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OHIO LEGISLATIVE SERVICE COMMISSION

Office of Research
and Drafting

Legislative Budget
Office

H.B. 177
133rd General Assembly

Bill Analysis

Version: As Introduced

Primary Sponsor: Rep. Brinkman

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Summary

- Allows an advanced practice registered nurse (APRN) who is a certified nurse practitioner, clinical nurse specialist, or certified nurse-midwife to practice without a collaborating physician or podiatrist.
- Eliminates the requirement that the APRN enter into a standard care arrangement with one or more collaborating physicians or podiatrists and practice in accordance with the agreement.
- Makes conforming changes to the laws governing APRNs and other health professionals.
- Prohibits a physician from issuing a schedule II controlled substance prescription from a convenience care clinic.
- Allows a school district or youth sports organization to authorize any licensed health professional to assess an athlete for a concussion and to clear the athlete to play.
- Names the act the “Better Access, Better Care Act.”

Detailed Analysis

Advanced practice registered nurses – collaboration and standard care arrangements

H.B. 177 makes two main changes to the law governing advanced practice registered nurses (APRNs). First, it eliminates the requirement that an APRN who is designated as a clinical nurse specialist, certified nurse practitioner, or certified nurse-midwife practice in collaboration with one or more physicians or podiatrists.¹ Under the collaboration requirement, a physician or podiatrist with whom an APRN has entered into a standard care arrangement must be

¹ R.C. 4723.43.

continuously available to communicate with the nurse either in person or by electronic communication.²

Second, the bill eliminates the standard care arrangement and the requirement that an APRN practice in accordance with it.³ Under existing law, a standard care arrangement is a written, formal guide for planning and evaluating a patient's health care that is developed by one or more collaborating physicians or podiatrists and the APRN.⁴ It must contain certain information, including the following:

- Criteria for referral of a patient by the nurse to a collaborating physician or podiatrist;
- A process for the nurse to obtain a consultation with a collaborating physician or podiatrist or another physician or podiatrist;
- A plan for coverage in instances of emergency or planned absences of either the nurse or collaborating physician or podiatrist;
- The process for resolving disagreements between the nurse and a collaborating physician or podiatrist regarding matters of patient management.⁵

Conforming changes

Because the bill allows an APRN who is a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to practice without a collaborating physician or podiatrist and eliminates the requirement that the nurse enter into a standard care arrangement with one or more collaborating physicians or podiatrists, it makes conforming changes to the laws governing nurses and other health professionals.⁶

Advanced pharmacology – Board of Nursing approval

At present, an applicant for a license to practice as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner must submit evidence of successfully completing

² R.C. 4723.01.

³ R.C. 4723.431 (repealed).

⁴ R.C. 4723.01.

⁵ R.C. 4723.431.

⁶ R.C. 1751.67 (insurance and maternity benefits), 2133.211 (do-not-resuscitate orders and legal immunity), 3701.926 (patient centered medical home education pilot project), 3727.06 (admitting hospital patients), 3923.233 (insurance reimbursement for services performed by a certified nurse-midwife), 3923.301 (insurance reimbursement for services performed by a certified nurse-midwife), 3923.63 (insurance and maternity benefits), 3923.64 (insurance and maternity benefits), 4723.07 (Board of Nursing rule-making authority), 4723.28 (Board of Nursing disciplinary actions), 4723.42 (advanced practice registered nurse license renewals), 4723.432 (cooperation in Medical and Dental Board investigations), 4723.44 (unauthorized practice), 4723.481 (advanced practice registered nurse prescriptive authority), 4723.50 (Board rules regarding standard care arrangements), 4731.22 (Medical Board disciplinary actions), 4731.27 (physicians and standard care arrangements), 4731.281 (physician license renewals), 4761.17 (respiratory care supervision), 5164.07 (Medicaid and maternity benefits), and 5164.73 (division of Medicaid payments between nurse and collaborating physician or podiatrist).

a course of study in advanced pharmacology that is approved by the Board of Nursing in accordance with standards established by the Board in rule. The bill maintains the requirement that an applicant complete the course of study, but no longer requires that it be approved by the Board.⁷ Accordingly, the bill eliminates the requirement that the Board adopt rules governing standards for course approval.⁸

Physician issuance of schedule II prescriptions from convenience care clinics

The bill prohibits a physician from issuing to a patient a prescription for a schedule II controlled substance from a convenience care clinic. It does not define “convenience care clinic.”⁹ Ohio law currently prohibits APRNs and physician assistants from doing the same.¹⁰

Youth concussions – assessments and clearances

When a student or individual exhibits symptoms consistent with a concussion that is sustained while playing in or practicing for an athletic event sponsored by a school district or youth sports organization, current Ohio law requires the student or individual to be removed from play or practice.¹¹ The student or individual cannot return to play or practice until he or she has been (1) assessed by a physician or another licensed health care professional authorized by the school district or youth sports organization to conduct such assessments and (2) cleared to return to play or practice by the physician or licensed health care professional.

Under current law, a school district or youth sports organization may authorize a licensed health care professional other than a physician to conduct assessments and grant clearances only if the professional acts as follows: (1) in consultation with a physician, (2) pursuant to a physician’s referral, (3) in collaboration with a physician, or (4) under the physician’s supervision. The bill removes these conditions and instead allows a district or organization to authorize any licensed health care professional to conduct assessments and grant clearances. Under law unchanged by the bill, a licensed health care professional is an individual, other than a physician, who is authorized under Ohio law to practice a health care profession.¹²

History

Action	Date
Introduced	03-28-19

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⁷ R.C. 4723.482.

⁸ R.C. 4723.50.

⁹ R.C. 4731.058.

¹⁰ R.C. 4723.481 and 4730.411.

¹¹ R.C. 3313.539 and 3707.511.

¹² R.C. 3707.511(A)(2).