demonstrate to the board the 3678
ability to resume practice in compliance with acceptable and 3679
prevailing standards under the provisions of the individual's 3680
certificate. For the purpose of this division, any individual who 3681
applies for or receives a certificate to practice under this 3682
chapter accepts the privilege of practicing in this state and, by 3683
so doing, shall be deemed to have given consent to submit to a 3684
mental or physical examination when directed to do so in writing 3685
by the board, and to have waived all objections to the 3686
admissibility of testimony or examination reports that constitute 3687
a privileged communication. 3688

(20) Except when civil penalties are imposed under section 3689
4731.225 or 4731.281 of the Revised Code, and subject to section 3690
4731.226 of the Revised Code, violating or attempting to violate, 3691
directly or indirectly, or assisting in or abetting the violation 3692
of, or conspiring to violate, any provisions of this chapter or 3693
any rule promulgated by the board. 3694

This division does not apply to a violation or attempted 3695
violation of, assisting in or abetting the violation of, or a 3696
conspiracy to violate, any provision of this chapter or any rule 3697
adopted by the board that would preclude the making of a report by 3698
a physician of an employee's use of a drug of abuse, or of a 3699
condition of an employee other than one involving the use of a 3700
drug of abuse, to the employer of the employee as described in 3701
division (B) of section 2305.33 of the Revised Code. Nothing in 3702
this division affects the immunity from civil liability conferred 3703
by that section upon a physician who makes either type of report 3704
in accordance with division (B) of that section. As used in this 3705
division, "employee," "employer," and "physician" have the same 3706

meanings as in section 2305.33 of the Revised Code. 3707

(21) The violation of section 3701.79 of the Revised Code or 3708
of any abortion rule adopted by the public health council pursuant 3709
to section 3701.341 of the Revised Code; 3710

(22) Any of the following actions taken by an agency 3711
responsible for authorizing, certifying, or regulating an 3712
individual to practice a health care occupation or provide health 3713
care services in this state or another jurisdiction, for any 3714
reason other than the nonpayment of fees: the limitation, 3715
revocation, or suspension of an individual's license to practice; 3716
acceptance of an individual's license surrender; denial of a 3717
license; refusal to renew or reinstate a license; imposition of 3718
probation; or issuance of an order of censure or other reprimand; 3719

(23) The violation of section 2919.12 of the Revised Code or 3720
the performance or inducement of an abortion upon a pregnant woman 3721
with actual knowledge that the conditions specified in division 3722
(B) of section 2317.56 of the Revised Code have not been satisfied 3723
or with a heedless indifference as to whether those conditions 3724
have been satisfied, unless an affirmative defense as specified in 3725
division (H)(2) of that section would apply in a civil action 3726
authorized by division (H)(1) of that section; 3727

(24) The revocation, suspension, restriction, reduction, or 3728
termination of clinical privileges by the United States department 3729
of defense or department of veterans affairs or the termination or 3730
suspension of a certificate of registration to prescribe drugs by 3731
the drug enforcement administration of the United States 3732
department of justice; 3733

(25) Termination or suspension from participation in the 3734
medicare or medicaid programs by the department of health and 3735
human services or other responsible agency for any act or acts 3736
that also would constitute a violation of division (B)(2), (3), 3737

(6), (8), or (19) of this section; 3738

(26) Impairment of ability to practice according to 3739
acceptable and prevailing standards of care because of habitual or 3740
excessive use or abuse of drugs, alcohol, or other substances that 3741
impair ability to practice. 3742

For the purposes of this division, any individual authorized 3743
to practice by this chapter accepts the privilege of practicing in 3744
this state subject to supervision by the board. By filing an 3745
application for or holding a certificate to practice under this 3746
chapter, an individual shall be deemed to have given consent to 3747
submit to a mental or physical examination when ordered to do so 3748
by the board in writing, and to have waived all objections to the 3749
admissibility of testimony or examination reports that constitute 3750
privileged communications. 3751

If it has reason to believe that any individual authorized to 3752
practice by this chapter or any applicant for certification to 3753
practice suffers such impairment, the board may compel the 3754
individual to submit to a mental or physical examination, or both. 3755
The expense of the examination is the responsibility of the 3756
individual compelled to be examined. Any mental or physical 3757
examination required under this division shall be undertaken by a 3758
treatment provider or physician who is qualified to conduct the 3759
examination and who is chosen by the board. 3760

Failure to submit to a mental or physical examination ordered 3761
by the board constitutes an admission of the allegations against 3762
the individual unless the failure is due to circumstances beyond 3763
the individual's control, and a default and final order may be 3764
entered without the taking of testimony or presentation of 3765
evidence. If the board determines that the individual's ability to 3766
practice is impaired, the board shall suspend the individual's 3767
certificate or deny the individual's application and shall require 3768
the individual, as a condition for initial, continued, reinstated, 3769

or renewed certification to practice, to submit to treatment. 3770

Before being eligible to apply for reinstatement of a 3771
certificate suspended under this division, the impaired 3772
practitioner shall demonstrate to the board the ability to resume 3773
practice in compliance with acceptable and prevailing standards of 3774
care under the provisions of the practitioner's certificate. The 3775
demonstration shall include, but shall not be limited to, the 3776
following: 3777

(a) Certification from a treatment provider approved under 3778
section 4731.25 of the Revised Code that the individual has 3779
successfully completed any required inpatient treatment; 3780

(b) Evidence of continuing full compliance with an aftercare 3781
contract or consent agreement; 3782

(c) Two written reports indicating that the individual's 3783
ability to practice has been assessed and that the individual has 3784
been found capable of practicing according to acceptable and 3785
prevailing standards of care. The reports shall be made by 3786
individuals or providers approved by the board for making the 3787
assessments and shall describe the basis for their determination. 3788

The board may reinstate a certificate suspended under this 3789
division after that demonstration and after the individual has 3790
entered into a written consent agreement. 3791

When the impaired practitioner resumes practice, the board 3792
shall require continued monitoring of the individual. The 3793
monitoring shall include, but not be limited to, compliance with 3794
the written consent agreement entered into before reinstatement or 3795
with conditions imposed by board order after a hearing, and, upon 3796
termination of the consent agreement, submission to the board for 3797
at least two years of annual written progress reports made under 3798
penalty of perjury stating whether the individual has maintained 3799
sobriety. 3800

(27) A second or subsequent violation of section 4731.66 or	3801
4731.69 of the Revised Code;	3802
(28) Except as provided in division (N) of this section:	3803
(a) Waiving the payment of all or any part of a deductible or	3804
copayment that a patient, pursuant to a health insurance or health	3805
care policy, contract, or plan that covers the individual's	3806
services, otherwise would be required to pay if the waiver is used	3807
as an enticement to a patient or group of patients to receive	3808
health care services from that individual;	3809
(b) Advertising that the individual will waive the payment of	3810
all or any part of a deductible or copayment that a patient,	3811
pursuant to a health insurance or health care policy, contract, or	3812
plan that covers the individual's services, otherwise would be	3813
required to pay.	3814
(29) Failure to use universal blood and body fluid	3815
precautions established by rules adopted under section 4731.051 of	3816
the Revised Code;	3817
(30) Failure to provide notice to, and receive acknowledgment	3818
of the notice from, a patient when required by section 4731.143 of	3819
the Revised Code prior to providing nonemergency professional	3820
services, or failure to maintain that notice in the patient's	3821
file;	3822
(31) Failure of a physician supervising a physician assistant	3823
to maintain supervision in accordance with the requirements of	3824
Chapter 4730. of the Revised Code and the rules adopted under that	3825
chapter;	3826
(32) Failure of a physician or podiatrist to enter into a	3827
standard care arrangement with a clinical nurse specialist,	3828
certified nurse-midwife, or certified nurse practitioner with whom	3829
the physician or podiatrist is in collaboration pursuant to	3830
section 4731.27 of the Revised Code or failure to fulfill the	3831

responsibilities of collaboration after entering into a standard care arrangement;	3832 3833
(33) Failure to comply with the terms of a consult agreement entered into with a pharmacist pursuant to section 4729.39 of the Revised Code;	3834 3835 3836
(34) Failure to cooperate in an investigation conducted by the board under division (F) of this section, including failure to comply with a subpoena or order issued by the board or failure to answer truthfully a question presented by the board in an investigative interview, an investigative office conference, at a deposition, or in written interrogatories, except that failure to cooperate with an investigation shall not constitute grounds for discipline under this section if a court of competent jurisdiction has issued an order that either quashes a subpoena or permits the individual to withhold the testimony or evidence in issue;	3837 3838 3839 3840 3841 3842 3843 3844 3845 3846
(35) Failure to supervise an oriental medicine practitioner or acupuncturist in accordance with Chapter 4762. of the Revised Code and the board's rules for providing that supervision;	3847 3848 3849
(36) Failure to supervise an anesthesiologist assistant in accordance with Chapter 4760. of the Revised Code and the board's rules for supervision of an anesthesiologist assistant;	3850 3851 3852
(37) Assisting suicide as defined in section 3795.01 of the Revised Code;	3853 3854
(38) Failure to comply with the requirements of section 2317.561 of the Revised Code;	3855 3856
(39) Failure to supervise a radiologist assistant in accordance with Chapter 4774. of the Revised Code and the board's rules for supervision of radiologist assistants;	3857 3858 3859
(40) Performing or inducing an abortion at an office or facility with knowledge that the office or facility fails to post	3860 3861

the notice required under section 3701.791 of the Revised Code;	3862
(41) Failure to comply with the standards and procedures	3863
established in rules under section 4731.054 of the Revised Code	3864
for the operation of or the provision of care at a pain management	3865
clinic;	3866
(42) Failure to comply with the standards and procedures	3867
established in rules under section 4731.054 of the Revised Code	3868
for providing supervision, direction, and control of individuals	3869
at a pain management clinic;	3870
(43) Failure to comply with the requirements of section	3871
4729.79 <u>or 4731.055</u> of the Revised Code, unless the state board of	3872
pharmacy no longer maintains a drug database pursuant to section	3873
4729.75 of the Revised Code;	3874
(44) Failure to comply with the requirements of section	3875
2919.171 of the Revised Code or failure to submit to the	3876
department of health in accordance with a court order a complete	3877
report as described in section 2919.171 of the Revised Code;	3878
(45) Practicing at a facility that is subject to licensure as	3879
a category III terminal distributor of dangerous drugs with a pain	3880
management clinic classification unless the person operating the	3881
facility has obtained and maintains the license with the	3882
classification;	3883
(46) Owning a facility that is subject to licensure as a	3884
category III terminal distributor of dangerous drugs with a pain	3885
management clinic classification unless the facility is licensed	3886
with the classification;	3887
(47) Failure to comply with the requirement regarding	3888
maintaining notes described in division (B) of section 2919.191 of	3889
the Revised Code or failure to satisfy the requirements of section	3890
2919.191 of the Revised Code prior to performing or inducing an	3891
abortion upon a pregnant woman.	3892

(C) Disciplinary actions taken by the board under divisions 3893
(A) and (B) of this section shall be taken pursuant to an 3894
adjudication under Chapter 119. of the Revised Code, except that 3895
in lieu of an adjudication, the board may enter into a consent 3896
agreement with an individual to resolve an allegation of a 3897
violation of this chapter or any rule adopted under it. A consent 3898
agreement, when ratified by an affirmative vote of not fewer than 3899
six members of the board, shall constitute the findings and order 3900
of the board with respect to the matter addressed in the 3901
agreement. If the board refuses to ratify a consent agreement, the 3902
admissions and findings contained in the consent agreement shall 3903
be of no force or effect. 3904

A telephone conference call may be utilized for ratification 3905
of a consent agreement that revokes or suspends an individual's 3906
certificate to practice. The telephone conference call shall be 3907
considered a special meeting under division (F) of section 121.22 3908
of the Revised Code. 3909

If the board takes disciplinary action against an individual 3910
under division (B) of this section for a second or subsequent plea 3911
of guilty to, or judicial finding of guilt of, a violation of 3912
section 2919.123 of the Revised Code, the disciplinary action 3913
shall consist of a suspension of the individual's certificate to 3914
practice for a period of at least one year or, if determined 3915
appropriate by the board, a more serious sanction involving the 3916
individual's certificate to practice. Any consent agreement 3917
entered into under this division with an individual that pertains 3918
to a second or subsequent plea of guilty to, or judicial finding 3919
of guilt of, a violation of that section shall provide for a 3920
suspension of the individual's certificate to practice for a 3921
period of at least one year or, if determined appropriate by the 3922
board, a more serious sanction involving the individual's 3923
certificate to practice. 3924

(D) For purposes of divisions (B)(10), (12), and (14) of this section, the commission of the act may be established by a finding by the board, pursuant to an adjudication under Chapter 119. of the Revised Code, that the individual committed the act. The board does not have jurisdiction under those divisions if the trial court renders a final judgment in the individual's favor and that judgment is based upon an adjudication on the merits. The board has jurisdiction under those divisions if the trial court issues an order of dismissal upon technical or procedural grounds.

(E) The sealing of conviction records by any court shall have no effect upon a prior board order entered under this section or upon the board's jurisdiction to take action under this section if, based upon a plea of guilty, a judicial finding of guilt, or a judicial finding of eligibility for intervention in lieu of conviction, the board issued a notice of opportunity for a hearing prior to the court's order to seal the records. The board shall not be required to seal, destroy, redact, or otherwise modify its records to reflect the court's sealing of conviction records.

(F)(1) The board shall investigate evidence that appears to show that a person has violated any provision of this chapter or any rule adopted under it. Any person may report to the board in a signed writing any information that the person may have that appears to show a violation of any provision of this chapter or any rule adopted under it. In the absence of bad faith, any person who reports information of that nature or who testifies before the board in any adjudication conducted under Chapter 119. of the Revised Code shall not be liable in damages in a civil action as a result of the report or testimony. Each complaint or allegation of a violation received by the board shall be assigned a case number and shall be recorded by the board.

(2) Investigations of alleged violations of this chapter or any rule adopted under it shall be supervised by the supervising

member elected by the board in accordance with section 4731.02 of 3957
the Revised Code and by the secretary as provided in section 3958
4731.39 of the Revised Code. The president may designate another 3959
member of the board to supervise the investigation in place of the 3960
supervising member. No member of the board who supervises the 3961
investigation of a case shall participate in further adjudication 3962
of the case. 3963

(3) In investigating a possible violation of this chapter or 3964
any rule adopted under this chapter, or in conducting an 3965
inspection under division (E) of section 4731.054 of the Revised 3966
Code, the board may question witnesses, conduct interviews, 3967
administer oaths, order the taking of depositions, inspect and 3968
copy any books, accounts, papers, records, or documents, issue 3969
subpoenas, and compel the attendance of witnesses and production 3970
of books, accounts, papers, records, documents, and testimony, 3971
except that a subpoena for patient record information shall not be 3972
issued without consultation with the attorney general's office and 3973
approval of the secretary and supervising member of the board. 3974

(a) Before issuance of a subpoena for patient record 3975
information, the secretary and supervising member shall determine 3976
whether there is probable cause to believe that the complaint 3977
filed alleges a violation of this chapter or any rule adopted 3978
under it and that the records sought are relevant to the alleged 3979
violation and material to the investigation. The subpoena may 3980
apply only to records that cover a reasonable period of time 3981
surrounding the alleged violation. 3982

(b) On failure to comply with any subpoena issued by the 3983
board and after reasonable notice to the person being subpoenaed, 3984
the board may move for an order compelling the production of 3985
persons or records pursuant to the Rules of Civil Procedure. 3986

(c) A subpoena issued by the board may be served by a 3987
sheriff, the sheriff's deputy, or a board employee designated by 3988

the board. Service of a subpoena issued by the board may be made 3989
by delivering a copy of the subpoena to the person named therein, 3990
reading it to the person, or leaving it at the person's usual 3991
place of residence, usual place of business, or address on file 3992
with the board. When serving a subpoena to an applicant for or the 3993
holder of a certificate issued under this chapter, service of the 3994
subpoena may be made by certified mail, return receipt requested, 3995
and the subpoena shall be deemed served on the date delivery is 3996
made or the date the person refuses to accept delivery. If the 3997
person being served refuses to accept the subpoena or is not 3998
located, service may be made to an attorney who notifies the board 3999
that the attorney is representing the person. 4000

(d) A sheriff's deputy who serves a subpoena shall receive 4001
the same fees as a sheriff. Each witness who appears before the 4002
board in obedience to a subpoena shall receive the fees and 4003
mileage provided for under section 119.094 of the Revised Code. 4004

(4) All hearings, investigations, and inspections of the 4005
board shall be considered civil actions for the purposes of 4006
section 2305.252 of the Revised Code. 4007

(5) A report required to be submitted to the board under this 4008
chapter, a complaint, or information received by the board 4009
pursuant to an investigation or pursuant to an inspection under 4010
division (E) of section 4731.054 of the Revised Code is 4011
confidential and not subject to discovery in any civil action. 4012

The board shall conduct all investigations or inspections and 4013
proceedings in a manner that protects the confidentiality of 4014
patients and persons who file complaints with the board. The board 4015
shall not make public the names or any other identifying 4016
information about patients or complainants unless proper consent 4017
is given or, in the case of a patient, a waiver of the patient 4018
privilege exists under division (B) of section 2317.02 of the 4019
Revised Code, except that consent or a waiver of that nature is 4020

not required if the board possesses reliable and substantial 4021
evidence that no bona fide physician-patient relationship exists. 4022

The board may share any information it receives pursuant to 4023
an investigation or inspection, including patient records and 4024
patient record information, with law enforcement agencies, other 4025
licensing boards, and other governmental agencies that are 4026
prosecuting, adjudicating, or investigating alleged violations of 4027
statutes or administrative rules. An agency or board that receives 4028
the information shall comply with the same requirements regarding 4029
confidentiality as those with which the state medical board must 4030
comply, notwithstanding any conflicting provision of the Revised 4031
Code or procedure of the agency or board that applies when it is 4032
dealing with other information in its possession. In a judicial 4033
proceeding, the information may be admitted into evidence only in 4034
accordance with the Rules of Evidence, but the court shall require 4035
that appropriate measures are taken to ensure that confidentiality 4036
is maintained with respect to any part of the information that 4037
contains names or other identifying information about patients or 4038
complainants whose confidentiality was protected by the state 4039
medical board when the information was in the board's possession. 4040
Measures to ensure confidentiality that may be taken by the court 4041
include sealing its records or deleting specific information from 4042
its records. 4043

(6) On a quarterly basis, the board shall prepare a report 4044
that documents the disposition of all cases during the preceding 4045
three months. The report shall contain the following information 4046
for each case with which the board has completed its activities: 4047

(a) The case number assigned to the complaint or alleged 4048
violation; 4049

(b) The type of certificate to practice, if any, held by the 4050
individual against whom the complaint is directed; 4051

(c) A description of the allegations contained in the 4052
complaint; 4053

(d) The disposition of the case. 4054

The report shall state how many cases are still pending and 4055
shall be prepared in a manner that protects the identity of each 4056
person involved in each case. The report shall be a public record 4057
under section 149.43 of the Revised Code. 4058

(G) If the secretary and supervising member determine both of 4059
the following, they may recommend that the board suspend an 4060
individual's certificate to practice without a prior hearing: 4061

(1) That there is clear and convincing evidence that an 4062
individual has violated division (B) of this section; 4063

(2) That the individual's continued practice presents a 4064
danger of immediate and serious harm to the public. 4065

Written allegations shall be prepared for consideration by 4066
the board. The board, upon review of those allegations and by an 4067
affirmative vote of not fewer than six of its members, excluding 4068
the secretary and supervising member, may suspend a certificate 4069
without a prior hearing. A telephone conference call may be 4070
utilized for reviewing the allegations and taking the vote on the 4071
summary suspension. 4072

The board shall issue a written order of suspension by 4073
certified mail or in person in accordance with section 119.07 of 4074
the Revised Code. The order shall not be subject to suspension by 4075
the court during pendency of any appeal filed under section 119.12 4076
of the Revised Code. If the individual subject to the summary 4077
suspension requests an adjudicatory hearing by the board, the date 4078
set for the hearing shall be within fifteen days, but not earlier 4079
than seven days, after the individual requests the hearing, unless 4080
otherwise agreed to by both the board and the individual. 4081

Any summary suspension imposed under this division shall 4082
remain in effect, unless reversed on appeal, until a final 4083
adjudicative order issued by the board pursuant to this section 4084
and Chapter 119. of the Revised Code becomes effective. The board 4085
shall issue its final adjudicative order within seventy-five days 4086
after completion of its hearing. A failure to issue the order 4087
within seventy-five days shall result in dissolution of the 4088
summary suspension order but shall not invalidate any subsequent, 4089
final adjudicative order. 4090

(H) If the board takes action under division (B)(9), (11), or 4091
(13) of this section and the judicial finding of guilt, guilty 4092
plea, or judicial finding of eligibility for intervention in lieu 4093
of conviction is overturned on appeal, upon exhaustion of the 4094
criminal appeal, a petition for reconsideration of the order may 4095
be filed with the board along with appropriate court documents. 4096
Upon receipt of a petition of that nature and supporting court 4097
documents, the board shall reinstate the individual's certificate 4098
to practice. The board may then hold an adjudication under Chapter 4099
119. of the Revised Code to determine whether the individual 4100
committed the act in question. Notice of an opportunity for a 4101
hearing shall be given in accordance with Chapter 119. of the 4102
Revised Code. If the board finds, pursuant to an adjudication held 4103
under this division, that the individual committed the act or if 4104
no hearing is requested, the board may order any of the sanctions 4105
identified under division (B) of this section. 4106

(I) The certificate to practice issued to an individual under 4107
this chapter and the individual's practice in this state are 4108
automatically suspended as of the date of the individual's second 4109
or subsequent plea of guilty to, or judicial finding of guilt of, 4110
a violation of section 2919.123 of the Revised Code, or the date 4111
the individual pleads guilty to, is found by a judge or jury to be 4112
guilty of, or is subject to a judicial finding of eligibility for 4113

intervention in lieu of conviction in this state or treatment or 4114
intervention in lieu of conviction in another jurisdiction for any 4115
of the following criminal offenses in this state or a 4116
substantially equivalent criminal offense in another jurisdiction: 4117
aggravated murder, murder, voluntary manslaughter, felonious 4118
assault, kidnapping, rape, sexual battery, gross sexual 4119
imposition, aggravated arson, aggravated robbery, or aggravated 4120
burglary. Continued practice after suspension shall be considered 4121
practicing without a certificate. 4122

The board shall notify the individual subject to the 4123
suspension by certified mail or in person in accordance with 4124
section 119.07 of the Revised Code. If an individual whose 4125
certificate is automatically suspended under this division fails 4126
to make a timely request for an adjudication under Chapter 119. of 4127
the Revised Code, the board shall do whichever of the following is 4128
applicable: 4129

(1) If the automatic suspension under this division is for a 4130
second or subsequent plea of guilty to, or judicial finding of 4131
guilt of, a violation of section 2919.123 of the Revised Code, the 4132
board shall enter an order suspending the individual's certificate 4133
to practice for a period of at least one year or, if determined 4134
appropriate by the board, imposing a more serious sanction 4135
involving the individual's certificate to practice. 4136

(2) In all circumstances in which division (I)(1) of this 4137
section does not apply, enter a final order permanently revoking 4138
the individual's certificate to practice. 4139

(J) If the board is required by Chapter 119. of the Revised 4140
Code to give notice of an opportunity for a hearing and if the 4141
individual subject to the notice does not timely request a hearing 4142
in accordance with section 119.07 of the Revised Code, the board 4143
is not required to hold a hearing, but may adopt, by an 4144
affirmative vote of not fewer than six of its members, a final 4145

order that contains the board's findings. In that final order, the 4146
board may order any of the sanctions identified under division (A) 4147
or (B) of this section. 4148

(K) Any action taken by the board under division (B) of this 4149
section resulting in a suspension from practice shall be 4150
accompanied by a written statement of the conditions under which 4151
the individual's certificate to practice may be reinstated. The 4152
board shall adopt rules governing conditions to be imposed for 4153
reinstatement. Reinstatement of a certificate suspended pursuant 4154
to division (B) of this section requires an affirmative vote of 4155
not fewer than six members of the board. 4156

(L) When the board refuses to grant a certificate to an 4157
applicant, revokes an individual's certificate to practice, 4158
refuses to register an applicant, or refuses to reinstate an 4159
individual's certificate to practice, the board may specify that 4160
its action is permanent. An individual subject to a permanent 4161
action taken by the board is forever thereafter ineligible to hold 4162
a certificate to practice and the board shall not accept an 4163
application for reinstatement of the certificate or for issuance 4164
of a new certificate. 4165

(M) Notwithstanding any other provision of the Revised Code, 4166
all of the following apply: 4167

(1) The surrender of a certificate issued under this chapter 4168
shall not be effective unless or until accepted by the board. A 4169
telephone conference call may be utilized for acceptance of the 4170
surrender of an individual's certificate to practice. The 4171
telephone conference call shall be considered a special meeting 4172
under division (F) of section 121.22 of the Revised Code. 4173
Reinstatement of a certificate surrendered to the board requires 4174
an affirmative vote of not fewer than six members of the board. 4175

(2) An application for a certificate made under the 4176

provisions of this chapter may not be withdrawn without approval 4177
of the board. 4178

(3) Failure by an individual to renew a certificate of 4179
registration in accordance with this chapter shall not remove or 4180
limit the board's jurisdiction to take any disciplinary action 4181
under this section against the individual. 4182

(4) At the request of the board, a certificate holder shall 4183
immediately surrender to the board a certificate that the board 4184
has suspended, revoked, or permanently revoked. 4185

(N) Sanctions shall not be imposed under division (B)(28) of 4186
this section against any person who waives deductibles and 4187
copayments as follows: 4188

(1) In compliance with the health benefit plan that expressly 4189
allows such a practice. Waiver of the deductibles or copayments 4190
shall be made only with the full knowledge and consent of the plan 4191
purchaser, payer, and third-party administrator. Documentation of 4192
the consent shall be made available to the board upon request. 4193

(2) For professional services rendered to any other person 4194
authorized to practice pursuant to this chapter, to the extent 4195
allowed by this chapter and rules adopted by the board. 4196

(O) Under the board's investigative duties described in this 4197
section and subject to division (F) of this section, the board 4198
shall develop and implement a quality intervention program 4199
designed to improve through remedial education the clinical and 4200
communication skills of individuals authorized under this chapter 4201
to practice medicine and surgery, osteopathic medicine and 4202
surgery, and podiatric medicine and surgery. In developing and 4203
implementing the quality intervention program, the board may do 4204
all of the following: 4205

(1) Offer in appropriate cases as determined by the board an 4206
educational and assessment program pursuant to an investigation 4207

the board conducts under this section; 4208

(2) Select providers of educational and assessment services, 4209
including a quality intervention program panel of case reviewers; 4210

(3) Make referrals to educational and assessment service 4211
providers and approve individual educational programs recommended 4212
by those providers. The board shall monitor the progress of each 4213
individual undertaking a recommended individual educational 4214
program. 4215

(4) Determine what constitutes successful completion of an 4216
individual educational program and require further monitoring of 4217
the individual who completed the program or other action that the 4218
board determines to be appropriate; 4219

(5) Adopt rules in accordance with Chapter 119. of the 4220
Revised Code to further implement the quality intervention 4221
program. 4222

An individual who participates in an individual educational 4223
program pursuant to this division shall pay the financial 4224
obligations arising from that educational program. 4225

Sec. 4731.229. (A) As used in this section, "physician" means 4226
an individual authorized under this chapter to practice medicine 4227
and surgery, osteopathic medicine and surgery, or podiatric 4228
medicine and surgery. 4229

(B) For the initial violation of section 3719.061 of the 4230
Revised Code by a physician, the state medical board, by an 4231
affirmative vote of not fewer than six members, may impose a fine 4232
not to exceed twenty thousand dollars. For each subsequent 4233
violation of that section, the board, by an affirmative vote of 4234
not fewer than six members, may impose an additional fine not to 4235
exceed twenty thousand dollars; suspend for not less than six 4236
months the physician's certificate to practice medicine and 4237

surgery, osteopathic medicine and surgery, or podiatric medicine 4238
and surgery; or both. 4239

(C) When investigating or conducting a hearing on an alleged 4240
violation of section 3719.061 of the Revised Code, the board may 4241
take any action it is authorized to take under division (F) of 4242
section 4731.22 of the Revised Code. 4243

(D) Except as specified in division (J) of section 4731.22 of 4244
the Revised Code, disciplinary action under this section shall be 4245
taken pursuant to an adjudication conducted under Chapter 119. of 4246
the Revised Code. 4247

Sec. 4731.281. (A) On or before the deadline established 4248
under division (B) of this section for applying for renewal of a 4249
certificate of registration, each person holding a certificate 4250
under this chapter to practice medicine and surgery, osteopathic 4251
medicine and surgery, or podiatric medicine and surgery shall 4252
certify to the state medical board that in the preceding two years 4253
the person has completed one hundred hours of continuing medical 4254
education. The certification shall be made upon the application 4255
for biennial registration submitted pursuant to division (B) of 4256
this section. The board shall adopt rules providing for pro rata 4257
reductions by month of the number of hours of continuing education 4258
required for persons who are in their first registration period, 4259
who have been disabled due to illness or accident, or who have 4260
been absent from the country. 4261

In determining whether a course, program, or activity 4262
qualifies for credit as continuing medical education, the board 4263
shall approve all continuing medical education taken by persons 4264
holding a certificate to practice medicine and surgery that is 4265
certified by the Ohio state medical association, all continuing 4266
medical education taken by persons holding a certificate to 4267
practice osteopathic medicine and surgery that is certified by the 4268

Ohio osteopathic association, and all continuing medical education 4269
taken by persons holding a certificate to practice podiatric 4270
medicine and surgery that is certified by the Ohio podiatric 4271
medical association. Each person holding a certificate to practice 4272
under this chapter shall be given sufficient choice of continuing 4273
education programs to ensure that the person has had a reasonable 4274
opportunity to participate in continuing education programs that 4275
are relevant to the person's medical practice in terms of subject 4276
matter and level. 4277

The board may require a random sample of persons holding a 4278
certificate to practice under this chapter to submit materials 4279
documenting completion of the continuing medical education 4280
requirement during the preceding registration period, but this 4281
provision shall not limit the board's authority to investigate 4282
pursuant to section 4731.22 of the Revised Code. 4283

(B)(1) Every person holding a certificate under this chapter 4284
to practice medicine and surgery, osteopathic medicine and 4285
surgery, or podiatric medicine and surgery wishing to renew that 4286
certificate shall apply to the board for a certificate of 4287
registration upon an application furnished by the board, and pay 4288
to the board at the time of application a fee of three hundred 4289
five dollars, according to the following schedule: 4290

(a) Persons whose last name begins with the letters "A" 4291
through "B," on or before April 1, 2001, and the first day of 4292
April of every odd-numbered year thereafter; 4293

(b) Persons whose last name begins with the letters "C" 4294
through "D," on or before January 1, 2001, and the first day of 4295
January of every odd-numbered year thereafter; 4296

(c) Persons whose last name begins with the letters "E" 4297
through "G," on or before October 1, 2000, and the first day of 4298
October of every even-numbered year thereafter; 4299

(d) Persons whose last name begins with the letters "H" 4300
through "K," on or before July 1, 2000, and the first day of July 4301
of every even-numbered year thereafter; 4302

(e) Persons whose last name begins with the letters "L" 4303
through "M," on or before April 1, 2000, and the first day of 4304
April of every even-numbered year thereafter; 4305

(f) Persons whose last name begins with the letters "N" 4306
through "R," on or before January 1, 2000, and the first day of 4307
January of every even-numbered year thereafter; 4308

(g) Persons whose last name begins with the letter "S," on or 4309
before October 1, 1999, and the first day of October of every 4310
odd-numbered year thereafter; 4311

(h) Persons whose last name begins with the letters "T" 4312
through "Z," on or before July 1, 1999, and the first day of July 4313
of every odd-numbered year thereafter. 4314

The board shall deposit the fee in accordance with section 4315
4731.24 of the Revised Code, except that the board shall deposit 4316
twenty dollars of the fee into the state treasury to the credit of 4317
the physician loan repayment fund created by section 3702.78 of 4318
the Revised Code. 4319

(2) The board shall mail or cause to be mailed to every 4320
person registered to practice medicine and surgery, osteopathic 4321
medicine and surgery, or podiatric medicine and surgery, a notice 4322
of registration renewal addressed to the person's last known 4323
address or may cause the notice to be sent to the person through 4324
the secretary of any recognized medical, osteopathic, or podiatric 4325
society, according to the following schedule: 4326

(a) To persons whose last name begins with the letters "A" 4327
through "B," on or before January 1, 2001, and the first day of 4328
January of every odd-numbered year thereafter; 4329

(b) To persons whose last name begins with the letters "C" through "D," on or before October 1, 2000, and the first day of October of every even-numbered year thereafter;	4330 4331 4332
(c) To persons whose last name begins with the letters "E" through "G," on or before July 1, 2000, and the first day of July of every even-numbered year thereafter;	4333 4334 4335
(d) To persons whose last name begins with the letters "H" through "K," on or before April 1, 2000, and the first day of April of every even-numbered year thereafter;	4336 4337 4338
(e) To persons whose last name begins with the letters "L" through "M," on or before January 1, 2000, and the first day of January of every even-numbered year thereafter;	4339 4340 4341
(f) To persons whose last name begins with the letters "N" through "R," on or before October 1, 1999, and the first day of October of every odd-numbered year thereafter;	4342 4343 4344
(g) To persons whose last name begins with the letter "S," on or before July 1, 1999, and the first day of July of every odd-numbered year thereafter;	4345 4346 4347
(h) To persons whose last name begins with the letters "T" through "Z," on or before April 1, 1999, and the first day of April of every odd-numbered year thereafter.	4348 4349 4350
<u>(3)</u> Failure of any person to receive a notice of renewal from the board shall not excuse the person from the requirements contained in this section.	4351 4352 4353
<u>(4)</u> The <u>board's</u> notice shall inform the applicant of the renewal procedure. The board shall provide the application for registration renewal in a form determined by the board. The	4354 4355 4356
<u>(5)</u> <u>The</u> applicant shall provide in the application the applicant's full name, principal practice address and residence address, the number of the applicant's certificate to practice,	4357 4358 4359

and any other information required by the board. The 4360

(6)(a) Except as provided in division (B)(6)(b) of this 4361
section, in the case of an applicant who prescribes or personally 4362
furnishes opioid analgesics or benzodiazepines as part of the 4363
applicant's regular practice of medicine and surgery, osteopathic 4364
medicine and surgery, or podiatric medicine and surgery, the 4365
application shall also include evidence that the applicant has 4366
been granted access to the drug database established and 4367
maintained by the state board of pharmacy pursuant to section 4368
4729.75 of the Revised Code. 4369

(b) The requirement in division (B)(6)(a) of this section 4370
does not apply if either of the following is the case: 4371

(i) The state board of pharmacy notifies the state medical 4372
board pursuant to section 4729.861 of the Revised Code that the 4373
applicant has been restricted from obtaining further information 4374
from the drug database. 4375

(ii) The state board of pharmacy no longer maintains the drug 4376
database. 4377

(7) The applicant shall include with the application a list 4378
of the names and addresses of any clinical nurse specialists, 4379
certified nurse-midwives, or certified nurse practitioners with 4380
whom the applicant is currently collaborating, as defined in 4381
section 4723.01 of the Revised Code. ~~The applicant shall execute 4382~~
~~and deliver the application to the board in a manner prescribed by 4383~~
~~the board.~~ Every person registered under this section shall give 4384
written notice to the state medical board of any change of 4385
principal practice address or residence address or in the list 4386
within thirty days of the change. 4387

(8) The applicant shall report any criminal offense to which 4388
the applicant has pleaded guilty, of which the applicant has been 4389
found guilty, or for which the applicant has been found eligible 4390

for intervention in lieu of conviction, since last filing an 4391
application for a certificate of registration. 4392

(9) The applicant shall execute and deliver the application 4393
to the board in a manner prescribed by the board. 4394

(C) The board shall issue to any person holding a certificate 4395
under this chapter to practice medicine and surgery, osteopathic 4396
medicine and surgery, or podiatric medicine and surgery, upon 4397
application and qualification therefor in accordance with this 4398
section, a certificate of registration under the seal of the 4399
board. A certificate of registration shall be valid for a two-year 4400
period. 4401

(D) Failure of any certificate holder to register and comply 4402
with this section shall operate automatically to suspend the 4403
holder's certificate to practice. Continued practice after the 4404
suspension of the certificate to practice shall be considered as 4405
practicing in violation of section 4731.41, 4731.43, or 4731.60 of 4406
the Revised Code. If the certificate has been suspended pursuant 4407
to this division for two years or less, it may be reinstated. The 4408
board shall reinstate a certificate to practice suspended for 4409
failure to register upon an applicant's submission of a renewal 4410
application, the biennial registration fee, and the applicable 4411
monetary penalty. The penalty for reinstatement shall be fifty 4412
dollars. If the certificate has been suspended pursuant to this 4413
division for more than two years, it may be restored. Subject to 4414
section 4731.222 of the Revised Code, the board may restore a 4415
certificate to practice suspended for failure to register upon an 4416
applicant's submission of a restoration application, the biennial 4417
registration fee, and the applicable monetary penalty and 4418
compliance with sections 4776.01 to 4776.04 of the Revised Code. 4419
The board shall not restore to an applicant a certificate to 4420
practice unless the board, in its discretion, decides that the 4421
results of the criminal records check do not make the applicant 4422

ineligible for a certificate issued pursuant to section 4731.14, 4423
4731.56, or 4731.57 of the Revised Code. The penalty for 4424
restoration shall be one hundred dollars. The board shall deposit 4425
the penalties in accordance with section 4731.24 of the Revised 4426
Code. 4427

(E) If an individual certifies completion of the number of 4428
hours and type of continuing medical education required to receive 4429
a certificate of registration or reinstatement of a certificate to 4430
practice, and the board finds through the random samples it 4431
conducts under this section or through any other means that the 4432
individual did not complete the requisite continuing medical 4433
education, the board may impose a civil penalty of not more than 4434
five thousand dollars. The board's finding shall be made pursuant 4435
to an adjudication under Chapter 119. of the Revised Code and by 4436
an affirmative vote of not fewer than six members. 4437

A civil penalty imposed under this division may be in 4438
addition to or in lieu of any other action the board may take 4439
under section 4731.22 of the Revised Code. The board shall deposit 4440
civil penalties in accordance with section 4731.24 of the Revised 4441
Code. 4442

(F) The state medical board may obtain information not 4443
protected by statutory or common law privilege from courts and 4444
other sources concerning malpractice claims against any person 4445
holding a certificate to practice under this chapter or practicing 4446
as provided in section 4731.36 of the Revised Code. 4447

(G) Each mailing sent by the board under division (B)(2) of 4448
this section to a person registered to practice medicine and 4449
surgery or osteopathic medicine and surgery shall inform the 4450
applicant of the reporting requirement established by division (H) 4451
of section 3701.79 of the Revised Code. At the discretion of the 4452
board, the information may be included on the application for 4453
registration or on an accompanying page. 4454

Sec. 5101.061. (A) There is hereby established in the 4455
department of job and family services the office of human services 4456
innovation. The director of job and family services shall 4457
establish the office's organizational structure, may reassign the 4458
department's staff and resources as necessary to support the 4459
office's activities, and is responsible for the office's 4460
operations. The superintendent of public instruction, chancellor 4461
of the Ohio board of regents, director of the governor's office of 4462
workforce transformation, and director of the governor's office of 4463
health transformation shall assist the director of job and family 4464
services with leadership and organizational support for the 4465
office. 4466

(B) Not later than January 1, 2015, the office shall submit 4467
to the governor recommendations for all of the following: 4468

(1) Coordinating services across all public assistance 4469
programs to help individuals find employment, succeed at work, and 4470
stay out of poverty; 4471

(2) Revising incentives for public assistance programs to 4472
foster person-centered case management; 4473

(3) Standardizing and automating eligibility determination 4474
policies and processes for public assistance programs; 4475

(4) Other matters the office considers appropriate. 4476

(C) In its development of the recommendations under division 4477
(B) of this section, the office shall do both of the following: 4478

(1) Have as its goal the coordination and reform of state 4479
programs to assist residents of this state in preparing for life 4480
and the dignity of work, to promote individual responsibility and 4481
work opportunity, and to improve self-sufficiency to increase 4482
income levels; 4483

(2) Not later than three months after the effective date of 4484

this section, in consultation with the Ohio healthier buckeye council, establish clear principles to guide the development of the recommendations, clearly identify problems to be addressed in the recommendations, and make an inventory of all existing state and other resources that the office considers relevant to the development of the recommendations.

(D) The office shall convene the Ohio healthier buckeye council and the directors and staff of the departments, agencies, boards, commissions, and institutions of the executive branch of this state as necessary to develop the recommendations to be submitted to the governor under division (B) of this section. The council, departments, agencies, boards, commissions, and institutions shall comply with all requests and directives that the office makes, subject to the supervision of the chairperson of the council and the directors of the departments, agencies, offices, boards, and commissions. The office also shall convene other individuals interested in the issues that the office addresses in the development of the recommendations to obtain such individuals' input on, and support for, the recommendations.

Sec. 5103.02. As used in sections 5103.03 to 5103.17 of the Revised Code:

(A)(1) "Association" or "institution" includes all of the following:

(a) Any incorporated or unincorporated organization, society, association, or agency, public or private, that receives or cares for children for two or more consecutive weeks;

(b) Any individual, including the operator of a foster home, who, for hire, gain, or reward, receives or cares for children for two or more consecutive weeks, unless the individual is related to them by blood or marriage;

(c) Any individual not in the regular employ of a court, or 4515
of an institution or association certified in accordance with 4516
section 5103.03 of the Revised Code, who in any manner becomes a 4517
party to the placing of children in foster homes, unless the 4518
individual is related to such children by blood or marriage or is 4519
the appointed guardian of such children. 4520

(2) "Association" or "institution" does not include any of 4521
the following: 4522

(a) Any organization, society, association, school, agency, 4523
child guidance center, detention or rehabilitation facility, or 4524
children's clinic licensed, regulated, approved, operated under 4525
the direction of, or otherwise certified by the department of 4526
education, a local board of education, the department of youth 4527
services, the department of mental health and addiction services, 4528
or the department of developmental disabilities; 4529

(b) Any individual who provides care for only a single-family 4530
group, placed there by their parents or other relative having 4531
custody; 4532

(c) A private, nonprofit therapeutic wilderness camp. 4533

(B) "Family foster home" means a foster home that is not a 4534
specialized foster home. 4535

(C) "Foster caregiver" means a person holding a valid foster 4536
home certificate issued under section 5103.03 of the Revised Code. 4537

(D) "Foster home" means a private residence in which children 4538
are received apart from their parents, guardian, or legal 4539
custodian, by an individual reimbursed for providing the children 4540
nonsecure care, supervision, or training twenty-four hours a day. 4541
"Foster home" does not include care provided for a child in the 4542
home of a person other than the child's parent, guardian, or legal 4543
custodian while the parent, guardian, or legal custodian is 4544
temporarily away. Family foster homes and specialized foster homes 4545

are types of foster homes. 4546

(E) "Medically fragile foster home" means a foster home that 4547
provides specialized medical services designed to meet the needs 4548
of children with intensive health care needs who meet all of the 4549
following criteria: 4550

(1) Under rules adopted by the medicaid director governing 4551
medicaid payments for long-term care services, the children 4552
require a skilled level of care. 4553

(2) The children require the services of a doctor of medicine 4554
or osteopathic medicine at least once a week due to the 4555
instability of their medical conditions. 4556

(3) The children require the services of a registered nurse 4557
on a daily basis. 4558

(4) The children are at risk of institutionalization in a 4559
hospital, skilled nursing facility, or intermediate care facility 4560
for individuals with intellectual disabilities. 4561

(F) "Private, nonprofit therapeutic wilderness camp" means a 4562
structured, alternative residential setting for children who are 4563
experiencing emotional, behavioral, moral, social, or learning 4564
difficulties at home or school in which all of the following are 4565
the case: 4566

(1) The children spend the majority of their time, including 4567
overnight, either outdoors or in a primitive structure. 4568

(2) The children have been placed there by their parents or 4569
another relative having custody. 4570

(3) The camp accepts no public funds for use in its 4571
operations. 4572

(G) "Recommending agency" means a public children services 4573
agency, private child placing agency, or private noncustodial 4574
agency that recommends that the department of job and family 4575

services take any of the following actions under section 5103.03 4576
of the Revised Code regarding a foster home: 4577

- (1) Issue a certificate; 4578
- (2) Deny a certificate; 4579
- (3) Renew a certificate; 4580
- (4) Deny renewal of a certificate; 4581
- (5) Revoke a certificate. 4582

~~(G)~~(H) "Specialized foster home" means a medically fragile 4583
foster home or a treatment foster home. 4584

~~(H)~~(I) "Treatment foster home" means a foster home that 4585
incorporates special rehabilitative services designed to treat the 4586
specific needs of the children received in the foster home and 4587
that receives and cares for children who are emotionally or 4588
behaviorally disturbed, chemically dependent, mentally retarded, 4589
developmentally disabled, or who otherwise have exceptional needs. 4590

Sec. 5103.50. (A) As used in this section and sections 4591
5103.51 to 5103.55 of the Revised Code, "private, nonprofit 4592
therapeutic wilderness camp" has the same meaning as in section 4593
5103.02 of the Revised Code. 4594

(B) The director of job and family services shall issue a 4595
license to a private, nonprofit therapeutic wilderness camp that 4596
meets the minimum standards for such camps specified in division 4597
(C) of this section and applies to the director for a license on a 4598
form prescribed by the director. 4599

(C) Both of the following apply as the minimum standards to 4600
be met by a private, nonprofit therapeutic wilderness camp: 4601

(1) The camp shall develop and implement a written policy 4602
that establishes all of the following: 4603

- (a) Standards for hiring, training, and supervising staff; 4604

(b) Standards for behavioral intervention, including standards prohibiting the use of prone restraint and governing the use of other restraints or isolation; 4605
4606
4607

(c) Standards for recordkeeping, including specifying information that must be included in each child's record, who may access records, confidentiality, maintenance, security, and disposal of records; 4608
4609
4610
4611

(d) A procedure for handling complaints about the camp from the children attending the camp, their families, staff, and the public; 4612
4613
4614

(e) Standards for emergency and disaster preparedness, including procedures for emergency evacuation and standards requiring that a method of emergency communication be accessible at all times; 4615
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(f) Standards that ensure the protection of children's civil rights; 4619
4620

(g) Standards for the admission and discharge of children attending the camp, including standards for emergency discharge. 4621
4622

(2) The camp shall cooperate with any request from the director for an inspection or for access to records or written policies of the camp. 4623
4624
4625

Sec. 5103.51. A license issued under section 5103.50 of the Revised Code is valid for five years, unless earlier revoked by the director of job and family services. The license may be renewed. 4626
4627
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Each private, nonprofit therapeutic wilderness camp seeking license renewal shall submit to the director an application for license renewal on such form as the director prescribes. If the camp meets the minimum standards specified in section 5103.50 of the Revised Code, the director shall renew the license. 4630
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Sec. 5103.52. (A) The director of job and family services may 4635
inspect a private, nonprofit therapeutic wilderness camp at any 4636
time. The director may delegate this authority to a county 4637
department of job and family services. 4638

(B) The director may request access to the camp's records or 4639
to the written policies adopted by the camp pursuant to section 4640
5103.50 of the Revised Code. The director may delegate this 4641
authority to a county department of job and family services. 4642

Sec. 5103.53. A private, nonprofit therapeutic wilderness 4643
camp shall not operate without a license issued under section 4644
5103.50 of the Revised Code. If the director of job and family 4645
services determines that a camp is operating without a license, 4646
the director may petition the court of common pleas in the county 4647
in which the camp is located for an order enjoining its operation. 4648
The court shall grant injunctive relief upon a showing that the 4649
camp is operating without a license. 4650

Sec. 5103.54. If a licensed private, nonprofit therapeutic 4651
wilderness camp fails to meet the minimum standards set forth in 4652
section 5103.50 of the Revised Code, the director of job and 4653
family services shall notify the camp that the director intends to 4654
revoke the license. Unless the violation poses an imminent risk to 4655
the life, health, or safety of one or more children attending the 4656
camp, the director shall give the camp ninety days to meet the 4657
minimum standards. If the violation poses an imminent risk to the 4658
life, health, or safety of one or more children attending the camp 4659
or the camp fails to meet the minimum standards within ninety days 4660
of receipt of the notice of revocation, the director shall revoke 4661
the license. An order of revocation under this section may be 4662
appealed in accordance with Chapter 119. of the Revised Code. 4663

Sec. 5103.55. A parent of a child attending a private, nonprofit therapeutic wilderness camp is not relieved of the parent's obligations regarding compulsory school attendance pursuant to section 3321.04 of the Revised Code.

Section 2. That existing sections 355.01, 355.03, 355.04, 2151.011, 2151.421, 3712.04, 3712.99, 4715.14, 4715.30, 4715.302, 4723.28, 4723.481, 4723.486, 4723.487, 4725.092, 4725.16, 4725.19, 4729.12, 4729.75, 4729.80, 4729.86, 4729.87, 4730.25, 4730.41, 4730.48, 4730.53, 4731.055, 4731.22, 4731.281, and 5103.02 of the Revised Code are hereby repealed.

Section 3. Sections 4715.14, 4723.486, 4725.16, 4729.12, 4730.48, and 4731.281 of the Revised Code, as amended by this act, and section 4729.861, as enacted by this act, shall take effect January 1, 2015.

Section 4. Sections 4715.30, 4715.302, 4723.28, 4723.487, 4725.092, 4725.19, 4730.25, 4730.53, 4731.055, and 4731.22 of the Revised Code, as amended by this act, shall take effect April 1, 2015.

Section 5. As used in this section, "licensed health professional authorized to prescribe drugs" means an individual who is authorized by law to prescribe drugs, dangerous drugs, or drug therapy-related devices in the course of the individual's professional practice, including only the following: a dentist licensed under Chapter 4715. of the Revised Code, an advanced practice registered nurse who holds a certificate to prescribe issued under Chapter 4723. of the Revised Code, an optometrist licensed under Chapter 4725. of the Revised Code to practice optometry under a therapeutic pharmaceutical agents certificate, a physician assistant who holds a certificate to prescribe issued

under Chapter 4730. of the Revised Code, and a physician 4693
authorized under Chapter 4731. of the Revised Code to practice 4694
medicine and surgery, osteopathic medicine and surgery, or 4695
podiatric medicine and surgery. 4696

Not later than January 1, 2015, each licensed health 4697
professional authorized to prescribe drugs who prescribes opioid 4698
analgesics or benzodiazepines as part of the professional's 4699
regular practice and each pharmacist licensed under Chapter 4729. 4700
of the Revised Code shall obtain access to the drug database 4701
established and maintained by the State Board of Pharmacy pursuant 4702
to section 4729.75 of the Revised Code, unless the Board has 4703
restricted the professional or pharmacist from obtaining 4704
information from the database or the Board no longer maintains the 4705
database. Failure to comply with this section constitutes grounds 4706
for certificate or license suspension. 4707

Section 6. The General Assembly, applying the principle 4708
stated in division (B) of section 1.52 of the Revised Code that 4709
amendments are to be harmonized if reasonably capable of 4710
simultaneous operation, finds that the following sections, 4711
presented in this act as composites of the sections as amended by 4712
the acts indicated, are the resulting versions of the sections in 4713
effect prior to the effective date of the sections as presented in 4714
this act: 4715

Section 4715.14 of the Revised Code as amended by both Sub. 4716
H.B. 190 and Sub. H.B. 215 of the 128th General Assembly. 4717

Section 4723.487 of the Revised Code as amended by both Sub. 4718
H.B. 303 and Sub. S.B. 301 of the 129th General Assembly. 4719

Section 4725.16 of the Revised Code as amended by both Am. 4720
Sub. H.B. 59 and Am. Sub. H.B. 98 of the 130th General Assembly. 4721

Section 7. Not later than one year after the effective date 4722
of this act, each hospice care program that holds a license under 4723
Chapter 3712. of the Revised Code on the act's effective date and 4724
that provides hospice care and services in a hospice patient's 4725
home shall submit to the Department of Health written evidence 4726
demonstrating that the program is in compliance with section 4727
3712.062 of the Revised Code, as enacted by this act. After a 4728
review of the evidence submitted, if the Department determines 4729
that the program is not in compliance with that section, the 4730
Department may suspend the program's license for not more than six 4731
months and impose a fine not to exceed twenty thousand dollars. 4732

Section 8. The amendments to divisions (B)(49) and (50) of 4733
section 2151.011 of the Revised Code by Am. Sub. H.B. 59 of the 4734
130th General Assembly, which appear in this act and are to take 4735
effect on July 1, 2014, are not accelerated by their inclusion in 4736
this act. 4737

Section 9. (A) The State Medical Board may conduct a pilot 4738
program under which any method of teleconferencing, including 4739
interactive video teleconferencing, may be used for purposes of 4740
any of the Board's committee meetings, including committee 4741
meetings at which licenses or certificates are issued. If a pilot 4742
program is conducted, the Board may permit any of its members to 4743
attend a committee meeting by teleconference in lieu of being 4744
physically present at the meeting. A member who attends a meeting 4745
by teleconference shall be counted in determining whether a quorum 4746
is present at the meeting and shall be permitted to participate in 4747
any vote taken at the meeting. 4748

A pilot program conducted under this section may be commenced 4749
at any time on or after the effective date of this section. The 4750
pilot program shall conclude two years after the date it is 4751
commenced. 4752

After a pilot program conducted under this section concludes, 4753
the Board shall prepare a report of its findings and 4754
recommendations. The report shall include a description of the 4755
effects that the use of teleconferencing had on the Board's 4756
committee and licensing operations, Board member participation in 4757
committee meetings, and public attendance at committee meetings. 4758
The Board shall submit the report to the Governor and, in 4759
accordance with section 101.68 of the Revised Code, the General 4760
Assembly. 4761

(B) Notwithstanding division (C) of section 121.22 of the 4762
Revised Code, the requirement for a member's presence in person at 4763
a meeting to be considered part of a quorum or to vote does not 4764
apply to any meeting at which the Board permits the use of 4765
teleconferencing under a pilot program conducted under this 4766
section. 4767